

# THE RICHARDS LIBRARY



## Board of Trustees Meeting Agenda

Tuesday, April 7, 2026 @ 10:00 AM

Warrensburg Volunteer Fire Company's Community Room, 18 Elm Street, Warrensburg, NY 12885

- I Call to Order and Roll Call of Members
- II Consent Agenda
  - Approval of Mtg. Agenda
  - Approval of Prior Mtg. Minutes
  - Treasurer's Report: Financials
- III Period of Public Expression: 15 minutes total for comments
- IV Correspondence: *Commerce Bank, Caldwell-Lake George Library*
- V Director's Report: *see attached*
- VI Committee Reports
  - a. Personnel: *n/a*
  - b. Budget & Finance: *Workshop meeting reviewed preliminary 2027 budget*
  - c. Building & Grounds: *n/a*
  - d. Ad Hoc: *Increase Archival Attention Grant – on hold; 125<sup>th</sup> Anniversary Committee – workshop meeting in Mar.*
  - e. Outreach: *n/a*
  - f. Policy: *n/a*
- VII Old Business
  - Vacancy: maintenance/handyperson
  - Letter to WCSD BOE – *2 letters sent in Mar.*
  - Emergency Closure – *Building repairs*
- VIII New Business
  - 2025 Tax Return and Audit Review
  - SAMs/DASNY - *new application*
  - 2025 Annual Report
  -
- IX Other Business
  - Town Board Meetings
    - o Report from Susan for the Warrensburg meeting (2/11 @ 7:00 PM)
    - o Report from Sarah for the WCSD BOE meeting (3/9 @ 6:00 PM)
    - o Sarah and Sam will attend the Thurman meeting (4/16 @ 4:30 PM)
    - o Need volunteer for the Warrensburg meeting (5/13 @ 7:00 PM)
  - WCSD May 20, 2026 - Tax Levy Vote for the Library (and school budget)
  - 2026 SALS Annual Meeting
- X Period of Public Expression: 15 minutes total for comments
- XI Next Committee Workshop: Tuesday, April 21, 2026 @ 10:00 AM – *location?*
- XII Next Board Meeting: Tuesday, May 5, 2026 @ 10:00 AM – *location?*
- XIII Adjournment

**The Richards Library  
Board of Trustees Meeting Minutes  
Tuesday, March 3, 2026**

Present: Sarah Gebbie-Measeck, Mary Beadnell, Samantha Newcomb, Esther McTague, John Schroeter, and Shelby Burkhardt, Library Director

Excused: Becky Lawler, Gina Coburn, Susan Matzner

Meeting, held at Warrensburg Fire House Community Room, was called to order at 10:02am by President Sarah.

Motion to accept and approve the consent agenda, financials for Dec 2025, Jan 2026 and Feb 2026; and meeting minutes for January, February and February Emergency Meeting was made by John, seconded by Samantha, and approved by Board.

Period of Public Expression:

- None

Correspondence:

- Erie Insurance - Notice of 10% increase in premium in accordance with NYS law
- SALS - Received info on JA 3.5 % billing increase; new directors handbook
- SALS - Notice of SALS annual dinner meeting May 18

Director's report:

- Tapestry was repaired and returned
- Light work in the Adult room was completed, some parts retained for future use; Mr Electric will work with Davis Ulmer on air compressor repair
- Ed Ostberg checked signage damage, can be reinstalled
- Knoxbox ordered and will be installed outside
- OATS-SALS received additional funding- we will investigate mini grant
- Board needs to approve NYS Annual Library Report before it is sent- deadline may be extended

Executive Session:

Sarah made a motion, seconded by John, to convene an Executive Session at 10:57 am for discussion of a personnel matter. Motion passed. John made a motion, seconded by Mary, to return to regular session at 11:19. Approved.

Committee Reports

- Budget and Finance: A motion was made by Sarah, seconded by John, and approved, to exceed the 2% tax cap, and request an increase of \$28,000 for the next calendar year. Letter will be sent to BOE and Sarah will attend BOE meeting March 9, 2026.
- Archive- Archival Grant currently on hold
- Personnel Committee: Discussion of possibly restructuring staff duties
- Ad Hoc: 125 Anniversary Committee - Samantha answered questions about framework created for the event; discussion ensued about workshop on March 17 which will be devoted to 125th anniversary celebration

- Building and Grounds: No responses received for Building and Grounds position. Duties of the position were discussed, post will be reworked and reposted.
- Outreach - John – on hold until library materials again become available
- Policy - minor changes to Emergency Preparedness policy will be made after more info is obtained.

#### New Business

#### Other Business:

- Town Board Meetings
  - Sarah and Samantha will attend the Thurman Town meeting on 4/16/26
  - Susan will attend the Warrensburg Town Meeting on 2/11/26
  - Sarah will attend Warrensburg CSD BOE meeting 3/9/26

Public Expression: none

Next Board Meeting set for Tuesday, April 7, 2026, possibly Wrbg Fire House Community Room

Next Committee Workshop scheduled for March 17, 2026 at 10:00am, possibly at Wrbg Chamber Office

Motion was made by Sarah, seconded by John and approved by Board to adjourn at 11:50am.

**Approved by The Richards Library Board of Trustees on**

**Richards Library**  
**Monthly Statement of Revenues & Expenses**  
**March 2026**

Accrual Basis

|                                 | <u>Mar 26</u>         |
|---------------------------------|-----------------------|
| Ordinary Income/Expense         |                       |
| Expense                         |                       |
| OPERATING EXPENSES              | 7,325                 |
| PAYROLL, WAGES, BENEFITS & EXPE | <u>12,737</u>         |
| Total Expense                   | <u>20,062</u>         |
| Net Ordinary Income             | -20,062               |
| Other Income/Expense            |                       |
| Other Expense                   |                       |
| INSURANCE CLAIM (2026)          | -2,771                |
| DESIGNATED FUNDS EXPENDED       | <u>-3,463</u>         |
| Total Other Expense             | <u>-6,234</u>         |
| Net Other Income                | <u>6,234</u>          |
| Net Income                      | <u><u>-13,828</u></u> |

# Richards Library

## Monthly Funds Activity Report

### March 2026

Accrual Basis

| Type                                            | Date       | Num     | Name                               | Memo                                                                   | Debit     | Credit    |
|-------------------------------------------------|------------|---------|------------------------------------|------------------------------------------------------------------------|-----------|-----------|
| <b>Arrow Bank #-6131 -Operat &amp; DF</b>       |            |         |                                    |                                                                        |           |           |
| <b>12.39a · Operating Account - GFNB</b>        |            |         |                                    |                                                                        |           |           |
| Check                                           | 03/10/2026 | A/W     | SPECTRUM ENTERPRISE #142279801     | 2/25/26-3/24/26                                                        |           | 76.93     |
| Bill Pmt -Check                                 | 03/10/2026 | 7093    | MR. ELECTRIC OF QUEENSBURY         | DIAGNOSTIC - PRESSURE SWITCH                                           |           | 274.00    |
| Bill Pmt -Check                                 | 03/10/2026 | 7094    | SOUTHERN ADIRONDACK LIBRARY SYSTEM | AUTOMATION FEES - FEBRUARY 2026                                        |           | 479.35    |
| Bill Pmt -Check                                 | 03/10/2026 | 7095    | SOUTHERN ADIRONDACK LIBRARY SYSTEM | MOVIE LICENSE RENEWAL                                                  |           | 223.00    |
| Check                                           | 03/10/2026 | DF ADJ  |                                    | POST DF BOARD APPROVAL - ADJUST TO BUDGETED FUNDS                      |           | 3,463.42  |
| Check                                           | 03/12/2026 | A/W     | VERIZON                            | 2/22/26-3/21/26                                                        |           | 50.84     |
| General Journal                                 | 03/13/2026 | PAYR... |                                    | -MULTIPLE-                                                             |           | 6,301.53  |
| General Journal                                 | 03/13/2026 | PAYR... |                                    | -MULTIPLE-                                                             | 0.00      |           |
| Check                                           | 03/15/2026 | A/W     | SPECTRUM ENTERPRISE #143161701     | 3/4/26-4/3/26                                                          |           | 130.00    |
| Check                                           | 03/16/2026 | ONLINE  | COMMERCE BANK                      | VISA #1697 ONLINE PAYMENT                                              |           | 560.01    |
| Bill Pmt -Check                                 | 03/17/2026 | 7096    | WARRENSBURG CHAMBER OF COMMERCE    | REPLACE CK #7079 LOST IN MAIL                                          |           | 110.00    |
| Bill Pmt -Check                                 | 03/17/2026 | 7097    | SOUTHERN ADIRONDACK LIBRARY SYSTEM | BARCODE LABELS                                                         |           | 25.73     |
| Check                                           | 03/25/2026 | A/W     | NATIONAL GRID                      | 2/6/26-3/9/26                                                          |           | 1,428.09  |
| Bill Pmt -Check                                 | 03/25/2026 | 7098    | NATIONAL BUSINESS TECHNOLOGIES*    | 3/9/26-4/8/26 + OVERAGE                                                |           | 76.37     |
| General Journal                                 | 03/27/2026 | PAYR... |                                    | -MULTIPLE-                                                             |           | 6,301.97  |
| General Journal                                 | 03/27/2026 | PAYR... |                                    | -MULTIPLE-                                                             | 0.00      |           |
| Bill Pmt -Check                                 | 03/31/2026 | 7099    | G A BOVE & SONS, INC               | 336.0 GALLONS                                                          |           | 59.07     |
| Total 12.39a · Operating Account - GFNB         |            |         |                                    |                                                                        | 0.00      | 19,560.31 |
| <b>12.39c · OATS Grant Funds</b>                |            |         |                                    |                                                                        |           |           |
| General Journal                                 | 03/13/2026 | PAYR... |                                    | RECLASSIFY PAYMENT OF OATS PAYROLL EXPENSE                             | 0.00      |           |
| General Journal                                 | 03/27/2026 | PAYR... |                                    | RECLASSIFY PAYMENT OF OATS PAYROLL EXPENSE                             | 0.00      |           |
| Total 12.39c · OATS Grant Funds                 |            |         |                                    |                                                                        | 0.00      | 0.00      |
| <b>Insurance Claim #A00007437086</b>            |            |         |                                    |                                                                        |           |           |
| Deposit                                         | 03/08/2026 |         |                                    | Deposit                                                                | 2,770.86  |           |
| Total Insurance Claim #A00007437086             |            |         |                                    |                                                                        | 2,770.86  | 0.00      |
| <b>ACF-Archiving &amp; Young Adult Col</b>      |            |         |                                    |                                                                        |           |           |
| General Journal                                 | 03/13/2026 | PAYR... |                                    | RECLASSIFY - PAYMENT OF ARCHIVAL GRANT PAYROLL EXPENSE                 | 0.00      |           |
| General Journal                                 | 03/27/2026 | PAYR... |                                    | RECLASSIFY - PAYMENT OF ARCHIVAL GRANT PAYROLL EXPENSE                 | 0.00      |           |
| Total ACF-Archiving & Young Adult Col           |            |         |                                    |                                                                        | 0.00      | 0.00      |
| <b>DF - 2026 Buildings &amp; Grounds</b>        |            |         |                                    |                                                                        |           |           |
| Transfer                                        | 03/10/2026 |         |                                    | TRANSFER FROM OPERATING SAVINGS SAVINGS TO DF CHECKING BUILDING & G... | 10,000.00 |           |
| Check                                           | 03/10/2026 | DF ADJ  |                                    | POST DF BOARD APPROVAL - ADJUST TO BUDGETED FUNDS                      | 3,463.42  |           |
| Total DF - 2026 Buildings & Grounds             |            |         |                                    |                                                                        | 13,463.42 | 0.00      |
| <b>DF - 2026 Grant Sponsored CapEx</b>          |            |         |                                    |                                                                        |           |           |
| Transfer                                        | 03/10/2026 |         |                                    | TRANSFER FROM OPERATING SAVINGS SAVINGS TO DF CHECKING GRANT SPON...   | 980.00    |           |
| Total DF - 2026 Grant Sponsored CapEx           |            |         |                                    |                                                                        | 980.00    | 0.00      |
| Total Arrow Bank #-6131 -Operat & DF            |            |         |                                    |                                                                        | 17,214.28 | 19,560.31 |
| <b>(12.39) · OPERATING SAVINGS #9012</b>        |            |         |                                    |                                                                        |           |           |
| <b>12.39d · Non-Designated Operating Saving</b> |            |         |                                    |                                                                        |           |           |
| Transfer                                        | 03/10/2026 |         |                                    | TRANSFER FROM OPERATING SAVINGS SAVINGS TO DF CHECKING GRANT SPON...   |           | 980.00    |
| Transfer                                        | 03/10/2026 |         |                                    | TRANSFER FROM OPERATING SAVINGS SAVINGS TO DF CHECKING BUILDING & G... |           | 10,000.00 |
| Total 12.39d · Non-Designated Operating Saving  |            |         |                                    |                                                                        | 0.00      | 10,980.00 |

Richards Library  
Monthly Funds Activity Report  
March 2026

Accrual Basis

| Type                                    | Date | Num | Name | Memo | Debit     | Credit    |
|-----------------------------------------|------|-----|------|------|-----------|-----------|
| Total (12.39) · OPERATING SAVINGS #9012 |      |     |      |      | 0.00      | 10,980.00 |
| TOTAL                                   |      |     |      |      | 17,214.28 | 30,540.31 |

## THE RICHARDS LIBRARY



### Director's Report

April 3, 2026

- Emergency closure to the public since 02/09/2026
    - Received quote proposal from Davis Ulmer/SRI for sprinkler system work in upstairs bathroom – *see attached*
  - Some Library staff came in sporadically for partial shifts to help with the following: Archive mitigation/accessioning, miscellaneous circulation tasks, and answering phone calls.
  - 2025 Tax Documents taken to Warrensburg Town Hall for public access.
  - 2025 Annual Report - *due to SALS by end of day April 14*
  - Invited to Warrensburg Elementary School's Open House on May 13 (6-8 PM) - *tentative yes*
  - Knoxbox received – *awaiting installation*
  - Read It Forward (RIF) - *planning sessions with SALS*
  - March Program:
    - Read at Small Tales
- \*\*All other programs cancelled due to emergency closure\*\***

### Upcoming Events & Programs

**\*\* Events can be found on The Richards Library website, our Facebook page, or at the Library. \*\***

- **Programs and private bookings are postponed for April.**
  - **Red Cross Blood Drive scheduled for April 3 was moved to Warrensburg DEC building. "Sponsored" by local Girl Scouts Troops.**
- **Warrensburg Repair Cafe, May 2, 9:30-11:30 AM at Warrensburg Volunteer Fire Company, 18 Elm Street.**

### Statistics for the Year

Monthly statistics for February and March will be shared at the next meeting. Library closed to the public as of 2/9. Answered various reference questions via phone, Facebook messenger, and email.

Respectfully submitted,

*Shelby Burkhardt*

Library Director

SRI Fire & Security  
2392 Route 9  
Mechanicville, NY 12118  
518.459-2776



## Quote Proposal

**Attn: Richards Library**

**Project: 36 Elm Street Warrensburg, NY**

**SRI Fire & Security** is pleased to on the above referenced project, provide labor and material to perform the scope of work described below. All work to be performed during regular work hours 7:00am-3:30pm.

**We propose the sum of \$4,676.00 tax not included**

- *Rework fire sprinkler drum drips and (3) fire sprinkler heads that froze and caused leak. New dry fire sprinkler heads will be added in the place of existing fire sprinkler heads.*

### **Exclusions:**

1. Painting of Pipe
2. Cutting or patching of sheetrock/wood/metal walls
3. Electrical wiring of fire protection devices
4. Premium/ overtime/shift work
5. Floor protection for lifts
6. Pe stamped drawings and calculations
7. Sales Tax. If you are tax exempt, you are required to provide us with a state sales tax certificate.
8. Unknown or concealed physical conditions, including but not limited to asbestos and lead, that require an increase to our cost and/or time in performance of the above scope of work. Any abatement work is specifically excluded.



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9. Seismic Bracing of any piping.
10. Permit, Fees, or Bonds
11. Plumbing and copper piping or fittings
12. Underground
13. Attic or concealed space protection
14. Dry system
15. Testing fire sprinkler system in temperatures below 45 degrees
16. If fire watch is required, it will be provided by others.
17. ***Davis-Ulmer Enterprise, for formal bid documents, is not a Disadvantaged Business Enterprise. Furthermore, no DBE, MWBE or other minority program participation goals or requirements are included or inferred. Should this project involve DBE, MWBE or other minority program participation goals or requirements please advise in writing regarding the specific nature of those goals or requirements and specifically how they impact Davis-Ulmer Enterprise.***

**Credit Approval must be established before work is scheduled.**

**\* Payments can be made [Pay Your Invoice Online](#).**

***Ask your sales representative on ACH information***

This proposal is valid for **30 days** from the date of proposal and our price is based on mutually agreeable contract terms and conditions.

**Due to the recent implementation of tariffs on goods originating from China, Mexico and Canada, and other announced actions, prices will be modified as costs are passed to us by our vendors. The increase will represent the increased cost that Davis Ulmer incurs on affected products and will vary by product category based upon a variety of factors as dictated by the manufacturers of such products.**

**TERMS AND CONDITIONS :**

1. **SERVICE OF THE FIRE PROTECTION EQUIPMENT:** The Client agrees to purchase and Company agrees to provide in accordance with these terms and conditions services for the purpose of inspecting and testing Client's fire protection equipment in accordance with the terms and condition of this agreement. The Company will be permitted, at all reasonable times, to enter the Property indicated above to conduct the inspection and testing as outlined in this Agreement. The Company will be permitted to gather information, data on the Subscriber's systems (outlined in this agreement) and retain that information, data for use as the Company deems necessary. The Company may or may not use software to collect, view and or store collected information, data in any format necessary to use as needed.
2. **TERMS AND RENEWAL OF AGREEMENT:** Client agrees and acknowledges that this Agreement shall commence on the Effective Date or from the date of acceptance by Company whichever occurs later unless terminated as provided herein and continue for the term indicated by customer in Section III: TERM (the initial term). At the conclusion of the Initial Term, this Agreement shall automatically extend for successive terms equal to the Initial Term unless either party gives written notice to the other party at least thirty (30) days prior to the end of the then current term.
3. **PRICE AND PAYMENT:** The charge for the work agreed to be performed herein shall include all labor, as described in paragraph 4.A, per diem and travel. Client agrees to pay company for the Term(s) of this Agreement, Company's applicable charges for testing and inspection services and for service calls as set forth under this Agreement. With approved credit, all invoices are due and payable in full according to the stated terms, net 30 days and interest at a rate of (1 ½%) on all unpaid invoices (30) days past due. If payment for work provided in this agreement is not paid



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## ML25-A000 FQ

when due, Client agrees to pay all costs of collection including attorneys' fees. Charges for inspection services or rates for basic or emergency service in any subsequent year of this agreement shall not exceed 115% of the prior year.

**4. INSPECTIONS AND SERVICE:** For the agreed on amount, as shown on the attached Proposal, during the term(s) of this Agreement, Company agrees to provide inspection, certification, service and parts as follows:

**A.** Periodic inspections of the fire protection equipment described in our attached Proposal means to inspect, test, and adjust the systems to assure components thereof are operating within the manufacturer's acceptable standards. Client will be notified, in writing, of any components found not to be within accepted operating standards. Sprinkler inspections are not intended to and will not address the adequacy of the system design or installation of systems not installed by Davis Ulmer Fire Protection. Davis Ulmer Fire Protection performs inspections of the sprinklers, pipe, fittings, and other components that are accessible and not in concealed spaces visually and from the floor of the facility, and only for the conditions listed in this report or as otherwise required by NFPA 25. Components will be repaired or replaced only upon written authorization of the Client and invoiced at the service rates (s) set forth under the Clarifications of the Proposal. The frequency of each inspection shall be identified within the Proposal, beginning with the first inspection.

**B.** Any additional work, material or services outside the scope of this Agreement, which is requested by the Client and furnished by the Company, may be provided by the Company at its sole discretion. Further, such additional work, material or services shall be delivered under the terms of this Agreement, and by execution hereof. Client acknowledges that this Section V shall be incorporated into and become a part of any order for such additional work, equipment or services.

**C.** If in the sole determination of the Company, and at any time prior to or during the term of this Agreement, the equipment or any portion of it cannot be adequately inspected, repaired or adjusted on-site to bring it to an acceptable condition, Company shall have the right, at its discretion, to cancel this Agreement. If, alternatively and in the sole determination of the Company, portions of the system cannot be brought up to acceptable level of operation through service and maintenance, in lieu of canceling the Agreement, Company may reduce the scope of the work and the inspection and maintenance charge shall be adjusted accordingly.

**D.** Repair(s), diagnosis, addition(s) change(s), relocation(s) or emergency services are not included within the inspection amount quoted. These services will not be provided without the authorization of the Client and will be invoiced at the company's then current hourly rate for services, including travel charges and per-diem. Service calls during normal working hours will be invoiced based upon cost portal to portal and a (2) hour minimum. After hours service calls will be based upon portal to portal and a (3) hour minimum. Client also agreed to pay Company an overtime rate of (1 ½) times the hourly rate for service(s) required at other than normal working hours for the Company except for Sundays and Holidays which will be at an overtime rate of (2) times the hourly rate of service. Normal working hours for the Company are, 8:00 AM – 5:00 PM, Monday through Friday, excluding holidays. Service parts and applicable material will be charged out in accordance with Company's current established pricing, not to exceed the Manufacturer's current published list price.

**E.** Company, following each inspection, will provide to Customer a written "Report of Inspection" ("Report"). If required and/or with prior written authorization, Company will provide copies of the Report to the local or state authority having jurisdiction on behalf of Customer. If requested by Customer, a copy of the Report will also be forwarded to Customer's insurance company. The Report and recommendations, if any, by Company are only advisory in nature and are intended to assist Customer in reducing the possibility of loss to the Property by indicating obvious defects or impairments to the system(s) which were discovered by Company's inspection and which should receive prompt attention.

**5. LIMITATION OF LIABILITY:** CLIENT ACKNOWLEDGES THAT COMPANY IS NOT AN INSURER, THAT CLIENT SHALL OBTAIN THE TYPE AND AMOUNT OF INSURANCE COVERAGE WHICH IT DETERMINES NECESSARY, AND THAT THE PAYMENTS MADE TO COMPANY BY CLIENT ON THIS PROJECT ARE BASED UPON THE VALUE OF THE SYSTEM AND/OR SERVICES PROVIDED AND ARE UNRELATED TO THE VALUE OF CLIENT'S PROPERTY OR BUSINESS OR ANY POTENTIAL LIABILITY OF DAMAGE TO CLIENT ARISING OUT OF THE WORK PERFORMED BY COMPANY. IN RECOGNITION OF THE RELATIVE RISKS AND BENEFITS TO THE CLIENT AND TO COMPANY RESULTING FROM THE WORK PERFORMED BY COMPANY, THE RISKS HAVE BEEN ALLOCATED SUCH THAT THE CLIENT, AS WELL AS THE CLIENT'S ASSIGNS, AGENTS, AND REPRESENTATIVES, AGREE, TO THE FULLEST EXTENT PERMITTED BY LAW, TO LIMIT THE LIABILITY OF COMPANY, ITS OFFICERS, DIRECTORS, EMPLOYEES AND COMPANY'S PARENT, SUBSIDIARIES, AFFILIATES, CONSULTANTS, SUBCONTRACTORS, VENDORS, TO A MAXIMUM OF \$5,000 OR THE AMOUNT OF THE CONTRACT/PRICE OF WORK BEING PERFORMED, WHICHEVER IS LESS, AND CLIENT DOES HEREBY RELEASE DAVIS ULMER FIRE PROTECTION FROM ANY CLAIMS IN EXCESS OF SAID LIMIT. THIS LIMITATION OF LIABILITY SHALL APPLY TO ALL JUDGMENTS, CLAIMS, LIABILITY, COSTS, CLAIM EXPENSES, AND ALL OTHER DAMAGES OR LOSSES OF ANY NATURE, INCLUDING ATTORNEYS' FEES (COLLECTIVELY "DAMAGES") SUSTAINED BY CLIENT OR ANY OTHER PARTY CLAIMING BY OR THROUGH CLIENT. THIS LIMITATION OF LIABILITY SHALL APPLY, 1.) REGARDLESS OF THE AMOUNT OF ANY DAMAGES SUSTAINED, IF ANY, AS A RESULT OF THIS WORK; AND, 2.) EVEN IF THE DAMAGES ARE ACTUALLY CAUSED OR ALLEGED TO BE CAUSED BY THE NEGLIGENCE, BREACH OF WARRANTY, VIOLATION OF A STATUTE, ORDINANCE, REGULATION, STANDARD OR RULE, DEFECTIVE PRODUCTS, , OR OTHER FAULT OF COMPANY OR COMPANY'S PARENT, SUBSIDIARIES, AFFILIATES, CONSULTANTS, SUBCONTRACTORS, VENDORS, OR THEIR RESPECTIVE EMPLOYEES, AGENTS OR REPRESENTATIVES. SHOULD CLIENT DESIRE A DIFFERENT LIMITATION OF LIABILITY, SUCH IS AVAILABLE AS AN ADDITIONAL SERVICE AT AN ADDITIONAL COST. CLIENT AGREES TO REQUIRE IT INSURANCE POLICIES TO BE ENDORSED SO AS TO WAIVE ALL RIGHTS OF SUBROGATION AGAINST COMPANY.

### 6. WARRANTIES:

**A.** EXCEPT AS SPECIFICALLY SET FORTH IN THIS AGREEMENT, THE COMPANY MAKES NO WARRANTIES, EXPRESS OR IMPLIED, AS TO ANY MATTER WHATEVER, INCLUDING WARRANTIES OF MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSE, AND THERE ARE NO WARRANTIES OR REPRESENTATIONS WHICH EXTEND BEYOND THE FACE OF THIS AGREEMENT.



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**ML25-A000**

**FQ**

**B. COMPANY DOES WARRANT THAT SERVICE UNDER THIS AGREEMENT WILL BE COMPETENT AND THAT PARTS INSTALLED ON THE SYSTEM IN CONNECTION WITH SERVICE PROVIDED UNDER THIS AGREEMENT WILL MEET MANUFACTURER'S SPECIFICATIONS AT THE TIME THEY ARE INSTALLED. FAILURES TO PERFORM CONSISTENTLY WITH THIS WARRANTY WILL BE REMEDIED SOLELY BY THE COMPANY DURING THE TERM OF THIS AGREEMENT, BY CORRECTLY RE-PERFORMING NONCOMPLYING SERVICE(S) OR REPAIRING OR REPLACING DEFECTIVE MATERIALS PROVIDED BY THE COMPANY, UPON WRITTEN NOTICE TO THE COMPANY BY THE CLIENT DURING THE TERM(S) OF THIS AGREEMENT.**

**C. THE COMPANY DOES NOT KNOW AND DOES NOT REPRESENT THAT THE CURRENT FIRE PROTECTION SYSTEM ON THE PROPERTY OF CLIENT WAS ORIGINALLY DESIGNED AND INSTALLED IN SUCH A WAY THAT THE SYSTEM WILL PERFORM AS ORIGINALLY INTENDED OR IS SUITABLE AND SUFFICIENT FOR ITS INTENDED PURPOSE GIVEN THE WAY IN WHICH THE PROPERTY HAS BEEN OR WILL BE USED, RECONFIGURED OR MAINTAINED. THIS AGREEMENT IS NOT A GUARANTEE OR WARRANTY THAT THE SYSTEM WILL IN ALL CASES (i) PROVIDE THE LEVEL OF PROTECTION FOR WHICH IT WAS ORIGINALLY INTENDED, (ii) IS FREE OF ALL DEFECTS AND DEFICIENCIES, AND (iii) IS IN COMPLIANCE WITH ALL APPLICABLE CODES. CLIENT AGREES THAT IT HAS NOT RETAINED COMPANY TO MAKE THESE ASSESSMENTS AS PART OF THIS AGREEMENT. ANY SUCH ASSESSMENT MUST BE BY A SEPARATE AGREEMENT SUBJECT TO THESE TERMS AND CONDITIONS. COMPANY FURTHER DOES NOT REPRESENT, GUARANTEE OR WARRANT THAT ANY EQUIPMENT REFERRED TO IN THIS AGREEMENT OR ANY SERVICE OR INSPECTION PROVIDED BY IT UNDER THIS AGREEMENT WILL RESULT IN A SYSTEM WHICH WILL OPERATE AS DESIGNED, OR IS SUITABLE FOR ANY PARTICULAR PURPOSE, OR WILL PREVENT ANY LOSS BY BURGLARY, FIRE OR OTHERWISE, OR WILL IN ALL CASES OR ANY PARTICULAR CASE AVERT OR PREVENT RISKS, LOSSES, OR OTHER OCCURRENCES, OR THE CONSEQUENCES THEREFROM, WHICH THE EQUIPMENT OR SERVICES WERE OR ARE DESIGNED TO PERFORM, DETECT OR AVERT.**

**D. The Company is not responsible for any damages due to: (1) incompatibility of materials within a CPVC piping system, or (2) corrosion, or deterioration of piping due to Customer's water supply, atmospheric conditions, soil quality, or any other condition at Customer's facility that adversely affects the integrity of the fire protection system.**

**E. Company will make every reasonable effort to prevent the discharge of water into or onto areas of landscaping, decorative pavement, etc., at the Property, however it is Customer's responsibility to provide sufficient and readily accessible means to accept the full flow of water that may be required by tests as determined by the type of inspection and to take measures to eliminate the formation of ice in any area where a slip and fall hazard could occur.**

**7. REDUCED PRESSURE BACKFLOW PREVENTER: BY SIGNING BELOW, CLIENT ACKNOWLEDGES THAT REDUCED PRESSURE BACKFLOW PREVENTERS (RPBP), ARE DESIGNED TO DISCHARGE WHEN CHECK VALVES ARE FOULED OR DUE TO WATER PRESSURE FLUCTUATIONS FROM CITY WATER SUPPLIES. ANY MAINTENANCE, REPAIR OR INSPECTION ON A FIRE SPRINKLER SYSTEM COULD RESULT IN WATER FLOW THROUGH THE RPBP AND POSSIBLE DISCHARGE. BY SIGNING BELOW, CLIENT AGREES TO RELEASE, DEFEND, INDEMNIFY AND HOLD HARMLESS DAVIS ULMER FIRE PROTECTION FROM ANY CLAIM OR LIABILITY FOR ANY DAMAGES INCURRED BY THIS DISCHARGE OR LACK OF PROPER RPBP DRAIN PIPING AND OR RPBP DRAIN EQUIPMENT OR FAILURE OF THIS PIPING OR EQUIPMENT DAVIS ULMER FIRE PROTECTION WAS SPECIFICALLY CONTRACTED TO DESIGN AND/OR INSTALL THIS EQUIPMENT.**

**8. RESPONSIBILITIES OF CLIENT: The Client agrees to:**

**A. Promptly notify Company of any known or suspected trouble or malfunction in the equipment, request a hazard evaluation if there are changes in occupancy, use, processes or materials, and promptly approve correction of impairments and critical deficiencies found during any inspection. All replaced parts become the property of the Company.**

**B. Maintain the system per original installers instructions and manufacturer's specifications.**

**C. Authorize Company, its agents and employees, for purposes of this Agreement, to enter upon the premises of Client, to repair or inspect the equipment and to make any changes or alteration to the equipment, as authorized by Client. Client also agrees to provide Company with ready accessibility to all components of systems requiring inspection and testing and appropriate working space, including adequate light, electricity, telephone access, ladders or lifts as required for Company's use in providing service(s) under this Agreement. In addition, Client agrees to provide one individual to monitor the control panel during testing and certification.**

**D. Designate suitable representative(s) satisfactory to the Company as exclusive contact(s) between Company and the Client, who shall have authority to make decisions on behalf of Client concerning service of the equipment by Company.**

**E. Neither authorize nor permit maintenance, repairs or modifications of any kind to be made to the equipment, except by the Company or as specified and approved in advance by the Company.**

**F. Assume complete responsibility for the maintenance and repair of the system except as is set forth in this agreement.**

**9. INDEMNIFICATION. COMPANY AND CLIENT SHALL DEFEND, INDEMNIFY AND HOLD ONE ANOTHER HARMLESS FROM ANY EXPENSE, LIABILITY, LOSS, CLAIM OR DAMAGE, FOR PERSONAL INJURIES AND DEATH OR PROPERTY DAMAGE ASSERTED BY ANY THIRD PARTY, CAUSED BY THE ALLEGED NEGLIGENCE OF ITSELF, ITS AGENTS, EMPLOYEES, OR ANY OTHER INDIVIDUAL OR ENTITY AFFILIATED WITH IT, AND RESULTING FROM THE SERVICES PROVIDED HEREIN ,OR OVERALL FUNCTIONALITY OF THE SYSTEM IDENTIFIED IN THIS AGREEMENT.**

**10. ADDITIONAL COMPANY RESPONSIBILITY.**

**A. Company will provide service calls and emergency service, upon request of the Client, subject to any delay which may be occasioned by strike, riot, acts of God or any other circumstances beyond the control of the Company, as soon as it is reasonably practical to do so. Company will make reasonable efforts to attend promptly to the emergency needs of the Client, but it can make no guaranty of response time by the company or what may be required to properly service the equipment.**



**ML25-A000**  
**FQ**

**B.** In the event a malfunction of a type covered by this Agreement has not been remedied before this Agreement has terminated for whatever reason, any service requested by the Client thereafter may be provided by the Company in its sole discretion and at the Company's then-current rates for services, including travel charges, per diem and materials.

**C.** Company will provide necessary test equipment required to perform service(s) under this Agreement.

**D.** If replacement parts are necessary under this Agreement, Company may provide new and /or used replacements.

**11. NO CONFLICT WITH OTHER CLIENT AGREEMENTS.** Client warrants that the negotiation, execution and implementation of this Agreement will not conflict with any other agreement of which the Client is aware with any other person or firm. Client agrees to defend, indemnify and hold harmless the Company from claims of any sort by any person or firm alleging that this Agreement violates, interferes with or infringes upon any other Agreement in any way.

**12. LICENSES, TAXES, PERMITS AND FALSE ALARMS.** Client shall identify any rules, regulations, standards or codes with which the equipment must comply, and shall obtain and pay for any necessary licenses or other certificates of compliance for same. Client is solely responsible for any fees, taxes (including sales taxes), false alarm fines, and any other governmental assessments related to the equipment or system operation and shall reimburse and indemnify the Company for any such expenses incurred by the Company. Client and Company are each responsible for obtaining any necessary licenses or permits needed to perform their respective obligations under this Agreement.

**13. ASSIGNMENTS AND DELEGATIONS.** Neither the Company nor the Client may assign this Agreement to any other person, firm or corporation without notice to or approval by the other, but Company may subcontract any activities that it may perform under this Agreement.

**14. ENGINEERING CHANGES.** Occasionally, manufacturers may issue non-warranty engineering changes to equipment necessary to assure proper operation of system components. If, in the opinion of the Company and Client, installation of such engineering changes requires service(s) or material(s) in excess of those incidental to a normal preventive maintenance inspection, such excess shall be paid for by the Client at Company's applicable charges for on-call and emergency services as set forth under this Agreement provided that company will remain responsible for performance of its obligations under this agreement. Failure by the Client to have factory recommended engineering changes installed on the system will relieve the Company from further performance under this Agreement, but will not relieve the Client of its obligations hereunder. No other engineering changes or system modification are covered by this Agreement except as may be otherwise specifically provided herein.

**15. INVALID PROVISIONS.** If any of the parts of this Agreement shall be determined by a court of competent jurisdiction to be invalid or inoperative, all of the remaining parts shall remain in full force and effect.

**16. ENTIRE AGREEMENT.** This writing is intended by the parties as the final expression of their Agreement and as a complete and exclusive statement of the terms thereof. This Agreement supersedes all prior representations, understandings or agreements between the parties; there are no prior writings, verbal negotiations, understandings, representations or agreements not expressed in this Agreement, and the parties rely only upon the contents of this Agreement in executing it, and have not relied on any other representations, oral or otherwise, made by the parties, their agents or employees. Only a writing signed by each of the parties or their duly authorized agents may modify this Agreement. No waiver of breach of any term or condition of this Agreement shall be construed to be a waiver of any succeeding breach. This agreement shall bind and benefit the heirs, successors and assigns for the respective parties. A written Service Agreement Proposal is provided for clarification purposes and is hereby made a part of this contract.

**17. RECEIPT AND REVIEW OF AGREEMENT.** The Client specifically acknowledges that it has received a copy of these Terms and Conditions in its entirety, represents that it has authority to enter into this Agreement, and has read the same, understood it and agreed to its contents before signing it. Further the person executing these Terms and Conditions has the full authority of the Client to bind the Client, to the fullest extent provided by law, to these Terms and Conditions.

**A.** This Agreement may not be assigned by Customer without the written consent of Company.

**B.** This Agreement may be signed in counterparts; a signed facsimile, photocopy, and/or electronic mail of this Agreement shall be as binding on both parties just as though this Agreement were executed in its original, pre-printed form.

**C.** The Company for formal bid documents, is not a Disadvantaged Business Enterprise. Furthermore, no DBE, MWBE or other minority program participation goals or requirements are included or inferred. Should this project involve DBE, MWBE or other minority program participation goals or requirements please advise in writing regarding the specific nature of those goals or requirements and specifically how they impact Davis Ulmer Fire Protection .

Other inclusions, exclusions or attachments:

**\*General Exclusions:** Painting, patching, underground and/or trenching, after hour, weekend and holiday labor rates, fire watch, prevailing wage/certified payroll, abatement including but not limited to asbestos and lead, water containment/disposal, conduit and wire, permit fees, scissor lifts, dampers, ground faults.

**\* Pricing:** The pricing set forth in this Agreement is based on the number of devices set forth in Section II: Scope of Work. If for any reason the actual number of devices is higher than the number set forth in Section II: Scope of Work, the price will be adjusted accordingly.

**\*Coverage:** Proposal above is for Test & Inspect only of above systems. All repairs, parts and services outside of above testing & inspecting scope of work is billable at Davis Ulmer Fire Protection current Time & Material Rates.

**\*Access:** During inspection, inspectors must have access to control valves, and alarm information, buried and/or non-accessible FDC check valves will be listed on the report and a recommendation for relocation under a separate contract. Inspectors must have access to all suites, apartments, units, etc. Customer responsible for notifying tenants of inspection and for gaining access in to each and every unit/apartment on scheduled inspection date(s). **If multiple inspections are required due to "no access" customer will be responsible for hourly rates of inspectors at Davis Ulmer Fire Protection current Time & Material Rates.**

**ACCESS ACKNOWLEDGEMENT CUSTOMER INITIAL**  

**\*On Site Inspection Repairs:** Client authorizes Davis Ulmer Fire Protection to perform repairs or component replacements, found to be necessary during the course of inspection, the amount of \$500.00 or less, **ONLY IF TECHNICIAN HAS THOSE PARTS READILY AVAILABLE ON HIS TRUCK.** Any necessary repairs for an amount exceeding \$500.00 will be first submitted in writing for written approval. Any repairs performed

SRI Fire & Security  
2392 Route 9  
Mechanicville, NY 12118  
518.459-2776



**ML25-A000**  
**FQ**

while on site during inspection will be billed on a "Time & Material" basis and subject to the terms of this Agreement. Hourly rates are provided in ½ hour increments. All labor rates are subject to change with a thirty (30) day written notice to the client.

**ON SITE REPAIRS ACKNOWLEDGEMENT CUSTOMER INITIAL**

**\*Cancellation/Reschedule Notice:** Should the customer cancel or reschedule all or any portion of the inspection/scope without giving 3 business days' notice to the Davis Ulmer Fire Protection we will assess a scheduling impact fee. The fee shall be equal to 4 hours of our current set Time and Material rate.

**\*Termination:** Either party may cancel this agreement with 30 days written notice, with the exception that The Company may cancel without advance notice due to non-payment of amounts due within billing terms. Cancellation of any Service Type without Client account balance being paid in full voids any Warranty and official reports and certifications issued to the Client under this agreement

With Appreciation,  
**Mandi LaMond**  
Service Sales/Project Manager  
[mandi.lamond@davisulmer.us](mailto:mandi.lamond@davisulmer.us)

If our quotation is acceptable, please sign below and return to my attention.  
Additionally, if this project is tax exempt, require certified payroll please let us know and include any forms necessary.

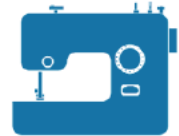
Signature \_\_\_\_\_ Date \_\_\_\_\_

Purchase Order#: \_\_\_\_\_





# Warrensburg Repair Cafe



**Saturday, May 2<sup>nd</sup> 9:30-11:30 AM**

**Warrensburg Fire Dept – 18 Elm St**

**Fix your broken, but beloved items for  
FREE with friendly Repair Coaches**

- **Bicycles**
- **Jewelry**
- **Ceramics**
- **Electronics**
- **Small Appliances**
- **Sewing Machines**
- **Wood Furniture/Wooden Items**
- **Textiles – Cloth/Knit/Crocheted Items**

**Contact us at 518-744-7554 or  
[warrensburgrepaircafe@gmail.com](mailto:warrensburgrepaircafe@gmail.com)  
for more information**

## Richards Library

(3/14/26)

|                                                          | 2026<br>Amended<br>Budget (9/23/25) | 2027<br>Budget   |
|----------------------------------------------------------|-------------------------------------|------------------|
| <b>OPERATING INCOME</b>                                  |                                     |                  |
| PUBLIC FUNDING (1e)                                      | 269,524                             | 269,524          |
| Public Grants                                            | 7,000                               | 7,000            |
| Operating Receipts                                       | 2,160                               | 2,160            |
| <b>TOTAL OPERATING INCOME</b>                            | <b>278,684</b>                      | <b>278,684</b>   |
| <b>EXPENSES</b>                                          |                                     |                  |
| <b>COLLECTION &amp; OTHER CAPITAL EXPENDITURES</b>       |                                     |                  |
| Grant Supported Capital Improvements                     | 0                                   | -                |
| Equipment/Equipment Replacement                          |                                     |                  |
| Computer Equipment                                       | 5,000                               | 5,000            |
| Other Equipment                                          |                                     |                  |
| <b>Total Equipment/Equipment Replacement</b>             | <b>5,000</b>                        | <b>5,000</b>     |
| Collection                                               |                                     |                  |
| Periodicals                                              | 500                                 | 500              |
| Reference Periodicals                                    | 150                                 | 150              |
| Books - Audio                                            | 500                                 | 500              |
| Audio/Visual - DVDs / CDs                                | 2,250                               | 2,250            |
| Books - Printed                                          | 9,500                               | 9,500            |
| <b>Total Collection</b>                                  | <b>\$ 12,900</b>                    | <b>\$ 12,900</b> |
| <b>Total COLLECTION &amp; OTHER CAPITAL EXPENDITURES</b> | <b>17,900</b>                       | <b>17,900</b>    |
| <b>OPERATING EXPENSES</b>                                |                                     |                  |
| Accounting Review, Tax Prep & Services (11c)             | 6,800                               | 7,500            |
| Archival Preservation (24e)                              | 100                                 | 100              |
| Automation Fees (14)                                     | 5,752                               | 6,500            |
| Banking Supplies (13)                                    | 90                                  | 90               |
| Building Repairs & Maint (16)                            | 5,750                               | 5,750            |
| Capital Improvements                                     |                                     |                  |
| Continuing Ed - Board, Director & Staff                  | 400                                 | 400              |
| Copier Usage Contract (13)                               | 900                                 | 900              |
| Electric (16)                                            | 8,000                               | 8,500            |
| Electronic Materials & 2% Overdrive                      | 525                                 | 525              |
| Elevator Monitoring (16)                                 |                                     |                  |
| Elevator PMA & Inspections (16)                          | 2,000                               | 2,100            |
| Elevator Repairs & Maintenance (16)                      | 900                                 | 900              |
| Equipment Repairs & Maintenance (16)                     | 100                                 | 100              |
| Fire Alarm System Inspect (16)                           | 400                                 | 400              |
| Fire Alarm System Monitor (16)                           | 305                                 | 305              |
| Fire Extinguisher Inspections (16)                       | 250                                 | 250              |
| Grounds Repairs & Maint (16)                             | 1,500                               | 1,500            |
| Heating Fuel (16)                                        | 7,000                               | 7,000            |
| Insurance Expense (23)                                   | 9,000                               | 10,000           |
| Internet Services (16)                                   | 1,600                               | 1,600            |
| Janitorial Supplies & Exp (16-B)                         | 1,050                               | 1,050            |
| Library Operating Supplies (24a)                         | 1,100                               | 1,100            |
| Library Programs (24b)                                   | 5,000                               | 5,000            |
| Memberships & Dues (24c)                                 | 350                                 | 350              |

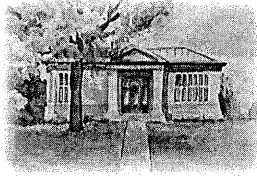
# Richards Library

(3/14/26)

|                                                  | 2026<br>Amended<br>Budget (9/23/25) | 2027<br>Budget |
|--------------------------------------------------|-------------------------------------|----------------|
| Mileage Reimbursement                            | 200                                 | 200            |
| Miscellaneous                                    |                                     |                |
| Advertising / Promotional                        | 200                                 | 200            |
| Amazon Prime                                     |                                     |                |
| Payroll Supplies                                 | 175                                 | 175            |
| Programming Items / Library of Things            | 300                                 | 300            |
| Landfill & Miscellaneous                         | 60                                  | 60             |
| Movie License Renewal (14)                       | 230                                 | 230            |
| Office & Computer Supplies Expenses (13)         | 1,500                               | 1,500          |
| Payroll Processing (11c)                         | 2,200                               | 2,200          |
| Postage (13)                                     | 250                                 | 275            |
| Security Alarm Monitoring, Etc (16)              | 400                                 | 400            |
| Sewer District Tax                               | 451                                 | 451            |
| Sprinkler Inspection (16)                        |                                     |                |
| Annual                                           | 1,125                               | 1,500          |
| 3-Year (2025)                                    |                                     |                |
| 5-Year (2027)                                    |                                     | 1,500          |
| Telephone Expense (16-B)                         | 1,600                               | 1,600          |
| Water (16)                                       | 350                                 | 350            |
| Total OPERATING EXPENSES                         | 67,913                              | 74,888         |
| WAGES & BENEFITS                                 |                                     |                |
| Wages (5/7)                                      | 167,000                             | 171,000        |
| Employer's SS/Medicare Expense (10)              | 12,776                              | 13,082         |
| Workers' Comp, Disability, FFL (9)               | 2,000                               | 2,000          |
| Total WAGES & BENEFITS                           | \$ 181,776                          | \$ 186,082     |
| TOTAL EXPENSES                                   | \$ 267,589                          | \$ 278,870     |
| NET OPERATING SURPLUS (DEFICIT)                  | \$ 11,095                           | \$ (186)       |
| LESS CAPITAL EXPENDITURES RESERVE FUNDS TRANSFER | 13,350                              | 13,350         |
| NET SURPLUS (DEFICIT)                            | (2,255)                             | (13,536)       |
| TRANSFERS FROM OPERATING SAVINGS                 | 3,000                               | 12,000         |
| NET SURPLUS (DEFICIT) AFTER TRANSFERS            | 745                                 | (1,536)        |

Asking for \$28K in

# THE RICHARDS LIBRARY



**"A GATEWAY TO KNOWLEDGE AND ADVENTURE"**

ESTABLISHED 1901

36 ELM STREET

WARRENSBURG, NEW YORK 12885-1625

(518) 623-3011

(518) 623-2426 – FAX

Board of Education  
Warrensburg Central School District  
103 Schroom River Road  
Warrensburg, NY 12885

March 3, 2026

Dear Superintendent Langworthy & Members of the Board of Education:

In accordance with NYS Education Law, Section 259, the members of The Richards Library Board of Trustees voted unanimously at their March 3, 2026 Board meeting to exceed the 2% Tax Cap for the upcoming May 2026 Tax Levy vote for FY 2027.

This request is prompted by the recent increase in building maintenance demands. Our Library has been a cherished community anchor for almost 125 years. To ensure the safety and accessibility of this facility, we need to transition from reactive, emergency repairs to proactive capital investments. We look forward to continuing to provide enhanced library services to all residents of the School District.

Attached you will find a copy of the Draft Board minutes reflecting the aforementioned vote (highlighted). Please enter into the official record of the Board of Education meeting scheduled for March 9, 2026.

Sincerely,

Sarah Gebbie-Measeck  
President  
The Richards Library Board of Trustees, *et al*

Attached: Draft March 3, 2026 Board Minutes of The Richards Library

cc: File

Mr. Kevin Geraghty  
Ms. Debra Runyon

**The Richards Library  
Board of Trustees Meeting Minutes  
Tuesday, March 3, 2026**

Present: Sarah Gebbie-Measeck, Mary Beadnell, Samantha Newcomb, Esther McTague, John Schroeter, and Shelby Burkhardt, Library Director

Excused: Becky Lawler, Gina Coburn, Susan Matzner

Meeting, held at Warrensburg Fire House Community Room, called to order at 10:02am

Motion to accept and approve the consent agenda, financials for Dec 2025, Jan 2026 and Feb 2026; and meeting minutes for January, February and February Emergency Meeting was made by John, seconded by Samantha, and approved by Board.

Period of Public Expression:

- None

Correspondence:

- Erie Insurance - Notice of 10% increase in premium in accordance with NYS law
- SALS - Received info on JA 3.5 % billing increase; new directors handbook
- SALS - Notice of SALS annual dinner meeting May 18

Director's report:

- Tapestry was repaired and returned Plan to be open from 9:00-3:00 on MLK Jr Day and Presidents' Day
- Light work in the Adult room was completed, some parts retained for future use; Mr Electric will work with Davis Ulmer on air compressor repair Ordered "crawl-thru cabinet" for Children's Room
- Ed Ostberg checked signage damage, can be reinstalled
- Knoxbox ordered and will be installed outside
- OATS-SALS received additional funding- offering mini grants
- Board needs to approve NYS Annual Library Report before it is sent- deadline may be extended

Committee Reports

- Personnel Committee: Discussion of possible restructuring of staff duties
- Ad Hoc:
  - Archives - Currently on hold
  - 125 Anniversary Committee
    - Samantha answered questions about framework created for the event; discussion ensued about workshop on March 17 which will be devoted to 125th anniversary celebration
- Budget and Finance: tax levy increase proposed for 2027
- Building and Grounds: No responses received for maintenance position
- Outreach
  - John – holds on-site during the building emergency were taken to Countryside Adult Home,

deliveries on hold until library materials become available again

- Policy
  - minor changes to Emergency Preparedness policy will be made after walk-through with Ann Marie from Warren County Office of Emergency Services is completed – *post completion of building repairs*

#### Old Business

- Vacancy: maintenance/handyperson
  - Duties of the position were discussed; post/ad will be reworked and reposted.
- Letter to WCSD BOE
  - A motion was made by Sarah, seconded by John, and approved by Board, to exceed the 2% tax cap, and request an increase of \$28,000 for 2027. Letters will be sent to BOE and Sarah will attend BOE meeting March 9, 2026.
- Emergency Closure to the public as of 2/9/2026
  - Building mitigation – mitigation phase complete, awaiting insurance so repairs can begin
  - Staff Compensation – discussed in executive session

#### Executive Session

Sarah made a motion, seconded by John, to convene an Executive Session at 10:57 am for discussion of a personnel matter, motion passed by Board. John made a motion, seconded by Mary, and approved by Board to return to regular session at 11:19 am.

#### New Business

- none

#### Other Business

- Town Board Meetings
  - Susan attended the Warrensburg Town Meeting on 2/11/26 – *report later*
  - Sarah will attend Warrensburg CSD BOE meeting 3/9/26
  - Sarah and possibly Samantha will attend the Thurman Town meeting on 4/16/26

Public Expression: none

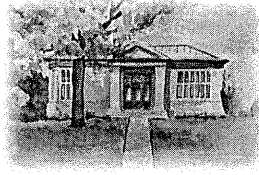
Next Board Meeting set for April 7, 2026 at 10:00am – possibly at Wbg. Fire House Community Room

Next Committee Workshop scheduled for March 17, 2026 at 10:00am – possibly at Wbg. Chamber Office

Motion was made by Sarah, seconded by John and approved by Board to adjourn at 11:50am.

**Approved by The Richards Library Board of Trustees on**

# THE RICHARDS LIBRARY



**"A GATEWAY TO KNOWLEDGE AND ADVENTURE"**

ESTABLISHED 1901  
36 ELM STREET  
WARRENSBURG, NEW YORK 12885-1625  
(518) 623-3011  
(518) 623-2426 – FAX

Board of Education  
Warrensburg Central School District  
103 Schroon River Road  
Warrensburg, NY 12885

March 3, 2026

Dear Superintendent Langworthy & Members of the Board of Education:

The Richards Library Board of Trustees request that, pursuant to Section 259 of the New York State Education Law, the Warrensburg Central School District Board of Education place the following proposition before the voters at the May 2026 School District election:

*"Resolved that pursuant to Education Law, Section 259, the Board of Education of the Warrensburg Central School District is authorized to increase the current levy and collect an annual tax, year after year, separate and apart from the annual school district budget, to the amount of \$297,524, which shall be paid to The Richards Library for the support and maintenance of the library, with this appropriated amount to be the annual appropriation until thereafter modified by a future vote of the electors of the Warrensburg Central School District."*

The total increase in the requested levy amount is \$28,000. This request is prompted by the recent increase in building maintenance demands. Our Library has been a cherished community anchor for almost 125 years. To ensure the safety and accessibility of this facility, we need to transition from reactive, emergency repairs to proactive capital investments. We look forward to continuing to provide enhanced library services to all residents of the School District.

We would be happy to provide you with additional information or respond to any question you may have regarding the above.

Sincerely,

Sarah Gebbie-Measeck

President

The Richards Library Board of Trustees, *et al*

**Quick Response Restoration, Inc**  
**PO BOX 824**  
**Clifton Park, NY 12065**  
**PHONE (518) 899 - 7090**  
**FAX (518) 899 - 7091**

**OWNER**

**Richards Library**

**PHONE**

**Sara Gebbie-Measeck**  
**518-744-7554**

**DATE**

**04/01/2026**

**ADDRESS**

**36 Elm St Warrensburg, NY 12885**

**JOB NUMBER**

**26-3663**

---

Upon acceptance by the above named **OWNER** of the terms and conditions outlined herein, **QUICK RESPONSE RESTORATION, INC.** ("QUICK RESPONSE") agrees to furnish material and labor in accordance with its attached scope of work ("Work"), dated 02/15/2026, as prepared by BJ Jourdanais for the sum of \$100,000.00, attached as Exhibit "A."

**Payment will be made as follows:**

**\$25,000.00 upon execution of this contract**

**\$25,000.00 upon 50% completion.**

**\$25,000.00 upon 75% completion.**

**\$25,000.00 upon completion**

All Work to be completed in a workmanlike manner and according to industry standards. Any deviation in the Work requested by the Owner that results in extra costs will be performed only after a written change order is executed by the parties to this agreement. The timely performance of the Work is contingent upon strikes, accidents or delays beyond our control. **QUICK RESPONSE'S** workers are fully covered by Workman's Compensation Insurance.

The liability of **QUICK RESPONSE** is expressly limited to the total amount of the services authorized herein and in no event shall **QUICK RESPONSE**, its subcontractors or assigns, be liable for consequential damages of any kind. All warranties, expressed or implied, are otherwise waived. In the event any legal proceedings must be initiated by **QUICK RESPONSE** to recover the amount due, plus interest at 18%, **QUICK RESPONSE** shall be entitled to recover the costs of collection including reasonable attorneys' fees, costs and disbursements. If collections efforts are pursued by in-house counsel, **THE CUSTOMER** will be charged reasonable attorney's fees for the time spent by in-house counsel on an hourly basis and based upon the hourly rate **QUICK RESPONSE** pays outside counsel.

The provisions of this Agreement are severable. If any provision is held to be invalid or enforceable, it shall not affect the validity or enforceability of any other provision.

Date: \_\_\_\_\_

Authorized Signature \_\_\_\_\_  
Quick Response Restoration, Inc.

**ACCEPTANCE BY OWNER:** I have read and understand this contract and Quick Response Restoration, Inc is authorized to do the Work as detailed in the attached scope of work.

Date of Acceptance: \_\_\_\_\_

Signature \_\_\_\_\_

Printed Name \_\_\_\_\_

Please note our payment address is P.O. Box 824 Clifton Park, NY 12065.  
2095 Route 9 Round Lake, NY 12151 is our physical address to drop off payment.  
Or call 518-899-7090 M-F 8:00-4:30 to pay with card by phone.

## Quick Response

## Exhibit "A"

---

Quick Response  
2095 Route 9  
Round Lake, NY 12151

Client: Richards Library  
Property: 36 Elm Street  
Warrensburg, NY 12885

Home: (518) 744-7554

Operator: BJJOURDA

Estimator: BJ Jourdanais  
Position: Estimator  
Company: Quick Response  
Business: 2077 Route 9  
Round Lake, NY 12151

Business: (518) 899-7090

Type of Estimate: Water Damage

Date Entered: 2/15/2026

Date Assigned:

Price List: NYAL8X\_FEB26

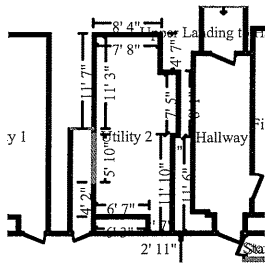
Labor Efficiency: Restoration/Service/Remodel

Estimate: RICHARDSLIBRARY\_RCON

Quick Response  
2095 Route 9  
Round Lake, NY 12151

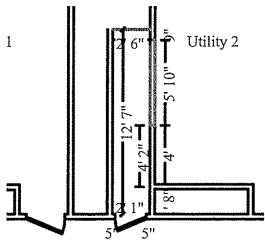
## Basement

| DESCRIPTION                                 | QTY         | RESET | REMOVE | REPLACE | TAX    | O&P    | TOTAL    |
|---------------------------------------------|-------------|-------|--------|---------|--------|--------|----------|
| Final cleaning - construction - Residential | 3,052.43 SF |       | 0.00   | 0.62    | 158.98 | 378.50 | 2,429.99 |
| Total: Basement                             |             |       |        |         | 158.98 | 378.50 | 2,429.99 |



**Height: 8'**

|                           |                          |
|---------------------------|--------------------------|
| 493.48 SF Walls           | 204.35 SF Ceiling        |
| 697.83 SF Walls & Ceiling | 204.35 SF Floor          |
| 22.71 SY Flooring         | 61.69 LF Floor Perimeter |
| 61.69 LF Ceil. Perimeter  |                          |



**Height: 8'**

|        |                    |       |                    |
|--------|--------------------|-------|--------------------|
| 160.22 | SF Walls           | 31.76 | SF Ceiling         |
| 191.98 | SF Walls & Ceiling | 31.76 | SF Floor           |
| 3.53   | SY Flooring        | 19.72 | LF Floor Perimeter |
| 21.81  | LF Ceil. Perimeter |       |                    |

Opens into UTILITY\_4

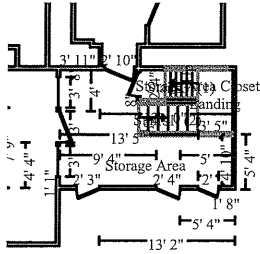
### Opens into Exterior

**Opens into STORAGE\_ARE2**

| DESCRIPTION                                             | QTY       | RESET | REMOVE | REPLACE | TAX    | O&P    | TOTAL    |
|---------------------------------------------------------|-----------|-------|--------|---------|--------|--------|----------|
| R&R Rigid fiberglass duct insulation board - foil faced | 224.00 SF |       | 1.78   | 9.79    | 217.70 | 518.34 | 3,327.72 |
| Totals: Utility 2                                       |           |       |        |         | 217.70 | 518.34 | 3,327.72 |

## Quick Response

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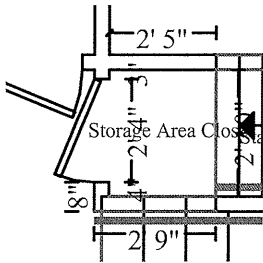
### Storage area

Height: 8'

|                           |                          |
|---------------------------|--------------------------|
| 285.88 SF Walls           | 129.02 SF Ceiling        |
| 414.89 SF Walls & Ceiling | 129.02 SF Floor          |
| 14.34 SY Flooring         | 37.82 LF Floor Perimeter |
| 52.50 LF Ceil. Perimeter  |                          |

|                                              |                           |                          |
|----------------------------------------------|---------------------------|--------------------------|
| Door                                         | 1' 11 11/16" X 6' 8 5/16" | Opens into Exterior      |
| Door                                         | 2' 3 15/16" X 6' 7 15/16" | Opens into Exterior      |
| Door                                         | 2' 2 5/8" X 6' 7 1/2"     | Opens into Exterior      |
| Missing Wall - Goes to neither Floor/Ceiling | 3' 4 11/16" X 13'         | Opens into LANDING       |
| Missing Wall - Goes to neither Floor/Ceiling | 5' 8 7/16" X 13'          | Opens into STAIRS1       |
| Missing Wall                                 | 2' 10 3/16" X 8'          | Opens into STAIRS1       |
| Door                                         | 2' 3 13/16" X 6' 6 3/4"   | Opens into STORAGE_AREA1 |
| Door                                         | 2' 10 1/16" X 6' 7 1/8"   | Opens into HALLWAY       |
| Window                                       | 2' 11 13/16" X 6' 2"      | Opens into STORAGE_AREA2 |
| Door                                         | 3' 1/16" X 6' 7 15/16"    | Opens into STORAGE_AREA2 |
| Window                                       | 2' 11 9/16" X 6' 2 7/16"  | Opens into STORAGE_AREA2 |

| DESCRIPTION                | QTY       | RESET | REMOVE | REPLACE | TAX  | O&P   | TOTAL  |
|----------------------------|-----------|-------|--------|---------|------|-------|--------|
| Clean and deodorize carpet | 129.02 SF |       | 0.00   | 0.94    | 0.00 | 24.26 | 145.54 |
| Totals: Storage area       |           |       |        |         | 0.00 | 24.26 | 145.54 |



### Storage Area Closet

Height: 7'

|                          |                         |
|--------------------------|-------------------------|
| 38.34 SF Walls           | 6.84 SF Ceiling         |
| 45.19 SF Walls & Ceiling | 6.84 SF Floor           |
| 0.76 SY Flooring         | 5.33 LF Floor Perimeter |
| 7.65 LF Ceil. Perimeter  |                         |

|                                              |                         |                         |
|----------------------------------------------|-------------------------|-------------------------|
| Door                                         | 2' 3 13/16" X 6' 6 3/4" | Opens into STORAGE_AREA |
| Missing Wall                                 | 2' 10 1/4" X 7'         | Opens into STAIRS3      |
| Missing Wall - Goes to neither Floor/Ceiling | 2' 4 13/16" X 13'       | Opens into STAIRS1      |

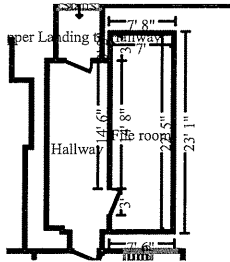
| DESCRIPTION                                                   | QTY      | RESET | REMOVE | REPLACE | TAX  | O&P   | TOTAL  |
|---------------------------------------------------------------|----------|-------|--------|---------|------|-------|--------|
| Seal/prime (1 coat) then paint (1 coat) the walls and ceiling | 45.19 SF |       | 0.00   | 1.40    | 5.32 | 12.66 | 81.25  |
| Cove base molding - rubber or vinyl, 4" high                  | 5.33 LF  |       | 0.00   | 2.80    | 1.25 | 2.98  | 19.15  |
| Contents - move out then reset - Small room                   | 1.00 EA  |       | 0.00   | 107.88  | 9.06 | 21.58 | 138.52 |

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### CONTINUED - Storage Area Closet

| DESCRIPTION                 | QTY | RESET | REMOVE | REPLACE | TAX   | O&P   | TOTAL  |
|-----------------------------|-----|-------|--------|---------|-------|-------|--------|
| Totals: Storage Area Closet |     |       |        |         | 15.63 | 37.22 | 238.92 |



#### File room

Height: 8'

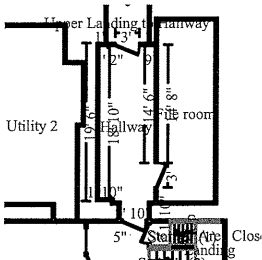
|                           |                          |
|---------------------------|--------------------------|
| 449.93 SF Walls           | 156.37 SF Ceiling        |
| 606.30 SF Walls & Ceiling | 156.37 SF Floor          |
| 17.37 SY Flooring         | 55.74 LF Floor Perimeter |
| 58.75 LF Ceil. Perimeter  |                          |

#### Door

3' 3/16" X 6' 7 15/16"

Opens into HALLWAY

| DESCRIPTION                                       | QTY       | RESET | REMOVE | REPLACE | TAX   | O&P    | TOTAL    |
|---------------------------------------------------|-----------|-------|--------|---------|-------|--------|----------|
| Seal/prime (1 coat) then paint (1 coat) the walls | 449.93 SF |       | 0.00   | 1.40    | 52.91 | 125.98 | 808.79   |
| Cove base molding - rubber or vinyl, 4" high      | 55.74 LF  |       | 0.00   | 2.80    | 13.10 | 31.22  | 200.39   |
| Clean and deodorize carpet                        | 156.37 SF |       | 0.00   | 0.94    | 0.00  | 29.40  | 176.39   |
| Contents - move out then reset                    | 1.00 EA   |       | 0.00   | 143.76  | 12.07 | 28.76  | 184.59   |
| Totals: File room                                 |           |       |        |         | 78.08 | 215.36 | 1,370.16 |



#### Hallway

Height: 7'

|                           |                          |
|---------------------------|--------------------------|
| 337.77 SF Walls           | 138.47 SF Ceiling        |
| 476.24 SF Walls & Ceiling | 138.47 SF Floor          |
| 15.39 SY Flooring         | 47.78 LF Floor Perimeter |
| 56.61 LF Ceil. Perimeter  |                          |

#### Door

2' 10 1/16" X 6' 7 1/8"

Opens into STORAGE\_AREA

#### Door

3' 3/16" X 6' 7 15/16"

Opens into FILE\_ROOM

#### Door

2' 11 5/8" X 6' 7 1/2"

Opens into UPPER\_LANDIN

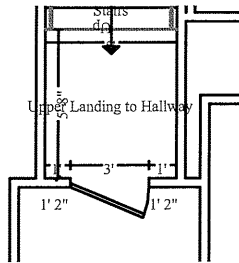
| DESCRIPTION                                                                                  | QTY       | RESET | REMOVE | REPLACE | TAX   | O&P    | TOTAL  |
|----------------------------------------------------------------------------------------------|-----------|-------|--------|---------|-------|--------|--------|
| Suspended ceiling tile - High grade - 2' x 2'                                                | 138.47 SF |       | 0.00   | 3.92    | 45.60 | 108.56 | 696.96 |
| Armstrong 1911A Humidguard Plus no longer available and need to replace entire ceiling tiles |           |       |        |         |       |        |        |
| Suspended ceiling grid - Reset/realign                                                       | 138.47 SF |       | 0.00   | 2.33    | 27.10 | 64.52  | 414.26 |
| R&R Fluorescent - one tube - 4' - fixture w/lens                                             | 2.00 EA   |       | 30.10  | 128.16  | 26.58 | 63.30  | 406.40 |

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### CONTINUED - Hallway

| DESCRIPTION                                       | QTY       | RESET | REMOVE | REPLACE | TAX    | O&P    | TOTAL    |
|---------------------------------------------------|-----------|-------|--------|---------|--------|--------|----------|
| Seal/prime (1 coat) then paint (1 coat) the walls | 337.77 SF |       | 0.00   | 1.40    | 39.72  | 94.58  | 607.18   |
| Cove base molding - rubber or vinyl, 4" high      | 47.78 LF  |       | 0.00   | 2.80    | 11.23  | 26.76  | 171.77   |
| Clean and deodorize carpet                        | 138.47 SF |       | 0.00   | 0.94    | 0.00   | 26.04  | 156.20   |
| Totals: Hallway                                   |           |       |        |         | 150.23 | 383.76 | 2,452.77 |



#### Upper Landing to Hallway

Height: 8'

|                           |                          |
|---------------------------|--------------------------|
| 110.45 SF Walls           | 28.05 SF Ceiling         |
| 138.50 SF Walls & Ceiling | 28.05 SF Floor           |
| 3.12 SY Flooring          | 13.30 LF Floor Perimeter |
| 16.27 LF Ceil. Perimeter  |                          |

Door

2' 11 5/8" X 6' 7 1/2"

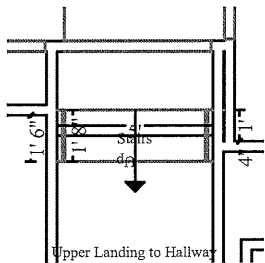
Opens into HALLWAY

Missing Wall

4' 11 9/16" X 8'

Opens into STAIRS

| DESCRIPTION                                                   | QTY       | RESET | REMOVE | REPLACE | TAX   | O&P   | TOTAL  |
|---------------------------------------------------------------|-----------|-------|--------|---------|-------|-------|--------|
| Seal/prime (1 coat) then paint (1 coat) the walls and ceiling | 138.50 SF |       | 0.00   | 1.40    | 16.28 | 38.78 | 248.96 |
| Cove base molding - rubber or vinyl, 4" high                  | 13.30 LF  |       | 0.00   | 2.80    | 3.13  | 7.44  | 47.81  |
| Clean and deodorize carpet                                    | 28.05 SF  |       | 0.00   | 0.94    | 0.00  | 5.28  | 31.65  |
| Totals: Upper Landing to Hallway                              |           |       |        |         | 19.41 | 51.50 | 328.42 |



#### Stairs

Height: 9' 6"

|                          |                         |
|--------------------------|-------------------------|
| 28.65 SF Walls           | 8.13 SF Ceiling         |
| 36.78 SF Walls & Ceiling | 15.99 SF Floor          |
| 1.78 SY Flooring         | 3.84 LF Floor Perimeter |
| 3.27 LF Ceil. Perimeter  |                         |

Missing Wall

4' 11 9/16" X 9' 6"

Opens into UNKNOWN\_RO12

Missing Wall

4' 11 9/16" X 9' 6"

Opens into UPPER\_LANDIN

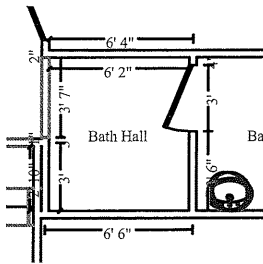
| DESCRIPTION                                                   | QTY      | RESET | REMOVE | REPLACE | TAX  | O&P   | TOTAL |
|---------------------------------------------------------------|----------|-------|--------|---------|------|-------|-------|
| Seal/prime (1 coat) then paint (1 coat) the walls and ceiling | 36.78 SF |       | 0.00   | 1.40    | 4.32 | 10.30 | 66.11 |

## Quick Response

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### CONTINUED - Stairs

| DESCRIPTION                                  | QTY      | RESET | REMOVE | REPLACE | TAX  | O&P   | TOTAL |
|----------------------------------------------|----------|-------|--------|---------|------|-------|-------|
| Cove base molding - rubber or vinyl, 4" high | 3.84 LF  |       | 0.00   | 2.80    | 0.90 | 2.16  | 13.81 |
| Clean and deodorize carpet                   | 15.99 SF |       | 0.00   | 0.94    | 0.00 | 3.00  | 18.03 |
| Totals: Stairs                               |          |       |        |         | 5.22 | 15.46 | 97.95 |



### Bath Hall

Height: 8'

|                           |                          |
|---------------------------|--------------------------|
| 164.59 SF Walls           | 42.13 SF Ceiling         |
| 206.72 SF Walls & Ceiling | 42.13 SF Floor           |
| 4.68 SY Flooring          | 19.45 LF Floor Perimeter |
| 26.00 LF Ceil. Perimeter  |                          |

### Door

2' 11 9/16" X 6' 7 1/2"

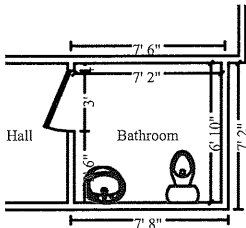
Opens into BATHROOM

### Missing Wall - Goes to Floor

3' 7" X 6' 7 1/2"

Opens into CONFERENCE\_R

| DESCRIPTION                                                   | QTY       | RESET | REMOVE | REPLACE | TAX   | O&P   | TOTAL  |
|---------------------------------------------------------------|-----------|-------|--------|---------|-------|-------|--------|
| Seal/prime (1 coat) then paint (1 coat) the walls and ceiling | 206.72 SF |       | 0.00   | 1.40    | 24.31 | 57.88 | 371.60 |
| Cove base molding - rubber or vinyl, 4" high                  | 19.45 LF  |       | 0.00   | 2.80    | 4.57  | 10.90 | 69.93  |
| Clean floor - tile                                            | 42.13 SF  |       | 0.00   | 1.25    | 4.43  | 10.54 | 67.63  |
| Totals: Bath Hall                                             |           |       |        |         | 33.31 | 79.32 | 509.16 |



### Bathroom

Height: 8'

|                           |                          |
|---------------------------|--------------------------|
| 204.14 SF Walls           | 48.87 SF Ceiling         |
| 253.00 SF Walls & Ceiling | 48.87 SF Floor           |
| 5.43 SY Flooring          | 25.01 LF Floor Perimeter |
| 27.97 LF Ceil. Perimeter  |                          |

### Door

2' 11 9/16" X 6' 7 1/2"

Opens into BATH\_HALL

| DESCRIPTION                                                                                  | QTY      | RESET | REMOVE | REPLACE | TAX   | O&P   | TOTAL  |
|----------------------------------------------------------------------------------------------|----------|-------|--------|---------|-------|-------|--------|
| Suspended ceiling tile - High grade - 2' x 2'                                                | 48.87 SF |       | 0.00   | 3.92    | 16.09 | 38.32 | 245.98 |
| Armstrong 1911A Humidguard Plus no longer available and need to replace entire ceiling tiles |          |       |        |         |       |       |        |
| Suspended ceiling grid - Reset/realign                                                       | 48.87 SF |       | 0.00   | 2.33    | 9.56  | 22.78 | 146.21 |

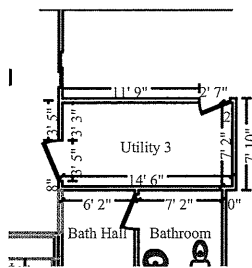
## Quick Response

Quick Response  
2095 Route 9  
Round Lake, NY 12151

### CONTINUED - Bathroom

| DESCRIPTION                                          | QTY       | RESET | REMOVE | REPLACE | TAX   | O&P   | TOTAL  |
|------------------------------------------------------|-----------|-------|--------|---------|-------|-------|--------|
| 1/2" drywall - hung, taped, floated, ready for paint | 21.50 SF  |       | 0.00   | 3.59    | 6.48  | 15.44 | 99.11  |
| Drywall Soffit at the ceiling                        |           |       |        |         |       |       |        |
| Tape joint for new to existing drywall - per LF      | 14.33 LF  |       | 0.00   | 9.87    | 11.88 | 28.28 | 181.60 |
| Detach & Reset Sprinkler head with escutcheon        | 1.00 EA   | 19.41 | 0.00   | 0.00    | 1.63  | 3.88  | 24.92  |
| R&R Recessed light fixture                           | 1.00 EA   |       | 24.07  | 173.57  | 16.60 | 39.54 | 253.78 |
| R&R Smoke detector                                   | 1.00 EA   |       | 23.97  | 83.16   | 9.00  | 21.44 | 137.57 |
| R&R Carbon monoxide detector                         | 1.00 EA   |       | 23.97  | 87.40   | 9.36  | 22.28 | 143.01 |
| 1/2" drywall - hung, taped, floated, ready for paint | 50.02 SF  |       | 0.00   | 3.59    | 15.08 | 35.92 | 230.57 |
| Tape joint for new to existing drywall - per LF      | 25.01 LF  |       | 0.00   | 9.87    | 20.74 | 49.38 | 316.97 |
| Seal/prime (1 coat) then paint (1 coat) the walls    | 204.14 SF |       | 0.00   | 1.40    | 24.01 | 57.16 | 366.97 |
| Mirror - plate glass - Detach & reset                | 6.00 SF   |       | 0.00   | 10.48   | 5.28  | 12.58 | 80.74  |
| Install Diaper change station - plastic              | 1.00 EA   |       | 0.00   | 356.01  | 29.90 | 71.20 | 457.11 |
| Toilet - Detach & reset                              | 1.00 EA   |       | 0.00   | 292.29  | 24.55 | 58.46 | 375.30 |
| Cove base molding - rubber or vinyl, 4" high         | 25.01 LF  |       | 0.00   | 2.80    | 5.88  | 14.00 | 89.91  |
| Clean floor - tile                                   | 48.87 SF  |       | 0.00   | 1.25    | 5.14  | 12.22 | 78.45  |

Totals: Bathroom 211.18 502.88 3,228.20



### Utility 3

Height: 7'

262.15 SF Walls  
365.71 SF Walls & Ceiling  
11.51 SY Flooring  
43.30 LF Ceil. Perimeter

103.55 SF Ceiling  
103.55 SF Floor  
37.25 LF Floor Perimeter

Door

2' 7 5/16" X 6' 10 5/16"

Opens into Exterior

Door

3' 5 5/16" X 6' 8 5/16"

Opens into CONFERENCE\_R

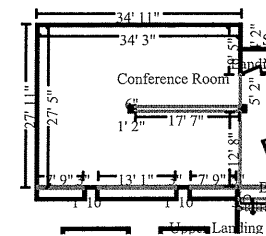
| DESCRIPTION                                   | QTY      | RESET | REMOVE | REPLACE | TAX   | O&P    | TOTAL    |
|-----------------------------------------------|----------|-------|--------|---------|-------|--------|----------|
| Drywall patch / small repair, ready for paint | 5.00 EA  |       | 0.00   | 116.91  | 49.10 | 116.92 | 750.57   |
| Five individual patches within the ceiling    |          |       |        |         |       |        |          |
| Drywall tape joint / repair - per LF          | 90.93 LF |       | 0.00   | 12.05   | 92.04 | 219.14 | 1,406.89 |

## Quick Response

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### CONTINUED - Utility 3

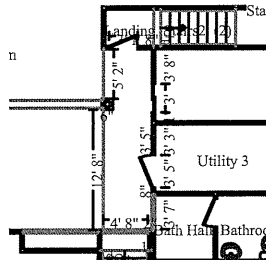
| DESCRIPTION                                                   | QTY       | RESET | REMOVE | REPLACE | TAX    | O&P    | TOTAL    |
|---------------------------------------------------------------|-----------|-------|--------|---------|--------|--------|----------|
| Seal/prime (1 coat) then paint (1 coat) the walls and ceiling | 365.71 SF |       | 0.00   | 1.40    | 43.01  | 102.40 | 657.40   |
| Totals: Utility 3                                             |           |       |        |         | 184.15 | 438.46 | 2,814.86 |



#### Conference Room

Height: 8'

|                             |                          |
|-----------------------------|--------------------------|
| 719.68 SF Walls             | 924.91 SF Ceiling        |
| 1,644.58 SF Walls & Ceiling | 924.91 SF Floor          |
| 102.77 SY Flooring          | 79.24 LF Floor Perimeter |
| 107.82 LF Ceil. Perimeter   |                          |



#### Subroom: Conference Room (2)

Height: 8'

|                           |                          |
|---------------------------|--------------------------|
| 142.23 SF Walls           | 95.51 SF Ceiling         |
| 237.74 SF Walls & Ceiling | 95.51 SF Floor           |
| 10.61 SY Flooring         | 15.18 LF Floor Perimeter |
| 32.83 LF Ceil. Perimeter  |                          |

Missing Wall

12' 8 1/8" X 8'

Opens into CONFERENCE\_2

Missing Wall

5' 2 3/16" X 8'

Opens into CONFERENCE\_2

Door

2' 11 11/16" X 6' 7 1/2"

Opens into LANDING1

Door

2' 11 3/4" X 7' 1 7/16"

Opens into Exterior

Door

3' 5 5/16" X 6' 8 5/16"

Opens into UTILITY\_3

Missing Wall - Goes to Floor

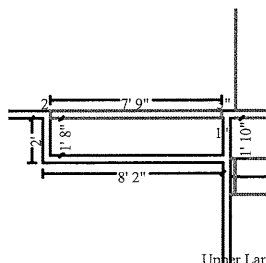
3' 7" X 6' 7 1/2"

Opens into BATH\_HALL

Missing Wall - Goes to Floor

4' 8" X 7'

Opens into UNKNOWN\_RO12



#### Subroom: Conference Room (6)

Height: 5'

|                          |                          |
|--------------------------|--------------------------|
| 56.13 SF Walls           | 13.14 SF Ceiling         |
| 69.27 SF Walls & Ceiling | 13.14 SF Floor           |
| 1.46 SY Flooring         | 11.23 LF Floor Perimeter |
| 18.98 LF Ceil. Perimeter |                          |

Missing Wall - Goes to Floor

7' 9" X 5'

Opens into CONFERENCE\_2

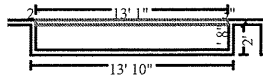
## Quick Response

Quick Response  
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### CONTINUED - Conference Room

#### Subroom: Conference Room (5)

Height: 5'



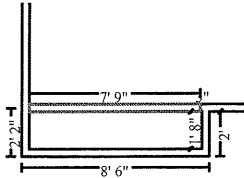
82.94 SF Walls  
105.09 SF Walls & Ceiling  
2.46 SY Flooring  
29.67 LF Ceil. Perimeter

22.15 SF Ceiling  
22.15 SF Floor  
16.59 LF Floor Perimeter

Missing Wall - Goes to Floor

13' 1" X 5'

Opens into CONFERENCE\_2



#### Subroom: Conference Room (4)

Height: 5'

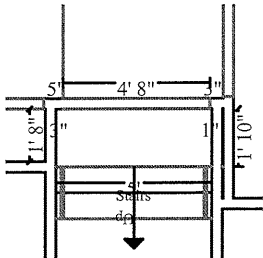
56.26 SF Walls  
69.42 SF Walls & Ceiling  
1.46 SY Flooring  
19.00 LF Ceil. Perimeter

13.17 SF Ceiling  
13.17 SF Floor  
11.25 LF Floor Perimeter

Missing Wall - Goes to Floor

7' 9" X 5'

Opens into CONFERENCE\_2



#### Subroom: Conference Room (1)

Height: 9' 6"

49.67 SF Walls  
58.86 SF Walls & Ceiling  
1.02 SY Flooring  
8.67 LF Ceil. Perimeter

9.19 SF Ceiling  
9.19 SF Floor  
4.00 LF Floor Perimeter

Missing Wall - Goes to Floor

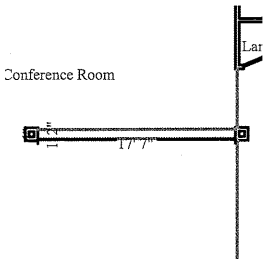
4' 8" X 7'

Opens into CONFERENCE\_R

Missing Wall

4' 11 9/16" X 9' 6"

Opens into STAIRS



#### Subroom: Conference Room (3)

Height: 8'

18.56 SF Walls  
33.13 SF Walls & Ceiling  
1.62 SY Flooring  
2.32 LF Ceil. Perimeter

14.57 SF Ceiling  
14.57 SF Floor  
2.32 LF Floor Perimeter

Missing Wall

17' 7 7/16" X 8'

Opens into CONFERENCE\_2

Missing Wall

17' 7 7/16" X 8'

Opens into CONFERENCE\_2

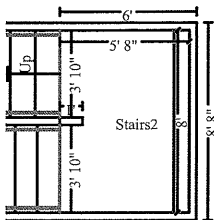
| DESCRIPTION                                          | QTY      | RESET | REMOVE | REPLACE | TAX   | O&P   | TOTAL  |
|------------------------------------------------------|----------|-------|--------|---------|-------|-------|--------|
| 1/2" drywall - hung, taped, floated, ready for paint | 53.42 SF |       | 0.00   | 3.59    | 16.10 | 38.36 | 246.24 |

## Quick Response

Quick Response  
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### CONTINUED - Conference Room

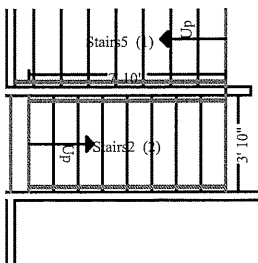
| DESCRIPTION                                                                                  | QTY         | RESET  | REMOVE | REPLACE | TAX    | O&P      | TOTAL     |
|----------------------------------------------------------------------------------------------|-------------|--------|--------|---------|--------|----------|-----------|
| Tape joint for new to existing drywall - per LF                                              | 32.50 LF    |        | 0.00   | 9.87    | 26.94  | 64.16    | 411.88    |
| Suspended ceiling tile - High grade - 2' x 2'                                                | 1,092.63 SF |        | 0.00   | 3.92    | 359.78 | 856.62   | 5,499.51  |
| Armstrong 1911A Humidguard Plus no longer available and need to replace entire ceiling tiles |             |        |        |         |        |          |           |
| Suspended ceiling grid - 2' x 2'                                                             | 20.00 SF    |        | 0.00   | 2.71    | 4.55   | 10.84    | 69.59     |
| Replace the damaged grid where ceiling tiles pulled grid apart                               |             |        |        |         |        |          |           |
| Suspended ceiling grid - Reset/realign                                                       | 1,092.63 SF |        | 0.00   | 2.33    | 213.85 | 509.16   | 3,268.84  |
| Detach & Reset Fluorescent - one tube - 4' - fixture w/lens                                  | 7.00 EA     | 116.84 | 0.00   | 0.00    | 68.70  | 163.58   | 1,050.16  |
| Seal/prime (1 coat) then paint (1 coat) the walls                                            | 1,125.46 SF |        | 0.00   | 1.40    | 132.35 | 315.12   | 2,023.11  |
| Seal (1 coat) & paint (2 coats) column                                                       | 16.00 LF    |        | 0.00   | 13.54   | 18.19  | 43.32    | 278.15    |
| Cove base molding - rubber or vinyl, 4" high                                                 | 147.81 LF   |        | 0.00   | 2.80    | 34.76  | 82.78    | 531.41    |
| Clean and deodorize carpet                                                                   | 1,092.63 SF |        | 0.00   | 0.94    | 0.00   | 205.42   | 1,232.49  |
| Totals: Conference Room                                                                      |             |        |        |         | 875.22 | 2,289.36 | 14,611.38 |



**Stairs2**

**Height: 13' 3"**

|                           |                          |
|---------------------------|--------------------------|
| 265.57 SF Walls           | 45.07 SF Ceiling         |
| 310.64 SF Walls & Ceiling | 45.40 SF Floor           |
| 5.04 SY Flooring          | 19.35 LF Floor Perimeter |
| 19.35 LF Ceil. Perimeter  |                          |



**Subroom: Stairs2 (2)**

**Height: 18' 6"**

|                           |                         |
|---------------------------|-------------------------|
| 213.04 SF Walls           | 30.28 SF Ceiling        |
| 243.33 SF Walls & Ceiling | 52.83 SF Floor          |
| 5.87 SY Flooring          | 9.23 LF Floor Perimeter |
| 7.83 LF Ceil. Perimeter   |                         |

Missing Wall

3' 10 3/8" X 18' 6"

Opens into ROOM2

Missing Wall

3' 10 3/8" X 18' 6"

Opens into STAIRS4

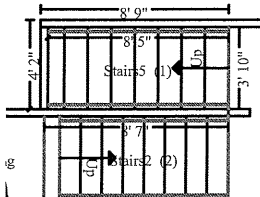
## Quick Response

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### CONTINUED - Stairs2

#### Subroom: Stairs5 (1)

Height: 13' 3"



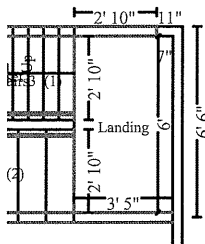
|                           |                         |
|---------------------------|-------------------------|
| 148.73 SF Walls           | 32.01 SF Ceiling        |
| 180.74 SF Walls & Ceiling | 54.57 SF Floor          |
| 6.06 SY Flooring          | 9.52 LF Floor Perimeter |
| 8.40 LF Ceil. Perimeter   |                         |

Missing Wall

3' 9 3/4" X 13' 3"

Opens into STAIRS4

| DESCRIPTION                                  | QTY       | RESET | REMOVE | REPLACE | TAX   | O&P    | TOTAL    |
|----------------------------------------------|-----------|-------|--------|---------|-------|--------|----------|
| Vinyl tile - High grade                      | 168.08 SF |       | 0.00   | 6.54    | 92.34 | 219.84 | 1,411.42 |
| Cove base molding - rubber or vinyl, 4" high | 20.00 LF  |       | 0.00   | 2.80    | 4.70  | 11.20  | 71.90    |
| Totals: Stairs2                              |           |       |        |         | 97.04 | 231.04 | 1,483.32 |



#### Landing

Height: 17' 6"

|                           |                         |
|---------------------------|-------------------------|
| 128.10 SF Walls           | 20.46 SF Ceiling        |
| 148.55 SF Walls & Ceiling | 21.59 SF Floor          |
| 2.40 SY Flooring          | 9.42 LF Floor Perimeter |
| 6.59 LF Ceil. Perimeter   |                         |

Missing Wall - Goes to neither Floor/Ceiling

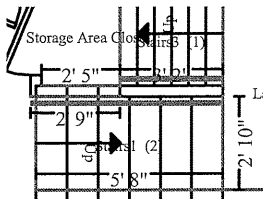
3' 4 11/16" X 13'

Opens into STORAGE\_AREA

Missing Wall - Goes to neither Floor/Ceiling

2' 10" X 13'

Opens into Exterior



#### Subroom: Stairs1 (2)

Height: 22'

|                          |                  |
|--------------------------|------------------|
| 43.84 SF Walls           | 16.26 SF Ceiling |
| 60.10 SF Walls & Ceiling | 35.22 SF Floor   |
| 3.91 SY Flooring         |                  |

Missing Wall

2' 10 3/16" X 22'

Opens into STORAGE\_AREA

Missing Wall - Goes to neither Floor/Ceiling

2' 8 13/16" X 13'

Opens into STORAGE\_AREA1

Missing Wall

2' 10 3/16" X 22'

Opens into LANDING

Missing Wall - Goes to neither Floor/Ceiling

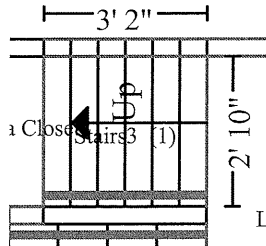
5' 8 7/16" X 13'

Opens into STORAGE\_AREA

## Quick Response

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2095 Route 9  
Round Lake, NY 12151

### CONTINUED - Landing



Subroom: Stairs3 (1)

Height: 17' 6"

|                          |                 |
|--------------------------|-----------------|
| 34.75 SF Walls           | 8.95 SF Ceiling |
| 43.71 SF Walls & Ceiling | 25.13 SF Floor  |
| 2.79 SY Flooring         |                 |

|                                              |                     |                         |
|----------------------------------------------|---------------------|-------------------------|
| Missing Wall                                 | 2' 10 1/4" X 17' 6" | Opens into LANDING      |
| Missing Wall                                 | 2' 10 1/4" X 17' 6" | Opens into STORAGE_ARE1 |
| Missing Wall - Goes to neither Floor/Ceiling | 3' 1 11/16" X 13'   | Opens into Exterior     |

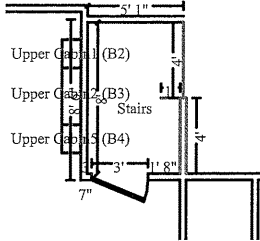
| DESCRIPTION                                  | QTY      | RESET | REMOVE | REPLACE | TAX      | O&P      | TOTAL     |
|----------------------------------------------|----------|-------|--------|---------|----------|----------|-----------|
| Vinyl tile - High grade                      | 90.13 SF |       | 0.00   | 6.54    | 49.51    | 117.90   | 756.86    |
| Cove base molding - rubber or vinyl, 4" high | 15.00 LF |       | 0.00   | 2.80    | 3.53     | 8.40     | 53.93     |
| Totals: Landing                              |          |       |        |         | 53.04    | 126.30   | 810.79    |
| Total: Basement                              |          |       |        |         | 2,099.19 | 5,291.76 | 33,849.18 |

### 1st Floor

#### 1st Floor

| DESCRIPTION                                 | QTY         | RESET | REMOVE | REPLACE | TAX    | O&P    | TOTAL    |
|---------------------------------------------|-------------|-------|--------|---------|--------|--------|----------|
| Final cleaning - construction - Residential | 3,400.22 SF |       | 0.00   | 0.62    | 177.08 | 421.62 | 2,706.84 |
| Total: 1st Floor                            |             |       |        |         | 177.08 | 421.62 | 2,706.84 |

Quick Response  
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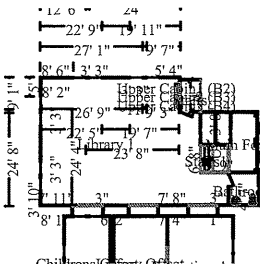


**Height: 8'**

|                           |                          |
|---------------------------|--------------------------|
| 138.06 SF Walls           | 39.92 SF Ceiling         |
| 177.98 SF Walls & Ceiling | 39.92 SF Floor           |
| 4.44 SY Flooring          | 18.99 LF Floor Perimeter |
| 21.99 LF Ceil. Perimeter  |                          |

Opens into Exterior  
 Opens into STAIRS  
 Opens into Exterior  
 Opens into LIBRARY\_1

| DESCRIPTION                                  | QTY      | RESET | REMOVE | REPLACE | TAX   | O&P   | TOTAL  |
|----------------------------------------------|----------|-------|--------|---------|-------|-------|--------|
| Vinyl tile - High grade                      | 43.91 SF |       | 0.00   | 6.54    | 24.12 | 57.44 | 368.73 |
| Cove base molding - rubber or vinyl, 4" high | 20.00 LF |       | 0.00   | 2.80    | 4.70  | 11.20 | 71.90  |
| Totals: Stairs                               |          |       |        |         | 28.82 | 68.64 | 440.63 |



Height: 13'

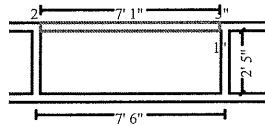
|                             |                           |
|-----------------------------|---------------------------|
| 1,542.11 SF Walls           | 1,306.85 SF Ceiling       |
| 2,848.96 SF Walls & Ceiling | 1,306.85 SF Floor         |
| 145.21 SY Flooring          | 128.81 LF Floor Perimeter |
| 151.94 LF Ceil. Perimeter   |                           |

Opens into STAIRS1  
 Opens into UNKNOWN\_ROO11  
 Opens into BATHROOM  
 Opens into Exterior  
 Opens into Exterior  
 Opens into Exterior  
 Opens into Exterior  
 Opens into Exterior  
 Opens into Exterior  
 Opens into Exterior  
 Opens into STAIRS  
 Opens into UNKNOWN\_ROO1  
 Opens into STAIRS1

## Quick Response

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2095 Route 9  
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### CONTINUED - Library 1



#### Subroom: Library 1 (3)

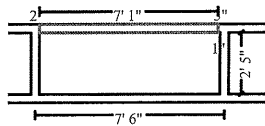
Height: 9' 4"

|                           |                          |
|---------------------------|--------------------------|
| 113.36 SF Walls           | 17.48 SF Ceiling         |
| 130.84 SF Walls & Ceiling | 17.48 SF Floor           |
| 1.94 SY Flooring          | 12.08 LF Floor Perimeter |
| 19.17 LF Ceil. Perimeter  |                          |

Missing Wall - Goes to Floor

7' 1" X 9' 3"

Opens into LIBRARY\_1



#### Subroom: Library 1 (5)

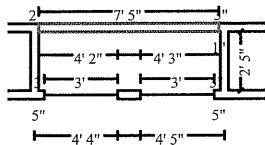
Height: 9' 4"

|                           |                          |
|---------------------------|--------------------------|
| 113.38 SF Walls           | 17.57 SF Ceiling         |
| 130.94 SF Walls & Ceiling | 17.57 SF Floor           |
| 1.95 SY Flooring          | 12.15 LF Floor Perimeter |
| 19.23 LF Ceil. Perimeter  |                          |

Missing Wall - Goes to Floor

7' 1" X 9' 4"

Opens into LIBRARY\_1



#### Subroom: Library 1 (6)

Height: 11'

|                           |                          |
|---------------------------|--------------------------|
| 141.03 SF Walls           | 18.35 SF Ceiling         |
| 159.38 SF Walls & Ceiling | 18.35 SF Floor           |
| 2.04 SY Flooring          | 19.87 LF Floor Perimeter |
| 19.87 LF Ceil. Perimeter  |                          |

Window

3' 1/4" X 3'

Opens into CHILDRENS\_OF

Window

3' 7/16" X 3'

Opens into CHILDRENS\_OF

Missing Wall - Goes to neither Floor/Ceiling

7' 5" X 8'

Opens into LIBRARY\_1

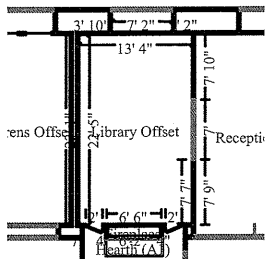
| DESCRIPTION                                                           | QTY         | RESET | REMOVE | REPLACE | TAX    | O&P    | TOTAL    |
|-----------------------------------------------------------------------|-------------|-------|--------|---------|--------|--------|----------|
| 1/2" drywall - hung, taped, floated, ready for paint                  | 37.33 SF    |       | 0.00   | 3.59    | 11.26  | 26.80  | 172.07   |
| Tape joint for new to existing drywall - per LF                       | 18.67 LF    |       | 0.00   | 9.87    | 15.48  | 36.86  | 236.61   |
| Batt insulation - 6" - R19 - paper / foil faced                       | 23.00 SF    |       | 0.00   | 1.67    | 3.23   | 7.68   | 49.32    |
| Seal/prime (1 coat) then paint (1 coat) more than the floor perimeter | 1,757.91 SF |       | 0.00   | 1.40    | 206.72 | 492.22 | 3,160.01 |
| Scaffolding Setup & Take down - per hour                              | 4.00 HR     |       | 0.00   | 97.90   | 32.89  | 78.32  | 502.81   |
| Scaffolding needed to mask/cut in the high walls                      |             |       |        |         |        |        |          |

## Quick Response

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2095 Route 9  
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### CONTINUED - Library 1

| DESCRIPTION                                             | QTY         | RESET | REMOVE | REPLACE | TAX      | O&P      | TOTAL     |
|---------------------------------------------------------|-------------|-------|--------|---------|----------|----------|-----------|
| Remove Library book shelves - full height - Commercial  | 89.58 LF    |       | 9.00   | 0.00    | 67.73    | 161.24   | 1,035.19  |
| Install Library book shelves - full height - Commercial | 89.58 LF    |       | 0.00   | 18.51   | 139.28   | 331.62   | 2,129.03  |
| Baseboard - 6" stain grade                              | 172.91 LF   |       | 0.00   | 8.25    | 119.83   | 285.30   | 1,831.64  |
| Stain & finish baseboard - oversized                    | 172.91 LF   |       | 0.00   | 2.68    | 38.93    | 92.68    | 595.01    |
| Base shoe                                               | 172.91 LF   |       | 0.00   | 2.08    | 30.22    | 71.94    | 461.81    |
| Stain & finish base shoe or quarter round               | 172.91 LF   |       | 0.00   | 1.92    | 27.89    | 66.40    | 426.28    |
| Floor prep (scrape rubber back residue)                 | 1,360.25 SF |       | 0.00   | 0.86    | 98.27    | 233.96   | 1,502.05  |
| Glue down carpet - heavy traffic                        | 1,564.28 SF |       | 0.00   | 5.44    | 714.82   | 1,701.94 | 10,926.44 |
| ALL CONTENTS MANIPULATION TO BE COMPLETED BY OTHERS     |             |       |        |         |          |          |           |
| Totals: Library 1                                       |             |       |        |         | 1,506.55 | 3,586.96 | 23,028.27 |



### Library Offset

Height: 13'

|                             |                          |
|-----------------------------|--------------------------|
| 838.28 SF Walls             | 298.56 SF Ceiling        |
| 1,136.84 SF Walls & Ceiling | 298.56 SF Floor          |
| 33.17 SY Flooring           | 60.46 LF Floor Perimeter |
| 71.45 LF Ceil. Perimeter    |                          |

Missing Wall - Goes to Floor

7' 1/4" X 9' 4 3/16"

Opens into RECEPTION\_AR

Door

1' 11 7/8" X 6' 11 1/16"

Opens into FRONT\_ENTRY

Door

1' 11 3/4" X 6' 11 1/16"

Opens into FRONT\_ENTRY

| DESCRIPTION                                             | QTY       | RESET | REMOVE | REPLACE | TAX    | O&P    | TOTAL    |
|---------------------------------------------------------|-----------|-------|--------|---------|--------|--------|----------|
| Remove Library book shelves - full height - Commercial  | 22.50 LF  |       | 9.00   | 0.00    | 17.02  | 40.50  | 260.02   |
| Install Library book shelves - full height - Commercial | 22.50 LF  |       | 0.00   | 18.51   | 34.98  | 83.30  | 534.76   |
| Baseboard - 6" stain grade                              | 60.46 LF  |       | 0.00   | 8.25    | 41.90  | 99.76  | 640.46   |
| Stain & finish baseboard - oversized                    | 60.46 LF  |       | 0.00   | 2.68    | 13.61  | 32.40  | 208.04   |
| Base shoe                                               | 60.46 LF  |       | 0.00   | 2.08    | 10.56  | 25.16  | 161.48   |
| Stain & finish base shoe or quarter round               | 60.46 LF  |       | 0.00   | 1.92    | 9.76   | 23.22  | 149.06   |
| Floor prep (scrape rubber back residue)                 | 298.56 SF |       | 0.00   | 0.86    | 21.56  | 51.36  | 329.68   |
| Glue down carpet - heavy traffic                        | 343.34 SF |       | 0.00   | 5.44    | 156.89 | 373.56 | 2,398.22 |

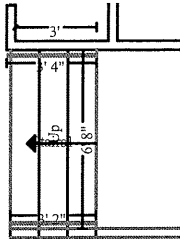
ALL CONTENTS MANIPULATION TO BE COMPLETED BY OTHERS

## Quick Response

Quick Response  
2095 Route 9  
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### CONTINUED - Library Offset

| DESCRIPTION            | QTY | RESET | REMOVE | REPLACE | TAX    | O&P    | TOTAL    |
|------------------------|-----|-------|--------|---------|--------|--------|----------|
| Totals: Library Offset |     |       |        |         | 306.28 | 729.26 | 4,681.72 |



Stairs1

Height: 15' 6"

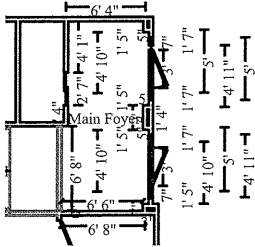
|                          |                         |
|--------------------------|-------------------------|
| 47.86 SF Walls           | 21.46 SF Ceiling        |
| 69.31 SF Walls & Ceiling | 41.01 SF Floor          |
| 4.56 SY Flooring         | 3.90 LF Floor Perimeter |
| 3.37 LF Ceil. Perimeter  |                         |

|                                              |                    |                         |
|----------------------------------------------|--------------------|-------------------------|
| Missing Wall                                 | 6' 8 1/2" X 15' 6" | Opens into UNKNOWN_RO11 |
| Missing Wall                                 | 6' 8 1/2" X 15' 6" | Opens into LIBRARY_1    |
| Missing Wall - Goes to neither Floor/Ceiling | 3' 2 3/8" X 9' 6"  | Opens into LIBRARY_1    |

| DESCRIPTION                                          | QTY      | RESET | REMOVE | REPLACE | TAX    | O&P    | TOTAL    |
|------------------------------------------------------|----------|-------|--------|---------|--------|--------|----------|
| 1/2" drywall - hung, taped, floated, ready for paint | 47.86 SF |       | 0.00   | 3.59    | 14.44  | 34.36  | 220.62   |
| Seal/prime (1 coat) then paint (1 coat) the walls    | 47.86 SF |       | 0.00   | 1.40    | 5.63   | 13.40  | 86.03    |
| 1/2" Cement board                                    | 82.03 SF |       | 0.00   | 6.39    | 44.03  | 104.84 | 673.04   |
| Riser and tread                                      |          |       |        |         |        |        |          |
| Tile floor covering - High grade                     | 82.03 SF |       | 0.00   | 18.18   | 125.27 | 298.26 | 1,914.84 |
| Non-slip aluminum oxide finish                       | 41.01 SF |       | 0.00   | 1.66    | 5.72   | 13.62  | 87.42    |
| Stair nosing safety tread - 1 1/2"x 3"               | 20.00 LF |       | 0.00   | 5.67    | 9.53   | 22.68  | 145.61   |
| Totals: Stairs1                                      |          |       |        |         | 204.62 | 487.16 | 3,127.56 |

## Quick Response

Quick Response  
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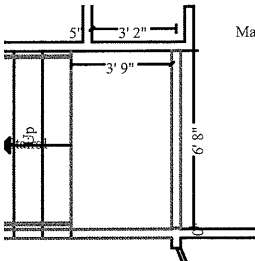


### Main Foyer

Height: 10'

|                           |                          |
|---------------------------|--------------------------|
| 306.44 SF Walls           | 98.36 SF Ceiling         |
| 404.81 SF Walls & Ceiling | 98.36 SF Floor           |
| 10.93 SY Flooring         | 29.52 LF Floor Perimeter |
| 44.81 LF Ceil. Perimeter  |                          |

|        |                          |                         |
|--------|--------------------------|-------------------------|
| Door   | 2' 7 7/16" X 6' 11 7/16" | Opens into UNKNOWN_ROOM |
| Window | 4' 11" X 1' 1"           | Opens into Exterior     |
| Window | 6 5/8" X 4' 10 11/16"    | Opens into Exterior     |
| Door   | 2' 11 7/8" X 6' 9 7/8"   | Opens into Exterior     |
| Window | 6 13/16" X 4' 10 11/16"  | Opens into Exterior     |
| Window | 7 3/8" X 5' 2 5/8"       | Opens into Exterior     |
| Window | 4' 11 3/4" X 1' 1"       | Opens into Exterior     |
| Door   | 3' 1/8" X 6' 10 11/16"   | Opens into Exterior     |
| Window | 7" X 4' 10 11/16"        | Opens into Exterior     |



### Subroom: Foyer 2 (1)

Height: 15' 6"

|                           |                         |
|---------------------------|-------------------------|
| 125.17 SF Walls           | 25.33 SF Ceiling        |
| 150.50 SF Walls & Ceiling | 25.33 SF Floor          |
| 2.81 SY Flooring          | 7.59 LF Floor Perimeter |
| 14.26 LF Ceil. Perimeter  |                         |

|                                              |                    |                        |
|----------------------------------------------|--------------------|------------------------|
| Missing Wall                                 | 6' 8 1/2" X 15' 6" | Opens into STAIRS1     |
| Missing Wall - Goes to neither Floor/Ceiling | 3' 9 5/16" X 9' 6" | Opens into LIBRARY_1   |
| Missing Wall - Goes to Floor                 | 6' 8" X 9'         | Opens into MAIN_FOYER2 |

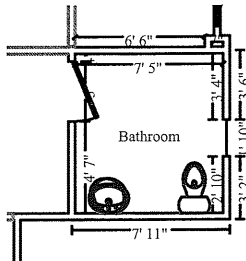
| DESCRIPTION                                                   | QTY       | RESET | REMOVE | REPLACE | TAX   | O&P    | TOTAL    |
|---------------------------------------------------------------|-----------|-------|--------|---------|-------|--------|----------|
| 5/8" drywall - hung, taped, floated, ready for paint          | 123.70 SF |       | 0.00   | 3.77    | 39.17 | 93.28  | 598.80   |
| Tape joint for new to existing drywall - per LF               | 59.07 LF  |       | 0.00   | 9.87    | 48.97 | 116.60 | 748.59   |
| Detach & Reset Hanging light fixture                          | 2.00 EA   | 80.49 | 0.00   | 0.00    | 13.52 | 32.20  | 206.70   |
| R&R Smoke detector                                            | 1.00 EA   |       | 23.97  | 83.16   | 9.00  | 21.44  | 137.57   |
| Batt insulation - 12" - R38 - paper / foil faced              | 123.70 SF |       | 0.00   | 2.77    | 28.79 | 68.54  | 439.98   |
| 5/8" drywall - hung, taped, floated, ready for paint          | 215.81 SF |       | 0.00   | 3.77    | 68.34 | 162.72 | 1,044.66 |
| Batt insulation - 6" - R19 - paper / foil faced               | 215.81 SF |       | 0.00   | 1.67    | 30.28 | 72.08  | 462.76   |
| Seal/prime (1 coat) then paint (1 coat) the walls and ceiling | 555.31 SF |       | 0.00   | 1.40    | 65.30 | 155.48 | 998.21   |

## Quick Response

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### CONTINUED - Main Foyer

| DESCRIPTION                               | QTY       | RESET | REMOVE | REPLACE | TAX    | O&P      | TOTAL    |
|-------------------------------------------|-----------|-------|--------|---------|--------|----------|----------|
| Exit sign - Detach & reset                | 1.00 EA   |       | 0.00   | 104.63  | 8.78   | 20.92    | 134.33   |
| Emergency lighting - battery - Commercial | 1.00 EA   |       | 0.00   | 340.17  | 28.57  | 68.04    | 436.78   |
| Baseboard - 6" stain grade                | 37.11 LF  |       | 0.00   | 8.25    | 25.72  | 61.24    | 393.12   |
| Stain & finish baseboard - oversized      | 37.11 LF  |       | 0.00   | 2.68    | 8.35   | 19.90    | 127.70   |
| Base shoe                                 | 37.11 LF  |       | 0.00   | 2.08    | 6.48   | 15.44    | 99.11    |
| Stain & finish base shoe or quarter round | 37.11 LF  |       | 0.00   | 1.92    | 5.99   | 14.26    | 91.50    |
| 1/2" Cement board                         | 123.70 SF |       | 0.00   | 6.39    | 66.40  | 158.08   | 1,014.92 |
| Tile floor covering - High grade          | 123.70 SF |       | 0.00   | 18.18   | 188.90 | 449.78   | 2,887.55 |
| Totals: Main Foyer                        |           |       |        |         | 642.56 | 1,530.00 | 9,822.28 |



### Bathroom

Height: 8'

|                           |                          |
|---------------------------|--------------------------|
| 217.64 SF Walls           | 58.77 SF Ceiling         |
| 276.42 SF Walls & Ceiling | 58.77 SF Floor           |
| 6.53 SY Flooring          | 27.70 LF Floor Perimeter |
| 30.69 LF Ceil. Perimeter  |                          |

Window

1' 10 1/4" X 3' 8 1/2"

Opens into Exterior

Door

2' 11 7/8" X 7' 1/4"

Opens into LIBRARY\_1

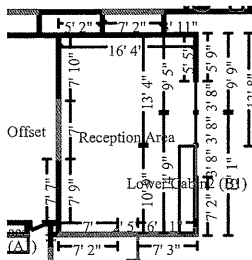
| DESCRIPTION                                                                                                                                      | QTY       | RESET | REMOVE | REPLACE | TAX   | O&P    | TOTAL    |
|--------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-------|--------|---------|-------|--------|----------|
| Suspended ceiling system - High grade - 2' x 2'                                                                                                  | 58.77 SF  |       | 0.00   | 6.91    | 34.12 | 81.22  | 521.44   |
| Acoustical Treatments Installer - per hour                                                                                                       | 8.00 HR   |       | 0.00   | 130.78  | 87.89 | 209.24 | 1,343.37 |
| Additional labor needed as line item entry only allows 1.25 hours to obtain, cut grid to size, install grid , then cut and install ceiling tiles |           |       |        |         |       |        |          |
| Batt insulation - 12" - R38 - paper / foil faced                                                                                                 | 58.77 SF  |       | 0.00   | 2.77    | 13.68 | 32.56  | 209.03   |
| Fluorescent - acoustic grid fixture, 2' x 2'                                                                                                     | 1.00 EA   |       | 0.00   | 240.78  | 20.22 | 48.16  | 309.16   |
| Ceiling diffusers / grills - square, lay-in - 24"                                                                                                | 1.00 EA   |       | 0.00   | 140.20  | 11.77 | 28.04  | 180.01   |
| Sprinkler head/escutcheon - Detach & reset                                                                                                       | 1.00 EA   |       | 0.00   | 19.41   | 1.63  | 3.88   | 24.92    |
| 1/2" drywall - hung, taped, floated, ready for paint                                                                                             | 217.64 SF |       | 0.00   | 3.59    | 65.63 | 156.26 | 1,003.22 |
| Seal/prime (1 coat) then paint (1 coat) the walls                                                                                                | 217.64 SF |       | 0.00   | 1.40    | 25.60 | 60.94  | 391.24   |

## Quick Response

Quick Response  
2095 Route 9  
Round Lake, NY 12151

### CONTINUED - Bathroom

| DESCRIPTION                                       | QTY      | RESET | REMOVE | REPLACE | TAX    | O&P      | TOTAL    |
|---------------------------------------------------|----------|-------|--------|---------|--------|----------|----------|
| Window trim set (casing & stop) - stain grade     | 12.00 LF |       | 0.00   | 8.95    | 9.02   | 21.48    | 137.90   |
| Stain & finish door/window trim & jamb (per side) | 1.00 EA  |       | 0.00   | 61.88   | 5.20   | 12.38    | 79.46    |
| Interior door - Detach & reset                    | 1.00 EA  |       | 0.00   | 109.50  | 9.20   | 21.90    | 140.60   |
| Steel door frame - 3' opening                     | 1.00 EA  |       | 0.00   | 427.80  | 35.94  | 85.56    | 549.30   |
| Paint door or window opening - 2 coats (per side) | 2.00 EA  |       | 0.00   | 47.44   | 7.97   | 18.98    | 121.83   |
| Sink - wall mounted - Detach & reset              | 1.00 EA  |       | 0.00   | 292.55  | 24.58  | 58.52    | 375.65   |
| Sink faucet - Detach & reset                      | 1.00 EA  |       | 0.00   | 155.00  | 13.02  | 31.00    | 199.02   |
| P-trap assembly - ABS (plastic)                   | 1.00 EA  |       | 0.00   | 73.11   | 6.14   | 14.62    | 93.87    |
| Remove Diaper change station - plastic            | 1.00 EA  |       | 129.63 | 0.00    | 10.88  | 25.92    | 166.43   |
| Install Diaper change station - plastic           | 1.00 EA  |       | 0.00   | 356.01  | 29.90  | 71.20    | 457.11   |
| Toilet - Detach & reset                           | 1.00 EA  |       | 0.00   | 292.29  | 24.55  | 58.46    | 375.30   |
| Handicap grab bar - Detach & reset                | 2.00 EA  |       | 0.00   | 56.96   | 9.56   | 22.78    | 146.26   |
| Fire alarm - Manual pull station                  | 1.00 EA  |       | 0.00   | 227.36  | 19.10  | 45.48    | 291.94   |
| Cove base molding - rubber or vinyl, 4" high      | 27.70 LF |       | 0.00   | 2.80    | 6.52   | 15.52    | 99.60    |
| 1/2" Cement board                                 | 58.77 SF |       | 0.00   | 6.39    | 31.55  | 75.10    | 482.19   |
| Tile floor covering - High grade                  | 64.65 SF |       | 0.00   | 18.18   | 98.72  | 235.06   | 1,509.12 |
| Totals: Bathroom                                  |          |       |        |         | 602.39 | 1,434.26 | 9,207.97 |



#### Reception Area

Height: 13'

|                             |                          |
|-----------------------------|--------------------------|
| 771.96 SF Walls             | 389.46 SF Ceiling        |
| 1,161.43 SF Walls & Ceiling | 389.46 SF Floor          |
| 43.27 SY Flooring           | 63.89 LF Floor Perimeter |
| 80.35 LF Ceil. Perimeter    |                          |

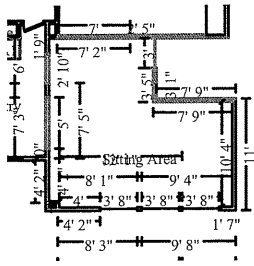
|                                              |                       |                         |
|----------------------------------------------|-----------------------|-------------------------|
| Missing Wall - Goes to Floor                 | 7' 1/4" X 9' 4 3/16"  | Opens into LIBRARY_OFFS |
| Missing Wall - Goes to Floor                 | 7' 3/16" X 12'        | Opens into SITTING_AREA |
| Missing Wall                                 | 1' 3 3/8" X 13'       | Opens into RECEPTION_AR |
| Missing Wall - Goes to Floor                 | 2' 5 3/16" X 12'      | Opens into SITTING_AREA |
| Missing Wall - Goes to neither Floor/Ceiling | 6' 10 11/16" X 8'     | Opens into Exterior     |
| Window                                       | 3' 7 7/8" X 3' 5 3/4" | Opens into Exterior     |
| Window                                       | 3' 7 3/4" X 3' 6 1/8" | Opens into Exterior     |
| Window                                       | 3' 8 3/8" X 3' 6 1/2" | Opens into Exterior     |

## Quick Response

Quick Response  
2095 Route 9  
Round Lake, NY 12151

### CONTINUED - Reception Area

| DESCRIPTION                                         | QTY       | RESET | REMOVE | REPLACE | TAX    | O&P    | TOTAL    |
|-----------------------------------------------------|-----------|-------|--------|---------|--------|--------|----------|
| Baseboard - 6" stain grade                          | 63.89 LF  |       | 0.00   | 8.25    | 44.28  | 105.42 | 676.79   |
| Stain & finish baseboard - oversized                | 63.89 LF  |       | 0.00   | 2.68    | 14.39  | 34.24  | 219.86   |
| Base shoe                                           | 63.89 LF  |       | 0.00   | 2.08    | 11.16  | 26.58  | 170.63   |
| Stain & finish base shoe or quarter round           | 63.89 LF  |       | 0.00   | 1.92    | 10.31  | 24.54  | 157.52   |
| Floor prep (scrape rubber back residue)             | 389.46 SF |       | 0.00   | 0.86    | 28.14  | 66.98  | 430.06   |
| Glue down carpet - heavy traffic                    | 447.88 SF |       | 0.00   | 5.44    | 204.66 | 487.30 | 3,128.43 |
| Cove base molding - rubber or vinyl, 6" high        | 18.00 LF  |       | 0.00   | 3.58    | 5.41   | 12.88  | 82.73    |
| Rubber base replacement behind the reception desk   |           |       |        |         |        |        |          |
| ALL CONTENTS MANIPULATION TO BE COMPLETED BY OTHERS |           |       |        |         |        |        |          |
| Totals: Reception Area                              |           |       |        |         | 318.35 | 757.94 | 4,866.02 |



### Sitting Area

Height: 13'

|                           |                          |
|---------------------------|--------------------------|
| 503.18 SF Walls           | 251.64 SF Ceiling        |
| 754.82 SF Walls & Ceiling | 251.64 SF Floor          |
| 27.96 SY Flooring         | 49.18 LF Floor Perimeter |
| 66.66 LF Ceil. Perimeter  |                          |

|                                              |                          |                         |
|----------------------------------------------|--------------------------|-------------------------|
| Missing Wall - Goes to neither Floor/Ceiling | 3' 4 1/2" X 9'           | Opens into Exterior     |
| Missing Wall                                 | 1' 1" X 13'              | Opens into SITTING_AREA |
| Missing Wall                                 | 3' 1/8" X 13'            | Opens into Exterior     |
| Missing Wall - Goes to Floor                 | 2' 5 3/16" X 12'         | Opens into RECEPTION_AR |
| Missing Wall - Goes to Floor                 | 7' 2 3/16" X 12'         | Opens into RECEPTION_AR |
| Missing Wall - Goes to Floor                 | 4' 11 15/16" X 9' 7 3/4" | Opens into FRONT_ENTRY  |
| Missing Wall - Goes to Floor                 | 2' 10 1/2" X 8' 7 15/16" | Opens into FRONT_ENTRY  |
| Window                                       | 3' 7 3/4" X 6' 11 7/8"   | Opens into Exterior     |
| Window                                       | 3' 8 5/16" X 6' 9 1/8"   | Opens into Exterior     |
| Window                                       | 3' 8 1/8" X 6' 10 11/16" | Opens into Exterior     |
| Missing Wall - Goes to neither Floor/Ceiling | 7' 9 3/8" X 9'           | Opens into Exterior     |

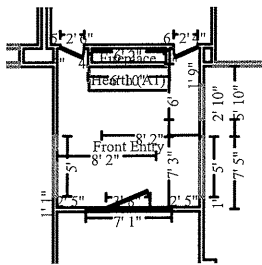
| DESCRIPTION                          | QTY      | RESET | REMOVE | REPLACE | TAX   | O&P   | TOTAL  |
|--------------------------------------|----------|-------|--------|---------|-------|-------|--------|
| Baseboard - 6" stain grade           | 49.18 LF |       | 0.00   | 8.25    | 34.08 | 81.14 | 520.96 |
| Stain & finish baseboard - oversized | 49.18 LF |       | 0.00   | 2.68    | 11.08 | 26.36 | 169.24 |
| Base shoe                            | 49.18 LF |       | 0.00   | 2.08    | 8.59  | 20.46 | 131.34 |

## Quick Response

Quick Response  
2095 Route 9  
Round Lake, NY 12151

### CONTINUED - Sitting Area

| DESCRIPTION                                         | QTY       | RESET | REMOVE | REPLACE | TAX    | O&P    | TOTAL    |
|-----------------------------------------------------|-----------|-------|--------|---------|--------|--------|----------|
| Stain & finish base shoe or quarter round           | 49.18 LF  |       | 0.00   | 1.92    | 7.93   | 18.88  | 121.24   |
| Floor prep (scrape rubber back residue)             | 251.64 SF |       | 0.00   | 0.86    | 18.18  | 43.28  | 277.87   |
| Glue down carpet - heavy traffic                    | 289.39 SF |       | 0.00   | 5.44    | 132.24 | 314.86 | 2,021.38 |
| ALL CONTENTS MANIPULATION TO BE COMPLETED BY OTHERS |           |       |        |         |        |        |          |
| Totals: Sitting Area                                |           |       |        |         | 212.10 | 504.98 | 3,242.03 |



### Front Entry

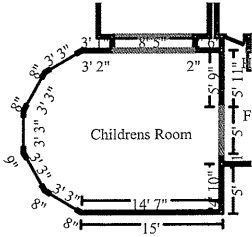
Height: 13'

|                           |                          |
|---------------------------|--------------------------|
| 487.91 SF Walls           | 145.53 SF Ceiling        |
| 633.44 SF Walls & Ceiling | 145.53 SF Floor          |
| 16.17 SY Flooring         | 32.36 LF Floor Perimeter |
| 52.83 LF Ceil. Perimeter  |                          |

|                              |                          |                         |
|------------------------------|--------------------------|-------------------------|
| Missing Wall - Goes to Floor | 4' 11 3/4" X 9' 7 3/4"   | Opens into CHILDRENS_R1 |
| Window                       | 7' 1 5/16" X 2' 4"       | Opens into Exterior     |
| Window                       | 1' 2 15/16" X 5' 4 3/16" | Opens into Exterior     |
| Door                         | 3' 7 15/16" X 7' 4 3/16" | Opens into Exterior     |
| Window                       | 1' 3" X 5' 3 3/8"        | Opens into Exterior     |
| Missing Wall - Goes to Floor | 4' 11 15/16" X 9' 7 3/4" | Opens into SITTING_AREA |
| Missing Wall - Goes to Floor | 2' 10 1/2" X 8' 7 15/16" | Opens into SITTING_AREA |
| Door                         | 1' 11 7/8" X 6' 11 1/16" | Opens into LIBRARY_OFFS |
| Door                         | 1' 11 3/4" X 6' 11 1/16" | Opens into LIBRARY_OFFS |

| DESCRIPTION         | QTY       | RESET | REMOVE | REPLACE | TAX   | O&P   | TOTAL  |
|---------------------|-----------|-------|--------|---------|-------|-------|--------|
| Clean floor - tile  | 145.53 SF |       | 0.00   | 1.25    | 15.28 | 36.38 | 233.57 |
| Totals: Front Entry |           |       |        |         | 15.28 | 36.38 | 233.57 |

Quick Response  
2095 Route 9  
Round Lake, NY 12151

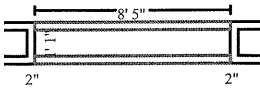


Height: 13'

|        |                    |        |                    |
|--------|--------------------|--------|--------------------|
| 637.96 | SF Walls           | 317.23 | SF Ceiling         |
| 955.19 | SF Walls & Ceiling | 317.23 | SF Floor           |
| 35.25  | SY Flooring        | 54.71  | LF Floor Perimeter |
| 68.11  | LF Ceil. Perimeter |        |                    |

|                                     |                               |                               |
|-------------------------------------|-------------------------------|-------------------------------|
| <b>Window</b>                       | <b>3' 3 1/4" X 7'</b>         | <b>Opens into Exterior</b>    |
| <b>Window</b>                       | <b>3' 2 11/16" X 7'</b>       | <b>Opens into Exterior</b>    |
| <b>Window</b>                       | <b>3' 2 15/16" X 7'</b>       | <b>Opens into Exterior</b>    |
| <b>Window</b>                       | <b>3' 2 3/4" X 7'</b>         | <b>Opens into Exterior</b>    |
| <b>Window</b>                       | <b>3' 3 7/16" X 7'</b>        | <b>Opens into Exterior</b>    |
| <b>Missing Wall - Goes to Floor</b> | <b>4' 11 3/4" X 9' 7 3/4"</b> | <b>Opens into FRONT_ENTRY</b> |

**Height: 10' 6"**



|                          |                         |
|--------------------------|-------------------------|
| 23.45 SF Walls           | 9.40 SF Ceiling         |
| 32.85 SF Walls & Ceiling | 9.40 SF Floor           |
| 1.04 SY Flooring         | 2.23 LF Floor Perimeter |
| 19.06 LF Ceil. Perimeter |                         |

|                              |                |                         |
|------------------------------|----------------|-------------------------|
| Missing Wall - Goes to Floor | 8' 5" X 10' 6" | Opens into CHILDRENS_R1 |
| Missing Wall - Goes to Floor | 8' 5" X 10' 6" | Opens into CHILDRENS_OF |

| DESCRIPTION                          | QTY | RESET | REMOVE | REPLACE | TAX      | O&P       | TOTAL     |
|--------------------------------------|-----|-------|--------|---------|----------|-----------|-----------|
| NO APPARENT DAMAGE DURING INSPECTION |     |       |        |         |          |           |           |
| Totals: Childrens Room               |     |       |        |         | 0.00     | 0.00      | 0.00      |
| Total: 1st Floor                     |     |       |        |         | 4,014.03 | 9,557.20  | 61,356.89 |
| Total: Source - DocuSketch           |     |       |        |         | 6,113.22 | 14,848.96 | 95,206.07 |

| DESCRIPTION                                                | QTY      | RESET | REMOVE | REPLACE | TAX    | O&P    | TOTAL    |
|------------------------------------------------------------|----------|-------|--------|---------|--------|--------|----------|
| Tandem axle dump trailer - per load - including dump fees  | 2.00 EA  |       | 442.75 | 0.00    | 74.39  | 177.10 | 1,136.99 |
| Commercial Supervision / Project Management - per hour     | 24.00 HR |       | 0.00   | 97.90   | 197.36 | 469.92 | 3,016.88 |
| Neg. air fan/Air scrub.-Large (per 24 hr period)-No monit. | 12.00 DA |       | 0.00   | 119.57  | 120.53 | 286.96 | 1,842.33 |

## Quick Response

Quick Response  
2095 Route 9  
Round Lake, NY 12151

### CONTINUED - General

| DESCRIPTION                                                                                 | QTY     | RESET | REMOVE | REPLACE   | TAX      | O&P       | TOTAL      |
|---------------------------------------------------------------------------------------------|---------|-------|--------|-----------|----------|-----------|------------|
| Per IICRC and OSHA air scrubbers to be used in areas with sheetrock replacement and sanding |         |       |        |           |          |           |            |
| LABOR ONLY CREDIT TO OBTAIN<br>AN AGREED PRICE                                              | 1.00 EA |       | 0.00   | -1,202.27 | 0.00     | 0.00      | -1,202.27  |
| Totals: General                                                                             |         |       |        |           | 392.28   | 933.98    | 4,793.93   |
| Line Item Totals: RICHARDSLIBRARY_RCON                                                      |         |       |        |           | 6,505.50 | 15,782.94 | 100,000.00 |

### Grand Total Areas:

|           |                    |          |                                |           |                        |
|-----------|--------------------|----------|--------------------------------|-----------|------------------------|
| 14,668.61 | SF Walls           | 6,343.52 | SF Ceiling                     | 21,012.13 | SF Walls and Ceiling   |
| 6,452.65  | SF Floor           | 716.96   | SY Flooring                    | 1,444.30  | LF Floor Perimeter     |
| 0.00      | SF Long Wall       | 0.00     | SF Short Wall                  | 1,758.84  | LF Ceil. Perimeter     |
| 6,452.65  | Floor Area         | 6,790.53 | Total Area                     | 13,599.92 | Interior Wall Area     |
| 7,403.51  | Exterior Wall Area | 791.88   | Exterior Perimeter of<br>Walls |           |                        |
| 0.00      | Surface Area       | 0.00     | Number of Squares              | 0.00      | Total Perimeter Length |
| 0.00      | Total Ridge Length | 0.00     | Total Hip Length               |           |                        |

## Quick Response

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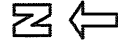
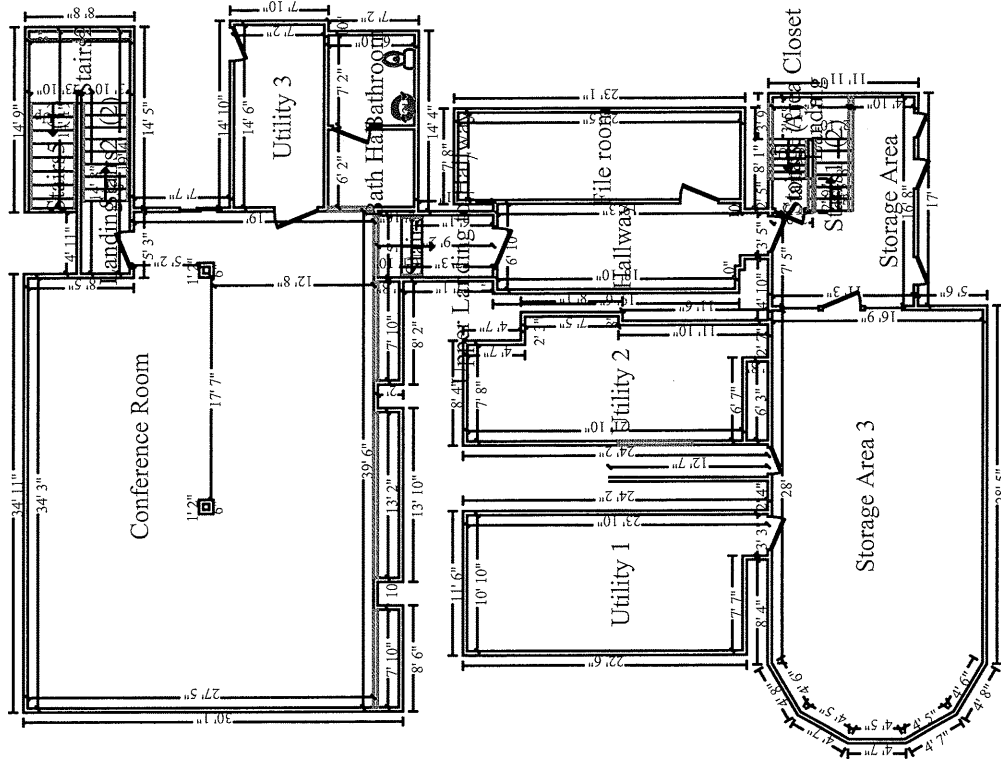
Quick Response  
2095 Route 9  
Round Lake, NY 12151

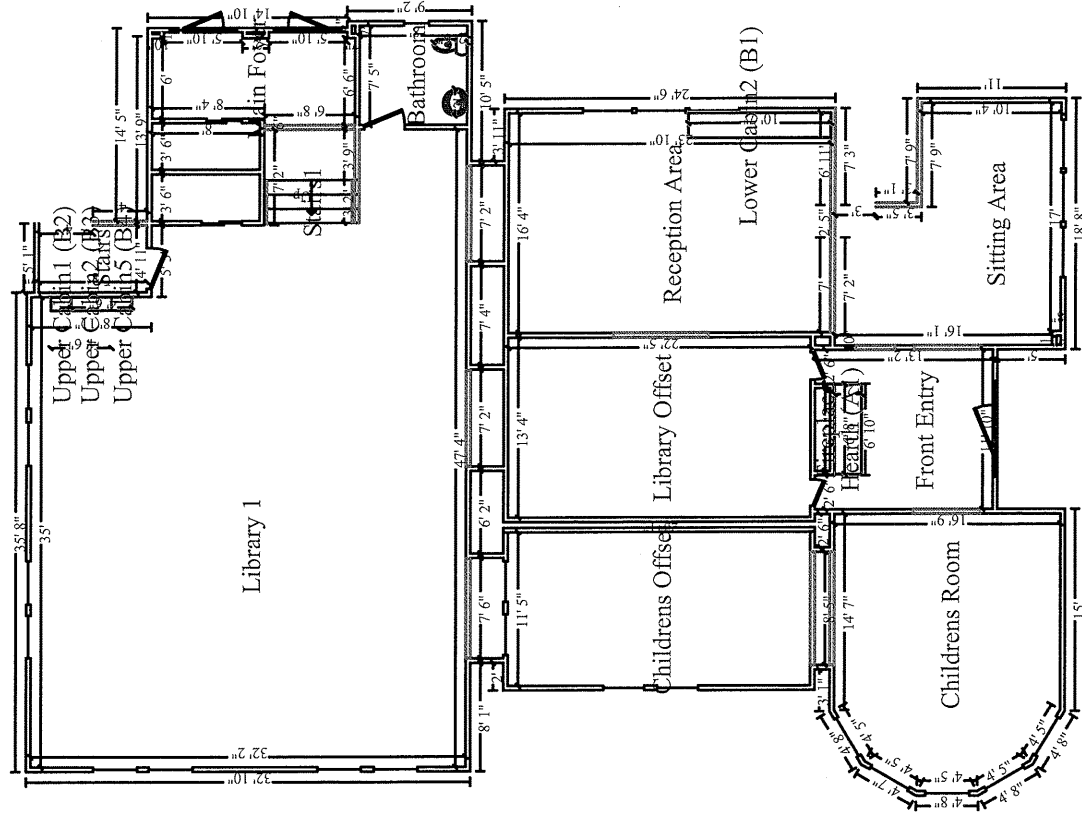
### Summary for Dwelling

|                               |                     |
|-------------------------------|---------------------|
| Line Item Total               | 77,711.56           |
| Overhead                      | 7,891.47            |
| Profit                        | 7,891.47            |
| Total Tax(Rep-Maint)          | 6,505.50            |
|                               | <hr/>               |
| <b>Replacement Cost Value</b> | <b>\$100,000.00</b> |
| <b>Net Claim</b>              | <b>\$100,000.00</b> |
|                               | <hr/> <hr/>         |

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BJ Jourdanais  
Estimator





**CHS Wealth Management & CPAs**  
**277 Blair Park Rd., Ste.110**  
**Williston, VT 05495**  
**866-247-6800**

March 31, 2026

**CONFIDENTIAL**

RICHARDS LIBRARY  
36 ELM STREET  
WARRENSBURG, NY 12885

Dear :

We have prepared the following returns from information provided by you without verification or audit.

Return of Organization Exempt From Income Tax (Form 990)

We suggest that you examine these returns carefully to fully acquaint yourself with all items contained therein to ensure that there are no omissions or misstatements. Attached are instructions for signing and filing each return. Please follow those instructions carefully.

Enclosed is any material you furnished for use in preparing the returns. If the returns are examined, requests may be made for supporting documentation. Therefore, we recommend that you retain all pertinent records for at least seven years.

In order that we may properly advise you of tax considerations, please keep us informed of any significant changes in your financial affairs or of any correspondence received from taxing authorities.

If you have any questions, or if we can be of assistance in any way, please call.

Sincerely,

CHS Wealth Management & CPAs

## **Filing Instructions**

### **RICHARDS LIBRARY**

#### **Exempt Organization Tax Return**

**Taxable Year Ended December 31, 2025**

**Date Due:** May 15, 2026

**Remittance:** None is required. Your Form 990 for the tax year ended 12/31/2025 shows no balance due.

**Signature:** You are using a Personal Identification Number (PIN) for signing your return electronically. Form 8879-TE, IRS *e-file* Signature Authorization for an Exempt Organization should be signed and dated by an authorized officer of the organization and returned to:

CHS Wealth Management & CPAs  
277 Blair Park Rd., Ste.110  
Williston, VT 05495

***Important:*** Your return will not be filed with the IRS until the signed Form 8879-TE has been received by this office.

**Other:** Your return is being filed electronically with the IRS and is not required to be mailed. If you Mail a paper copy of your return to the IRS it will delay the processing of your return.

RICHARDS LIBRARY  
36 ELM STREET  
WARRENSBURG, NY 12885

Department of the Treasury  
Internal Revenue Service Center  
Ogden, UT 84201-0027





**Statement of Program Service Accomplishments**Check if Schedule O contains a response or note to any line in this Part III ☒**1** Briefly describe the organization's mission:

NOT-FOR-PROFIT FREE PUBLIC LIBRARY.

**2** Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O.

**3** Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O.

**4** 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.**4a** (Code: ) (Expenses \$ 201,990 including grants of \$ ) (Revenue \$ )

THE PURPOSE OF THIS NOT FOR PROFIT FREE PUBLIC LIBRARY IS TO PROVIDE FREE LOAN OF PRINT AND NON-PRINT MATERIALS TO PERSONS IN THE AREA, TO STORE PUBLIC INFORMATION, TO PROVIDE GENERAL INFORMATION AND READING PROGRAMS FROM PRESCHOOL TO ADULTS AND PROVIDE FREE USE OF COMPUTERS.

**4b** (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

N/A

**4c** (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

N/A

**4d** Other program services (Describe on Schedule O.)

(Expenses \$ including grants of \$ ) (Revenue \$ )

**4e** Total program service expenses 201,990

**Checklist of Required Schedules**

|                                                                                                                                                                                                                                                                                                                           | Yes                                 | No                                  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------|
| <b>1</b> Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>                                                                                                                                                                         | <input checked="" type="checkbox"/> |                                     |
| <b>2</b> Is the organization required to complete Schedule B, Schedule of Contributors? See instructions                                                                                                                                                                                                                  | <input checked="" type="checkbox"/> |                                     |
| <b>3</b> Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>                                                                                                                      |                                     | <input checked="" type="checkbox"/> |
| <b>4</b> <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>                                                                                                       |                                     | <input checked="" type="checkbox"/> |
| <b>5</b> Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? <i>If "Yes," complete Schedule C, Part III</i>                                                                                      |                                     | <input checked="" type="checkbox"/> |
| <b>6</b> Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>                                                    |                                     | <input checked="" type="checkbox"/> |
| <b>7</b> Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>                                                                                            |                                     | <input checked="" type="checkbox"/> |
| <b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>                                                                                                                                                         | <input checked="" type="checkbox"/> |                                     |
| <b>9</b> 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? <i>If "Yes," complete Schedule D, Part IV</i>            |                                     | <input checked="" type="checkbox"/> |
| <b>10</b> Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>                                                                                                                               |                                     | <input checked="" type="checkbox"/> |
| <b>11</b> 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.                                                                                                                                                                |                                     |                                     |
| <b>a</b> Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>                                                                                                                                                                       | <input checked="" type="checkbox"/> |                                     |
| <b>b</b> Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>                                                                                                    |                                     | <input checked="" type="checkbox"/> |
| <b>c</b> 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? <i>If "Yes," complete Schedule D, Part VIII</i>                                                                                                    |                                     | <input checked="" type="checkbox"/> |
| <b>d</b> Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>                                                                                                                     |                                     | <input checked="" type="checkbox"/> |
| <b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>                                                                                                                                                                                     | <input checked="" type="checkbox"/> |                                     |
| <b>f</b> 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)? <i>If "Yes," complete Schedule D, Part X</i>                                                            |                                     | <input checked="" type="checkbox"/> |
| <b>12a</b> Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>                                                                                                                                                        |                                     | <input checked="" type="checkbox"/> |
| <b>b</b> Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>                                                                           |                                     | <input checked="" type="checkbox"/> |
| <b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>                                                                                                                                                                                                        |                                     | <input checked="" type="checkbox"/> |
| <b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States?                                                                                                                                                                                                                    |                                     | <input checked="" type="checkbox"/> |
| <b>b</b> 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? <i>If "Yes," complete Schedule F, Parts I and IV</i> |                                     | <input checked="" type="checkbox"/> |
| <b>15</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>                                                                                                           |                                     | <input checked="" type="checkbox"/> |
| <b>16</b> 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? <i>If "Yes," complete Schedule F, Parts III and IV</i>                                                                                                     |                                     | <input checked="" type="checkbox"/> |
| <b>17</b> Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I. See instructions</i>                                                                                             |                                     | <input checked="" type="checkbox"/> |
| <b>18</b> Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>                                                                                                                           |                                     | <input checked="" type="checkbox"/> |
| <b>19</b> Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>                                                                                                                                                     |                                     | <input checked="" type="checkbox"/> |
| <b>20a</b> Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>                                                                                                                                                                                                             |                                     | <input checked="" type="checkbox"/> |
| <b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?                                                                                                                                                                                                     |                                     |                                     |
| <b>21</b> 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? <i>If "Yes," complete Schedule I, Parts I and II</i>                                                                                            |                                     | <input checked="" type="checkbox"/> |

**Checklist of Required Schedules (continued)**

|                                                                                                                                                                                                                                                                                                                                                                                            | Yes        | No |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|----|
| <b>22</b> Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III                                                                                                                                                                                        | <b>22</b>  | X  |
| <b>23</b> 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                                                                                                                            | <b>23</b>  | X  |
| <b>24a</b> 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                                                                                                  | <b>24a</b> | X  |
| <b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?                                                                                                                                                                                                                                                                                 | <b>24b</b> |    |
| <b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?                                                                                                                                                                                                                                        | <b>24c</b> |    |
| <b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?                                                                                                                                                                                                                                                                           | <b>24d</b> |    |
| <b>25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I                                                                                                                                                                      | <b>25a</b> | X  |
| <b>b</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                                                                                                               | <b>25b</b> | X  |
| <b>26</b> 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% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II                                                       | <b>26</b>  | X  |
| <b>27</b> 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 | <b>27</b>  | X  |
| <b>28</b> 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).                                                                                                                                                                              |            |    |
| <b>a</b> A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV                                                                                                                                                                                                                              | <b>28a</b> | X  |
| <b>b</b> A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV                                                                                                                                                                                                                                                                                   | <b>28b</b> | X  |
| <b>c</b> 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                                                                                                                                                                                                                                      | <b>28c</b> | X  |
| <b>29</b> Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M                                                                                                                                                                                                                                                                          | <b>29</b>  | X  |
| <b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M                                                                                                                                                                                                         | <b>30</b>  | X  |
| <b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I                                                                                                                                                                                                                                                               | <b>31</b>  | X  |
| <b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II                                                                                                                                                                                                                                             | <b>32</b>  | X  |
| <b>33</b> 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                                                                                                                                                                                             | <b>33</b>  | X  |
| <b>34</b> Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1                                                                                                                                                                                                                                         | <b>34</b>  | X  |
| <b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)?                                                                                                                                                                                                                                                                                         | <b>35a</b> | X  |
| <b>b</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                                                                                                                                                                 | <b>35b</b> |    |
| <b>36 Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2                                                                                                                                                                                                         | <b>36</b>  | X  |
| <b>37</b> 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                                                                                                                                                    | <b>37</b>  | X  |
| <b>38</b> Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? <b>Note:</b> All Form 990 filers are required to complete Schedule O.                                                                                                                                                                                             | <b>38</b>  | X  |

**Statements Regarding Other IRS Filings and Tax Compliance**Check if Schedule O contains a response or note to any line in this Part V ☐

|                                                                                                                                                                   | Yes         | No |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|----|
| <b>1a</b> Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable                                                                            | <b>1a</b> 0 |    |
| <b>b</b> Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable                                                                          | <b>1b</b> 0 |    |
| <b>c</b> Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? | <b>1c</b>   |    |

**Statements Regarding Other IRS Filings and Tax Compliance (continued)**

Yes No

|            |                                                                                                                                                                                                                                                |            |    |   |   |  |
|------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|----|---|---|--|
| <b>2a</b>  | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return                                                                  | <b>2a</b>  | 11 |   |   |  |
| <b>b</b>   | If at least one is reported on line 2a, did the organization file all required federal employment tax returns?                                                                                                                                 | <b>2b</b>  |    | X |   |  |
| <b>3a</b>  | Did the organization have unrelated business gross income of \$1,000 or more during the year?                                                                                                                                                  | <b>3a</b>  |    |   | X |  |
| <b>b</b>   | If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O                                                                                                                                    | <b>3b</b>  |    |   |   |  |
| <b>4a</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)?     | <b>4a</b>  |    |   | X |  |
| <b>b</b>   | If "Yes," enter the name of the foreign country<br>See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).                                                                         |            |    |   |   |  |
| <b>5a</b>  | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?                                                                                                                                          | <b>5a</b>  |    |   | X |  |
| <b>b</b>   | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?                                                                                                                               | <b>5b</b>  |    |   | X |  |
| <b>c</b>   | If "Yes" to line 5a or 5b, did the organization file Form 8886-T?                                                                                                                                                                              | <b>5c</b>  |    |   |   |  |
| <b>6a</b>  | 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?                                        | <b>6a</b>  |    |   | X |  |
| <b>b</b>   | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?                                                                                                  | <b>6b</b>  |    |   |   |  |
| <b>7</b>   | <b>Organizations that may receive deductible contributions under section 170(c).</b>                                                                                                                                                           |            |    |   |   |  |
| <b>a</b>   | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?                                                                                                | <b>7a</b>  |    |   |   |  |
| <b>b</b>   | If "Yes," did the organization notify the donor of the value of the goods or services provided?                                                                                                                                                | <b>7b</b>  |    |   |   |  |
| <b>c</b>   | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?                                                                                                           | <b>7c</b>  |    |   |   |  |
| <b>d</b>   | If "Yes," indicate the number of Forms 8282 filed during the year                                                                                                                                                                              | <b>7d</b>  |    |   |   |  |
| <b>e</b>   | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?                                                                                                                                | <b>7e</b>  |    |   |   |  |
| <b>f</b>   | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?                                                                                                                                   | <b>7f</b>  |    |   |   |  |
| <b>g</b>   | If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?                                                                                                               | <b>7g</b>  |    |   |   |  |
| <b>h</b>   | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?                                                                                                             | <b>7h</b>  |    |   |   |  |
| <b>8</b>   | <b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?                                                 | <b>8</b>   |    |   |   |  |
| <b>9</b>   | <b>Sponsoring organizations maintaining donor advised funds.</b>                                                                                                                                                                               |            |    |   |   |  |
| <b>a</b>   | Did the sponsoring organization make any taxable distributions under section 4966?                                                                                                                                                             | <b>9a</b>  |    |   |   |  |
| <b>b</b>   | Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?                                                                                                                                              | <b>9b</b>  |    |   |   |  |
| <b>10</b>  | <b>Section 501(c)(7) organizations.</b> Enter:                                                                                                                                                                                                 |            |    |   |   |  |
| <b>a</b>   | Initiation fees and capital contributions included on Part VIII, line 12                                                                                                                                                                       | <b>10a</b> |    |   |   |  |
| <b>b</b>   | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities                                                                                                                                                    | <b>10b</b> |    |   |   |  |
| <b>11</b>  | <b>Section 501(c)(12) organizations.</b> Enter:                                                                                                                                                                                                |            |    |   |   |  |
| <b>a</b>   | Gross income from members or shareholders                                                                                                                                                                                                      | <b>11a</b> |    |   |   |  |
| <b>b</b>   | Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)                                                                                                                  | <b>11b</b> |    |   |   |  |
| <b>12a</b> | <b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?                                                                                                                              | <b>12a</b> |    |   |   |  |
| <b>b</b>   | If "Yes," enter the amount of tax-exempt interest received or accrued during the year                                                                                                                                                          | <b>12b</b> |    |   |   |  |
| <b>13</b>  | <b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>                                                                                                                                                                        |            |    |   |   |  |
| <b>a</b>   | Is the organization licensed to issue qualified health plans in more than one state?<br><b>Note:</b> See the instructions for additional information the organization must report on Schedule O.                                               | <b>13a</b> |    |   |   |  |
| <b>b</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                                                                                      | <b>13b</b> |    |   |   |  |
| <b>c</b>   | Enter the amount of reserves on hand                                                                                                                                                                                                           | <b>13c</b> |    |   |   |  |
| <b>14a</b> | Did the organization receive any payments for indoor tanning services during the tax year?                                                                                                                                                     | <b>14a</b> |    |   | X |  |
| <b>b</b>   | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O                                                                                                                                      | <b>14b</b> |    |   |   |  |
| <b>15</b>  | Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?<br>If "Yes," see the instructions and file Form 4720, Schedule N.                   | <b>15</b>  |    |   | X |  |
| <b>16</b>  | Is the organization an educational institution subject to the section 4968 excise tax on net investment income?<br>If "Yes," complete Form 4720, Schedule O.                                                                                   | <b>16</b>  |    |   | X |  |
| <b>17</b>  | <b>Section 501(c)(21) organizations.</b> Did the trust, or 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?<br>If "Yes," complete Form 6069. | <b>17</b>  |    |   |   |  |

**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 on Schedule O. See instructions.

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

## Section A. Governing Body and Management

|                                                                                                                                                                                                                                                                                                                    | 1a        | 6 | Yes       | No |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|---|-----------|----|
| <b>1a</b> Enter the number of voting members of the governing body at the end of the tax year<br>If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. |           | 6 |           |    |
| <b>b</b> Enter the number of voting members included on line 1a, above, who are independent                                                                                                                                                                                                                        | <b>1b</b> | 6 |           |    |
| <b>2</b> 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?                                                                                                                                     |           |   | <b>2</b>  | X  |
| <b>3</b> 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?                                                                                         |           |   | <b>3</b>  | X  |
| <b>4</b> Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?                                                                                                                                                                                          |           |   | <b>4</b>  | X  |
| <b>5</b> Did the organization become aware during the year of a significant diversion of the organization's assets?                                                                                                                                                                                                |           |   | <b>5</b>  | X  |
| <b>6</b> Did the organization have members or stockholders?                                                                                                                                                                                                                                                        |           |   | <b>6</b>  | X  |
| <b>7a</b> Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?                                                                                                                                                       |           |   | <b>7a</b> | X  |
| <b>b</b> Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?                                                                                                                                                 |           |   | <b>7b</b> | X  |
| <b>8</b> Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:                                                                                                                                                                         |           |   |           |    |
| <b>a</b> The governing body?                                                                                                                                                                                                                                                                                       |           |   | <b>8a</b> | X  |
| <b>b</b> Each committee with authority to act on behalf of the governing body?                                                                                                                                                                                                                                     |           |   | <b>8b</b> | X  |
| <b>9</b> Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O.                                                                                             |           |   | <b>9</b>  | X  |

## Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

|                                                                                                                                                                                                                                                                                                       | Yes        | No |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|----|
| <b>10a</b> Did the organization have local chapters, branches, or affiliates?                                                                                                                                                                                                                         | <b>10a</b> | X  |
| <b>b</b> If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?                                                                   | <b>10b</b> |    |
| <b>11a</b> Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?                                                                                                                                                                | <b>11a</b> | X  |
| <b>b</b> Describe on Schedule O the process, if any, used by the organization to review this Form 990.                                                                                                                                                                                                |            |    |
| <b>12a</b> Did the organization have a written conflict of interest policy? If "No," go to line 13                                                                                                                                                                                                    | <b>12a</b> | X  |
| <b>b</b> Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?                                                                                                                                                          | <b>12b</b> | X  |
| <b>c</b> Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done                                                                                                                                           | <b>12c</b> | X  |
| <b>13</b> Did the organization have a written whistleblower policy?                                                                                                                                                                                                                                   | <b>13</b>  | X  |
| <b>14</b> Did the organization have a written document retention and destruction policy?                                                                                                                                                                                                              | <b>14</b>  | X  |
| <b>15</b> 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?                                                                        |            |    |
| <b>a</b> The organization's CEO, Executive Director, or top management official                                                                                                                                                                                                                       | <b>15a</b> | X  |
| <b>b</b> Other officers or key employees of the organization                                                                                                                                                                                                                                          | <b>15b</b> | X  |
| If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.                                                                                                                                                                                                                    |            |    |
| <b>16a</b> Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?                                                                                                                                      | <b>16a</b> | X  |
| <b>b</b> If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its 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? | <b>16b</b> |    |

## Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed NONE
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  
☐ Own website ☐ Another's website ☒ Upon 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, 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.

GINA COLBURN

25 KING STREET

NY 12885

518-796-0949

WARRENSBURG

**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 Compensated 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 the instructions for the order in which to list the persons above.

☒ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

| (A)<br>Name and title    | (B)<br>Average hours per week (list any hours for related organizations below dotted line) | (C)<br>Position<br>(do not check more than one box, unless person is both an officer and a director/trustee) |                       |         |              |                              |        | (D)<br>Reportable compensation from the organization (W-2/ 1099-MISC/ 1099-NEC) | (E)<br>Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC) | (F)<br>Estimated amount of other compensation from the organization and related organizations |
|--------------------------|--------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|-----------------------|---------|--------------|------------------------------|--------|---------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|
|                          |                                                                                            | Individual trustee or director                                                                               | Institutional trustee | Officer | Key employee | Highest compensated employee | Former |                                                                                 |                                                                                      |                                                                                               |
| (1) JOHN SCHROETER       | 2.00                                                                                       |                                                                                                              |                       |         |              |                              |        |                                                                                 |                                                                                      |                                                                                               |
| TRUSTEE                  | 0.00                                                                                       | X                                                                                                            |                       |         |              |                              |        | 0                                                                               | 0                                                                                    | 0                                                                                             |
| (2) SUSAN MATZNER        | 2.00                                                                                       |                                                                                                              |                       |         |              |                              |        |                                                                                 |                                                                                      |                                                                                               |
| SECRETARY                | 0.00                                                                                       | X                                                                                                            |                       | X       |              |                              |        | 0                                                                               | 0                                                                                    | 0                                                                                             |
| (3) GINA COLBURN         | 2.00                                                                                       |                                                                                                              |                       |         |              |                              |        |                                                                                 |                                                                                      |                                                                                               |
| TREASURER                | 0.00                                                                                       | X                                                                                                            |                       | X       |              |                              |        | 0                                                                               | 0                                                                                    | 0                                                                                             |
| (4) ESTHER MCTAGUE       | 2.00                                                                                       |                                                                                                              |                       |         |              |                              |        |                                                                                 |                                                                                      |                                                                                               |
| TRUSTEE                  | 0.00                                                                                       | X                                                                                                            |                       |         |              |                              |        | 0                                                                               | 0                                                                                    | 0                                                                                             |
| (5) SARAH GEBBIE-MEASECK | 2.00                                                                                       |                                                                                                              |                       |         |              |                              |        |                                                                                 |                                                                                      |                                                                                               |
| PRESIDENT                | 0.00                                                                                       | X                                                                                                            |                       | X       |              |                              |        | 0                                                                               | 0                                                                                    | 0                                                                                             |
| (6) BECKY SMITH-LAWLER   | 2.00                                                                                       |                                                                                                              |                       |         |              |                              |        |                                                                                 |                                                                                      |                                                                                               |
| FINANCIAL OFFICER        | 0.00                                                                                       | X                                                                                                            |                       | X       |              |                              |        | 0                                                                               | 0                                                                                    | 0                                                                                             |
| (7) MARY BEADNELL        | 2.00                                                                                       |                                                                                                              |                       |         |              |                              |        |                                                                                 |                                                                                      |                                                                                               |
| VICE-PRESIDENT           | 0.00                                                                                       | X                                                                                                            |                       | X       |              |                              |        | 0                                                                               | 0                                                                                    | 0                                                                                             |
| (8) SAMANTAH NEWCOMB     | 2.00                                                                                       |                                                                                                              |                       |         |              |                              |        |                                                                                 |                                                                                      |                                                                                               |
| TRUSTEE                  | 0.00                                                                                       | X                                                                                                            |                       |         |              |                              |        | 0                                                                               | 0                                                                                    | 0                                                                                             |
| (9)                      |                                                                                            |                                                                                                              |                       |         |              |                              |        |                                                                                 |                                                                                      |                                                                                               |
| (10)                     |                                                                                            |                                                                                                              |                       |         |              |                              |        |                                                                                 |                                                                                      |                                                                                               |
| (11)                     |                                                                                            |                                                                                                              |                       |         |              |                              |        |                                                                                 |                                                                                      |                                                                                               |

## Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

| (A)<br>Name and title                                                | (B)<br>Average hours per week (list any hours for related organizations below dotted line) | (C)<br>Position<br>(do not check more than one box, unless person is both an officer and a director/trustee) |                       |         |              |                              |        | (D)<br>Reportable compensation from the organization (W-2/ 1099-MISC/ 1099-NEC) | (E)<br>Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC) | (F)<br>Estimated amount of other compensation from the organization and related organizations |
|----------------------------------------------------------------------|--------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|-----------------------|---------|--------------|------------------------------|--------|---------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|
|                                                                      |                                                                                            | Individual trustee or director                                                                               | Institutional trustee | Officer | Key employee | Highest compensated employee | Former |                                                                                 |                                                                                      |                                                                                               |
| (12)                                                                 |                                                                                            |                                                                                                              |                       |         |              |                              |        |                                                                                 |                                                                                      |                                                                                               |
| (13)                                                                 |                                                                                            |                                                                                                              |                       |         |              |                              |        |                                                                                 |                                                                                      |                                                                                               |
| (14)                                                                 |                                                                                            |                                                                                                              |                       |         |              |                              |        |                                                                                 |                                                                                      |                                                                                               |
| (15)                                                                 |                                                                                            |                                                                                                              |                       |         |              |                              |        |                                                                                 |                                                                                      |                                                                                               |
| (16)                                                                 |                                                                                            |                                                                                                              |                       |         |              |                              |        |                                                                                 |                                                                                      |                                                                                               |
| (17)                                                                 |                                                                                            |                                                                                                              |                       |         |              |                              |        |                                                                                 |                                                                                      |                                                                                               |
| (18)                                                                 |                                                                                            |                                                                                                              |                       |         |              |                              |        |                                                                                 |                                                                                      |                                                                                               |
| (19)                                                                 |                                                                                            |                                                                                                              |                       |         |              |                              |        |                                                                                 |                                                                                      |                                                                                               |
| <b>1b Subtotal</b> .....                                             |                                                                                            |                                                                                                              |                       |         |              |                              |        |                                                                                 |                                                                                      |                                                                                               |
| <b>c Total from continuation sheets to Part VII, Section A</b> ..... |                                                                                            |                                                                                                              |                       |         |              |                              |        |                                                                                 |                                                                                      |                                                                                               |
| <b>d Total (add lines 1b and 1c)</b> .....                           |                                                                                            |                                                                                                              |                       |         |              |                              |        |                                                                                 |                                                                                      |                                                                                               |

**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 0

|                                                                                                                                                                                                                                             | Yes | No |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| <b>3</b> Did the organization list any <b>former</b> officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual .....                                          |     | X  |
| <b>4</b> For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual ..... |     | X  |
| <b>5</b> Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person .....                       |     | X  |

## Section B. Independent Contractors

**1** Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

| (A)<br>Name and business address | (B)<br>Description of services | (C)<br>Compensation |
|----------------------------------|--------------------------------|---------------------|
|                                  |                                |                     |
|                                  |                                |                     |
|                                  |                                |                     |
|                                  |                                |                     |
|                                  |                                |                     |

**2** Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 0

**Statement of Revenue**Check if Schedule O contains a response or note to any line in this Part VIII. ☐

|                                                                                                                                       |                                                                                            |                |               | (A)<br>Total revenue | (B)<br>Related or exempt<br>function revenue | (C)<br>Unrelated<br>business revenue | (D)<br>Revenue excluded<br>from tax under<br>sections 512-514 |
|---------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------|----------------|---------------|----------------------|----------------------------------------------|--------------------------------------|---------------------------------------------------------------|
| <b>Contributions, Gifts, Grants,<br/>and Other Similar Amounts</b>                                                                    | <b>1a</b> Federated campaigns                                                              | <b>1a</b>      |               |                      |                                              |                                      |                                                               |
|                                                                                                                                       | <b>b</b> Membership dues                                                                   | <b>1b</b>      |               |                      |                                              |                                      |                                                               |
|                                                                                                                                       | <b>c</b> Fundraising events                                                                | <b>1c</b>      |               |                      |                                              |                                      |                                                               |
|                                                                                                                                       | <b>d</b> Related organizations                                                             | <b>1d</b>      |               |                      |                                              |                                      |                                                               |
|                                                                                                                                       | <b>e</b> Government grants (contributions)                                                 | <b>1e</b>      | 274,607       |                      |                                              |                                      |                                                               |
|                                                                                                                                       | <b>f</b> All other contributions, gifts, grants,<br>and similar amounts not included above | <b>1f</b>      | 14,006        |                      |                                              |                                      |                                                               |
|                                                                                                                                       | <b>g</b> Noncash contributions included in<br>lines 1a-1f                                  | <b>1g</b>      | \$ 1,673      |                      |                                              |                                      |                                                               |
|                                                                                                                                       | <b>h</b> <b>Total.</b> Add lines 1a-1f                                                     |                |               |                      |                                              |                                      |                                                               |
| <b>Program Service<br/>Revenue</b>                                                                                                    | <b>2a</b> FEES/FINES/LIBRARY SERVICES                                                      |                | Business Code |                      |                                              |                                      |                                                               |
|                                                                                                                                       |                                                                                            |                | 519100        | 289                  | 289                                          |                                      |                                                               |
|                                                                                                                                       | <b>b</b>                                                                                   |                |               |                      |                                              |                                      |                                                               |
|                                                                                                                                       | <b>c</b>                                                                                   |                |               |                      |                                              |                                      |                                                               |
|                                                                                                                                       | <b>d</b>                                                                                   |                |               |                      |                                              |                                      |                                                               |
|                                                                                                                                       | <b>e</b>                                                                                   |                |               |                      |                                              |                                      |                                                               |
|                                                                                                                                       | <b>f</b> All other program service revenue                                                 |                |               |                      |                                              |                                      |                                                               |
| <b>g</b> <b>Total.</b> Add lines 2a-2f                                                                                                |                                                                                            |                |               | 289                  |                                              |                                      |                                                               |
| <b>Other Revenue</b>                                                                                                                  | <b>3</b> Investment income (including dividends, interest, and<br>other similar amounts)   |                |               | 4,864                |                                              |                                      | 4,864                                                         |
|                                                                                                                                       | <b>4</b> Income from investment of tax-exempt bond proceeds                                |                |               |                      |                                              |                                      |                                                               |
|                                                                                                                                       | <b>5</b> Royalties                                                                         |                |               |                      |                                              |                                      |                                                               |
|                                                                                                                                       | <b>6a</b> Gross rents                                                                      | (i) Real       | (ii) Personal |                      |                                              |                                      |                                                               |
|                                                                                                                                       |                                                                                            | <b>6a</b>      |               |                      |                                              |                                      |                                                               |
|                                                                                                                                       |                                                                                            | <b>6b</b>      |               |                      |                                              |                                      |                                                               |
|                                                                                                                                       | <b>b</b> Less: rental expenses                                                             | <b>6b</b>      |               |                      |                                              |                                      |                                                               |
|                                                                                                                                       | <b>c</b> Rental inc. or (loss)                                                             | <b>6c</b>      |               |                      |                                              |                                      |                                                               |
|                                                                                                                                       | <b>d</b> Net rental income or (loss)                                                       |                |               |                      |                                              |                                      |                                                               |
|                                                                                                                                       | <b>7a</b> Gross amount from<br>sales of assets<br>other than inventory                     | (i) Securities | (ii) Other    |                      |                                              |                                      |                                                               |
|                                                                                                                                       |                                                                                            | <b>7a</b>      |               |                      |                                              |                                      |                                                               |
|                                                                                                                                       |                                                                                            | <b>7b</b>      |               |                      |                                              |                                      |                                                               |
|                                                                                                                                       | <b>b</b> Less: cost or other<br>basis and sales exps.                                      | <b>7b</b>      |               |                      |                                              |                                      |                                                               |
|                                                                                                                                       | <b>c</b> Gain or (loss)                                                                    | <b>7c</b>      |               |                      |                                              |                                      |                                                               |
|                                                                                                                                       | <b>d</b> Net gain or (loss)                                                                |                |               |                      |                                              |                                      |                                                               |
| <b>8a</b> Gross income from fundraising events<br>(not including \$<br>of contributions reported on line<br>1c). See Part IV, line 18 | <b>8a</b>                                                                                  |                |               |                      |                                              |                                      |                                                               |
|                                                                                                                                       | <b>b</b> Less: direct expenses                                                             | <b>8b</b>      |               |                      |                                              |                                      |                                                               |
|                                                                                                                                       | <b>c</b> Net income or (loss) from fundraising events                                      |                |               |                      |                                              |                                      |                                                               |
| <b>9a</b> Gross income from gaming<br>activities. See Part IV, line 19                                                                | <b>9a</b>                                                                                  |                |               |                      |                                              |                                      |                                                               |
|                                                                                                                                       | <b>b</b> Less: direct expenses                                                             | <b>9b</b>      |               |                      |                                              |                                      |                                                               |
|                                                                                                                                       | <b>c</b> Net income or (loss) from gaming activities                                       |                |               |                      |                                              |                                      |                                                               |
| <b>10a</b> Gross sales of inventory, less<br>returns and allowances                                                                   | <b>10a</b>                                                                                 |                |               |                      |                                              |                                      |                                                               |
|                                                                                                                                       | <b>b</b> Less: cost of goods sold                                                          | <b>10b</b>     |               |                      |                                              |                                      |                                                               |
|                                                                                                                                       | <b>c</b> Net income or (loss) from sales of inventory                                      |                |               |                      |                                              |                                      |                                                               |
| <b>Miscellaneous<br/>Revenue</b>                                                                                                      | <b>11a</b>                                                                                 |                | Business Code |                      |                                              |                                      |                                                               |
|                                                                                                                                       | <b>b</b>                                                                                   |                |               |                      |                                              |                                      |                                                               |
|                                                                                                                                       | <b>c</b>                                                                                   |                |               |                      |                                              |                                      |                                                               |
|                                                                                                                                       | <b>d</b> All other revenue                                                                 |                |               |                      |                                              |                                      |                                                               |
|                                                                                                                                       | <b>e</b> <b>Total.</b> Add lines 11a-11d                                                   |                |               |                      |                                              |                                      |                                                               |
| <b>12</b> <b>Total revenue.</b> See instructions                                                                                      |                                                                                            |                |               | 293,766              | 289                                          | 0                                    | 4,864                                                         |

**Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX ☐**Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.**

|                                                                                                                                                                                                                                                  | (A)<br>Total expenses | (B)<br>Program service<br>expenses | (C)<br>Management and<br>general expenses | (D)<br>Fundraising<br>expenses |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|------------------------------------|-------------------------------------------|--------------------------------|
| <b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21                                                                                                                                    |                       |                                    |                                           |                                |
| <b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22                                                                                                                                                               |                       |                                    |                                           |                                |
| <b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16                                                                                                        |                       |                                    |                                           |                                |
| <b>4</b> Benefits paid to or for members                                                                                                                                                                                                         |                       |                                    |                                           |                                |
| <b>5</b> Compensation of current officers, directors, trustees, and key employees                                                                                                                                                                |                       |                                    |                                           |                                |
| <b>6</b> Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)                                                                                            |                       |                                    |                                           |                                |
| <b>7</b> Other salaries and wages                                                                                                                                                                                                                | 151,398               | 88,682                             | 62,716                                    |                                |
| <b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)                                                                                                                                      |                       |                                    |                                           |                                |
| <b>9</b> Other employee benefits                                                                                                                                                                                                                 |                       |                                    |                                           |                                |
| <b>10</b> Payroll taxes                                                                                                                                                                                                                          | 13,198                | 7,731                              | 5,467                                     |                                |
| <b>11</b> Fees for services (nonemployees):                                                                                                                                                                                                      |                       |                                    |                                           |                                |
| <b>a</b> Management                                                                                                                                                                                                                              |                       |                                    |                                           |                                |
| <b>b</b> Legal                                                                                                                                                                                                                                   |                       |                                    |                                           |                                |
| <b>c</b> Accounting                                                                                                                                                                                                                              | 6,100                 |                                    | 6,100                                     |                                |
| <b>d</b> Lobbying                                                                                                                                                                                                                                |                       |                                    |                                           |                                |
| <b>e</b> Professional fundraising services. See Part IV, line 17                                                                                                                                                                                 |                       |                                    |                                           |                                |
| <b>f</b> Investment management fees                                                                                                                                                                                                              |                       |                                    |                                           |                                |
| <b>g</b> Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule O.)                                                                                                                           |                       |                                    |                                           |                                |
| <b>12</b> Advertising and promotion                                                                                                                                                                                                              |                       |                                    |                                           |                                |
| <b>13</b> Office expenses                                                                                                                                                                                                                        | 4,510                 | 4,059                              | 451                                       |                                |
| <b>14</b> Information technology                                                                                                                                                                                                                 | 1,585                 | 1,585                              |                                           |                                |
| <b>15</b> Royalties                                                                                                                                                                                                                              |                       |                                    |                                           |                                |
| <b>16</b> Occupancy                                                                                                                                                                                                                              | 22,379                | 20,141                             | 2,238                                     |                                |
| <b>17</b> Travel                                                                                                                                                                                                                                 |                       |                                    |                                           |                                |
| <b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials                                                                                                                                         |                       |                                    |                                           |                                |
| <b>19</b> Conferences, conventions, and meetings                                                                                                                                                                                                 |                       |                                    |                                           |                                |
| <b>20</b> Interest                                                                                                                                                                                                                               |                       |                                    |                                           |                                |
| <b>21</b> Payments to affiliates                                                                                                                                                                                                                 |                       |                                    |                                           |                                |
| <b>22</b> Depreciation, depletion, and amortization                                                                                                                                                                                              | 57,183                | 57,183                             |                                           |                                |
| <b>23</b> Insurance                                                                                                                                                                                                                              | 9,011                 |                                    | 9,011                                     |                                |
| <b>24</b> Other expenses. Itemize expenses not covered 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.)                                    |                       |                                    |                                           |                                |
| <b>a</b> LIBRARY OPERATING EXPENSE                                                                                                                                                                                                               | 13,197                | 13,197                             |                                           |                                |
| <b>b</b> AUTOMATION FEES                                                                                                                                                                                                                         | 5,308                 | 5,308                              |                                           |                                |
| <b>c</b> MISC EXPENSE                                                                                                                                                                                                                            | 4,321                 | 4,104                              | 217                                       |                                |
| <b>d</b>                                                                                                                                                                                                                                         |                       |                                    |                                           |                                |
| <b>e</b> All other expenses                                                                                                                                                                                                                      |                       |                                    |                                           |                                |
| <b>25</b> Total functional expenses. Add lines 1 through 24e                                                                                                                                                                                     | 288,190               | 201,990                            | 86,200                                    | 0                              |
| <b>26</b> 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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720) |                       |                                    |                                           |                                |

**Balance Sheet**Check if Schedule O contains a response or note to any line in this Part X ☐

|                                                                                                                                    |                                                                                                                                                                                                                   | (A)<br>Beginning of year                                                                                                                    |           | (B)<br>End of year |
|------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------|-----------|--------------------|
| <b>Assets</b>                                                                                                                      | 1 Cash—non-interest-bearing                                                                                                                                                                                       | 382,400                                                                                                                                     | 1         | 158,685            |
|                                                                                                                                    | 2 Savings and temporary cash investments                                                                                                                                                                          | 25,000                                                                                                                                      | 2         | 25,352             |
|                                                                                                                                    | 3 Pledges and grants receivable, net                                                                                                                                                                              |                                                                                                                                             | 3         |                    |
|                                                                                                                                    | 4 Accounts receivable, net                                                                                                                                                                                        | 45                                                                                                                                          | 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 |                                                                                                                                             | 5         |                    |
|                                                                                                                                    | 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)                                                               |                                                                                                                                             | 6         |                    |
|                                                                                                                                    | 7 Notes and loans receivable, net                                                                                                                                                                                 |                                                                                                                                             | 7         |                    |
|                                                                                                                                    | 8 Inventories for sale or use                                                                                                                                                                                     |                                                                                                                                             | 8         |                    |
|                                                                                                                                    | 9 Prepaid expenses and deferred charges                                                                                                                                                                           | 12,304                                                                                                                                      | 9         | 7,627              |
|                                                                                                                                    | 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D                                                                                                                           | 10a 2,203,951                                                                                                                               |           |                    |
|                                                                                                                                    | b Less: accumulated depreciation                                                                                                                                                                                  | 10b 1,043,159                                                                                                                               | 10c       | 1,160,792          |
|                                                                                                                                    | 11 Investments—publicly traded securities                                                                                                                                                                         | 47,155                                                                                                                                      | 11        | 48,504             |
|                                                                                                                                    | 12 Investments—other securities. See Part IV, line 11                                                                                                                                                             |                                                                                                                                             | 12        |                    |
|                                                                                                                                    | 13 Investments—program-related. See Part IV, line 11                                                                                                                                                              |                                                                                                                                             | 13        |                    |
|                                                                                                                                    | 14 Intangible assets                                                                                                                                                                                              |                                                                                                                                             | 14        |                    |
|                                                                                                                                    | 15 Other assets. See Part IV, line 11                                                                                                                                                                             | 22,135                                                                                                                                      | 15        |                    |
| 16 <b>Total assets.</b> Add lines 1 through 15 (must equal line 33)                                                                | 1,586,806                                                                                                                                                                                                         | 16                                                                                                                                          | 1,400,960 |                    |
| <b>Liabilities</b>                                                                                                                 | 17 Accounts payable and accrued expenses                                                                                                                                                                          | 369                                                                                                                                         | 17        | 1,084              |
|                                                                                                                                    | 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        |                    |
|                                                                                                                                    | 22 Loans and other payables to 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     |                                                                                                                                             | 22        |                    |
|                                                                                                                                    | 23 Secured mortgages and notes payable to unrelated third parties                                                                                                                                                 |                                                                                                                                             | 23        |                    |
|                                                                                                                                    | 24 Unsecured notes and loans payable to unrelated third parties                                                                                                                                                   |                                                                                                                                             | 24        |                    |
|                                                                                                                                    | 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D                                          | 205,172                                                                                                                                     | 25        | 13,036             |
|                                                                                                                                    | 26 <b>Total liabilities.</b> Add lines 17 through 25                                                                                                                                                              | 205,541                                                                                                                                     | 26        | 14,120             |
|                                                                                                                                    | <b>Net Assets or Fund Balances</b>                                                                                                                                                                                | <b>Organizations that follow FASB ASC 958, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27, 28, 32, and 33.</b> |           |                    |
| 27 Net assets without donor restrictions                                                                                           |                                                                                                                                                                                                                   | 1,334,110                                                                                                                                   | 27        | 1,338,336          |
| 28 Net assets with donor restrictions                                                                                              |                                                                                                                                                                                                                   | 47,155                                                                                                                                      | 28        | 48,504             |
| <b>Organizations that do not follow FASB ASC 958, check here</b> <input type="checkbox"/> <b>and complete lines 29 through 33.</b> |                                                                                                                                                                                                                   |                                                                                                                                             |           |                    |
| 29 Capital stock or trust principal, or current funds                                                                              |                                                                                                                                                                                                                   |                                                                                                                                             | 29        |                    |
| 30 Paid-in or capital surplus, or land, building, or equipment fund                                                                |                                                                                                                                                                                                                   |                                                                                                                                             | 30        |                    |
| 31 Retained earnings, endowment, accumulated income, or other funds                                                                |                                                                                                                                                                                                                   |                                                                                                                                             | 31        |                    |
| 32 <b>Total net assets or fund balances</b>                                                                                        |                                                                                                                                                                                                                   | 1,381,265                                                                                                                                   | 32        | 1,386,840          |
| 33 <b>Total liabilities and net assets/fund balances</b>                                                                           |                                                                                                                                                                                                                   | 1,586,806                                                                                                                                   | 33        | 1,400,960          |

**Reconciliation of Net Assets**Check if Schedule O contains a response or note to any line in this Part XI ☒

|           |                                                                                                                |           |           |
|-----------|----------------------------------------------------------------------------------------------------------------|-----------|-----------|
| <b>1</b>  | Total revenue (must equal Part VIII, column (A), line 12)                                                      | <b>1</b>  | 293,766   |
| <b>2</b>  | Total expenses (must equal Part IX, column (A), line 25)                                                       | <b>2</b>  | 288,190   |
| <b>3</b>  | Revenue less expenses. Subtract line 2 from line 1                                                             | <b>3</b>  | 5,576     |
| <b>4</b>  | Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))                      | <b>4</b>  | 1,381,265 |
| <b>5</b>  | Net unrealized gains (losses) on investments                                                                   | <b>5</b>  |           |
| <b>6</b>  | Donated services and use of facilities                                                                         | <b>6</b>  |           |
| <b>7</b>  | Investment expenses                                                                                            | <b>7</b>  |           |
| <b>8</b>  | Prior period adjustments                                                                                       | <b>8</b>  |           |
| <b>9</b>  | Other changes in net assets or fund balances (explain on Schedule O)                                           | <b>9</b>  | -1        |
| <b>10</b> | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) | <b>10</b> | 1,386,840 |

**Financial Statements and Reporting**Check if Schedule O contains a response or note to any line in this Part XII ☐

|                                                                                                                                                                                                                                                                                                                                                                                                                                     | Yes | No |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| <b>1</b> Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____<br>If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.                                                                                                                                        |     |    |
| <b>2a</b> Were the organization's financial statements compiled or reviewed by an independent accountant?<br>If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both.<br><input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis |     | X  |
| <b>b</b> Were the organization's financial statements audited by an independent accountant?<br>If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both.<br><input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis                            |     | X  |
| <b>c</b> If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?<br>If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.                                                                      |     |    |
| <b>3a</b> As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?                                                                                                                                                                                                                                                           |     |    |
| <b>b</b> If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits.                                                                                                                                                                                                      |     |    |

SCHEDULE A  
(Form 990)

Department of the Treasury  
Internal Revenue Service

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.

Attach to Form 990 or Form 990-EZ.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

2025

Name of the organization

RICHARDS LIBRARY

Employer identification number

14-1364588

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 12, 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 (Form 990).)
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 ☐ 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)**.
- 7 ☒ 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.)
- 9 ☐ An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: .....
- 10 ☐ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 11 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 12 ☐ 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 on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
- 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.**
- c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
- d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization must generally satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
- e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
- f Enter the number of supported organizations .....
- g Provide the following information about the supported organization(s).

| (i) Name of supported organization | (ii) EIN | (iii) Type of organization (described on lines 1–10 above (see instructions)) | (iv) Is the organization listed in your governing document? |    | (v) Amount of monetary support (see instructions) | (vi) Amount of other support (see instructions) |
|------------------------------------|----------|-------------------------------------------------------------------------------|-------------------------------------------------------------|----|---------------------------------------------------|-------------------------------------------------|
|                                    |          |                                                                               | Yes                                                         | No |                                                   |                                                 |
| (A)                                |          |                                                                               |                                                             |    |                                                   |                                                 |
| (B)                                |          |                                                                               |                                                             |    |                                                   |                                                 |
| (C)                                |          |                                                                               |                                                             |    |                                                   |                                                 |
| (D)                                |          |                                                                               |                                                             |    |                                                   |                                                 |
| (E)                                |          |                                                                               |                                                             |    |                                                   |                                                 |
| Total                              |          |                                                                               |                                                             |    |                                                   |                                                 |

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990) 2025

**Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

**Section A. Public Support**

| Calendar year (or fiscal year beginning in)                                                                                                                                                                  | (a) 2021 | (b) 2022 | (c) 2023 | (d) 2024 | (e) 2025 | (f) Total |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|----------|----------|----------|----------|-----------|
| <b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")                                                                                                  | 42,021   | 13,693   | 37,442   | 18,172   | 14,144   | 125,472   |
| <b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf                                                                                                     | 214,030  | 214,030  | 214,030  | 246,624  | 271,509  | 1,160,223 |
| <b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge                                                                                             |          |          |          |          |          |           |
| <b>4 Total.</b> Add lines 1 through 3                                                                                                                                                                        | 256,051  | 227,723  | 251,472  | 264,796  | 285,653  | 1,285,695 |
| <b>5</b> 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) |          |          |          |          |          |           |
| <b>6 Public support.</b> Subtract line 5 from line 4                                                                                                                                                         |          |          |          |          |          | 1,285,695 |

**Section B. Total Support**

| Calendar year (or fiscal year beginning in)                                                                                              | (a) 2021 | (b) 2022 | (c) 2023 | (d) 2024 | (e) 2025 | (f) Total |
|------------------------------------------------------------------------------------------------------------------------------------------|----------|----------|----------|----------|----------|-----------|
| <b>7</b> Amounts from line 4                                                                                                             | 256,051  | 227,723  | 251,472  | 264,796  | 285,653  | 1,285,695 |
| <b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources | 2,636    | 2,831    | 1,571    | 2,074    | 4,864    | 13,976    |
| <b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on                              |          |          |          |          |          |           |
| <b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)                                |          | 3,283    | 3,954    | 2,531    | 3,249    | 13,017    |
| <b>11 Total support.</b> Add lines 7 through 10                                                                                          |          |          |          |          |          | 1,312,688 |
| <b>12</b> Gross receipts from related activities, etc. (see instructions)                                                                |          |          |          |          | 12       | 10,663    |

**13 First 5 years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ☐**Section C. Computation of Public Support Percentage**

|                                                                                                   |           |         |
|---------------------------------------------------------------------------------------------------|-----------|---------|
| <b>14</b> Public support percentage for 2025 (line 6, column (f), divided by line 11, column (f)) | <b>14</b> | 97.94 % |
| <b>15</b> Public support percentage from 2024 Schedule A, Part II, line 14                        | <b>15</b> | 98.24 % |

**16a 33 1/3% support test — 2025.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here**. The organization qualifies as a publicly supported organization ☒**b 33 1/3% support test — 2024.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here**. The organization qualifies as a publicly supported organization ☐**17a 10%-facts-and-circumstances test — 2025.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here**. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization ☐**b 10%-facts-and-circumstances test — 2024.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here**. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization ☐**18 Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ☐

**Support Schedule for Organizations Described in Section 509(a)(2)**

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II.

If the organization fails to qualify under the tests listed below, please complete Part II.)

**Section A. Public Support**

| Calendar year (or fiscal year beginning in)                                                                                                                                       | (a) 2021 | (b) 2022 | (c) 2023 | (d) 2024 | (e) 2025 | (f) Total |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|----------|----------|----------|----------|-----------|
| <b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")                                                                       |          |          |          |          |          |           |
| <b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose |          |          |          |          |          |           |
| <b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513                                                                             |          |          |          |          |          |           |
| <b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf                                                                          |          |          |          |          |          |           |
| <b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge                                                                  |          |          |          |          |          |           |
| <b>6 Total.</b> Add lines 1 through 5                                                                                                                                             |          |          |          |          |          |           |
| <b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons                                                                                                |          |          |          |          |          |           |
| <b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year           |          |          |          |          |          |           |
| <b>c</b> Add lines 7a and 7b                                                                                                                                                      |          |          |          |          |          |           |
| <b>8 Public support.</b> (Subtract line 7c from line 6.)                                                                                                                          |          |          |          |          |          |           |

**Section B. Total Support**

| Calendar year (or fiscal year beginning in)                                                                                                                                                 | (a) 2021 | (b) 2022 | (c) 2023 | (d) 2024 | (e) 2025 | (f) Total                |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|----------|----------|----------|----------|--------------------------|
| <b>9</b> Amounts from line 6                                                                                                                                                                |          |          |          |          |          |                          |
| <b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources                                                  |          |          |          |          |          |                          |
| <b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975                                                                            |          |          |          |          |          |                          |
| <b>c</b> Add lines 10a and 10b                                                                                                                                                              |          |          |          |          |          |                          |
| <b>11</b> Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on                                                       |          |          |          |          |          |                          |
| <b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)                                                                                   |          |          |          |          |          |                          |
| <b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)                                                                                                                                    |          |          |          |          |          |                          |
| <b>14 First 5 years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> |          |          |          |          |          | <input type="checkbox"/> |

**Section C. Computation of Public Support Percentage**

|                                                                                                   |           |   |
|---------------------------------------------------------------------------------------------------|-----------|---|
| <b>15</b> Public support percentage for 2025 (line 8, column (f), divided by line 13, column (f)) | <b>15</b> | % |
| <b>16</b> Public support percentage from 2024 Schedule A, Part III, line 15                       | <b>16</b> | % |

**Section D. Computation of Investment Income Percentage**

|                                                                                                                                                                                                                                                                                      |                          |   |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|---|
| <b>17</b> Investment income percentage for 2025 (line 10c, column (f), divided by line 13, column (f))                                                                                                                                                                               | <b>17</b>                | % |
| <b>18</b> Investment income percentage from 2024 Schedule A, Part III, line 17                                                                                                                                                                                                       | <b>18</b>                | % |
| <b>19a 33 1/3% support tests — 2025.</b> If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization         | <input type="checkbox"/> |   |
| <b>b 33 1/3% support tests — 2024.</b> If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization | <input type="checkbox"/> |   |
| <b>20 Private foundation.</b> If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions                                                                                                                                                   | <input type="checkbox"/> |   |

**Supporting Organizations**

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

**Section A. All Supporting Organizations**

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | Yes | No |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| <b>1</b> Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.                                                                                                                                                                                                                     |     |    |
| <b>2</b> 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 <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).                                                                                                                                                                                                                                                  |     |    |
| <b>3a</b> Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.                                                                                                                                                                                                                                                                                                                                                                                               |     |    |
| <b>b</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 <b>Part VI</b> when and how the organization made the determination.                                                                                                                                                                                                                                                                |     |    |
| <b>c</b> Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.                                                                                                                                                                                                                                                                                                         |     |    |
| <b>4a</b> Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.                                                                                                                                                                                                                                                                                                                                            |     |    |
| <b>b</b> Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.                                                                                                                                                                                                             |     |    |
| <b>c</b> 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 <b>Part VI</b> 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.                                                                                                                                                                                |     |    |
| <b>5a</b> Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in <b>Part VI</b> , 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>b</b> <b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?                                                                                                                                                                                                                                                                                                                                                                       |     |    |
| <b>c</b> <b>Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?                                                                                                                                                                                                                                                                                                                                                                                                                              |     |    |
| <b>6</b> Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in <b>Part VI</b> .                                                              |     |    |
| <b>7</b> Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).                                                                                                                                                                                                          |     |    |
| <b>8</b> Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).                                                                                                                                                                                                                                                                                                                                                                    |     |    |
| <b>9a</b> 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 <b>Part VI</b> .                                                                                                                                                                                                                                         |     |    |
| <b>b</b> Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in <b>Part VI</b> .                                                                                                                                                                                                                                                                                                                              |     |    |
| <b>c</b> Did a disqualified person (as defined on line 9a) 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 <b>Part VI</b> .                                                                                                                                                                                                                                                                                                   |     |    |
| <b>10a</b> Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.                                                                                                                                                                                                                                                          |     |    |
| <b>b</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.)                                                                                                                                                                                                                                                                                                                                                               |     |    |

**Supporting Organizations (continued)**

|                                                                                                                                                                                    | Yes        | No |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|----|
| <b>11</b> Has the organization accepted a gift or contribution from any of the following persons?                                                                                  |            |    |
| <b>a</b> A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization? | <b>11a</b> |    |
| <b>b</b> A family member of a person described on line 11a above?                                                                                                                  | <b>11b</b> |    |
| <b>c</b> A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in <b>Part VI</b> .                             | <b>11c</b> |    |

**Section B. Type I Supporting Organizations**

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Yes      | No |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|----|
| <b>1</b> Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> 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 officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. | <b>1</b> |    |
| <b>2</b> 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 <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.                                                                                                                                                                                                                                                                                                                                                                         | <b>2</b> |    |

**Section C. Type II Supporting Organizations**

|                                                                                                                                                                                                                                                                                                                                                                                      | Yes      | No |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|----|
| <b>1</b> Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s). | <b>1</b> |    |

**Section D. All Type III Supporting Organizations**

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Yes      | No |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|----|
| <b>1</b> Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? | <b>1</b> |    |
| <b>2</b> 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 <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).                                                                                                                      | <b>2</b> |    |
| <b>3</b> By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice 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 <b>Part VI</b> the role the organization's supported organizations played in this regard.                                                                                | <b>3</b> |    |

**Section E. Type III Functionally Integrated Supporting Organizations**

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |           |     |    |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-----|----|
| <b>1</b> Check the box next to the method that the organization used to satisfy the Integral Part Test during the year ( <b>see instructions</b> ).                                                                                                                                                                                                                                                                                                                                                  |           |     |    |
| <b>a</b> <input type="checkbox"/> The organization satisfied the Activities Test. Complete <b>line 2</b> below.                                                                                                                                                                                                                                                                                                                                                                                      |           |     |    |
| <b>b</b> <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete <b>line 3</b> below.                                                                                                                                                                                                                                                                                                                                                               |           |     |    |
| <b>c</b> <input type="checkbox"/> The organization supported a governmental supported organization. Describe in <b>Part VI</b> how you supported a governmental supported organization ( <b>see instructions</b> ).                                                                                                                                                                                                                                                                                  |           |     |    |
| <b>2</b> Activities Test. <b>Answer lines 2a and 2b below.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                       |           | Yes | No |
| <b>a</b> Did substantially all of the organization's activities during the tax year directly further the exempt purposes of its supported organization(s)? If "Yes," then in <b>Part VI</b> identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to each of its supported organizations, and how the organization determined that these activities constituted substantially all of its activities. | <b>2a</b> |     |    |
| <b>b</b> Did the activities described on line 2a, above, 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 <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.                                                                               | <b>2b</b> |     |    |
| <b>3</b> Parent of Supported Organizations. <b>Answer lines 3a, 3b, and 3c below.</b>                                                                                                                                                                                                                                                                                                                                                                                                                |           |     |    |
| <b>a</b> Are the organization and its supported organization(s) part of an integrated system (for example, a hospital system)? If "Yes," provide details in <b>Part VI</b> .                                                                                                                                                                                                                                                                                                                         | <b>3a</b> |     |    |
| <b>b</b> Did the organization direct the policies, programs, and activities of each of its supported organizations? If "Yes," describe in <b>Part VI</b> the role played by the organization in this regard.                                                                                                                                                                                                                                                                                         | <b>3b</b> |     |    |
| <b>c</b> Did the organization have the power to regularly appoint or elect (and remove) a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No," provide details in <b>Part VI</b> .                                                                                                                                                                                                                                                             | <b>3c</b> |     |    |

**Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations**

- 1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (*explain in Part VI*). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

| Section A – Adjusted Net Income |                                                                                                                                                                                                          | (A) Prior Year | (B) Current Year<br>(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                               | <b>Adjusted Net Income</b> (subtract lines 5, 6, and 7 from line 4)                                                                                                                                      | 8              |                                |

| Section B – Minimum Asset Amount |                                                                                                                                 | (A) Prior Year | (B) Current Year<br>(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                                | <b>Total</b> (add lines 1a, 1b, and 1c)                                                                                         | 1d             |                                |
| e                                | <b>Discount</b> claimed for blockage or other factors ( <i>explain in detail in Part VI</i> ):                                  |                |                                |
| 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 0.015 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 0.035.                                                                                                       | 6              |                                |
| 7                                | Recoveries of prior-year distributions                                                                                          | 7              |                                |
| 8                                | <b>Minimum Asset Amount</b> (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 0.85 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 |              |
| 5                                | Income tax imposed in prior year                                                                                              | 5 |              |
| 6                                | <b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions). | 6 |              |

- 7 ☐ Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

**Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)**

| <b>Section D – Distributions</b> |                                                                                                                                                     | <b>Current Year</b> |
|----------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|---------------------|
| <b>1</b>                         | Amounts paid to supported organizations to accomplish exempt purposes                                                                               | <b>1</b>            |
| <b>2</b>                         | Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity               | <b>2</b>            |
| <b>3</b>                         | Administrative expenses paid to accomplish exempt purposes of supported organizations                                                               | <b>3</b>            |
| <b>4</b>                         | Amounts paid to acquire exempt-use assets                                                                                                           | <b>4</b>            |
| <b>5</b>                         | Qualified set-aside amounts (prior IRS approval required— <i>provide details in Part VI</i> )                                                       | <b>5</b>            |
| <b>6</b>                         | <b>Total annual distributions.</b> Add lines 1 through 5.                                                                                           | <b>6</b>            |
| <b>7</b>                         | Distributions to attentive supported organizations to which the organization is responsive ( <i>provide details in Part VI</i> ). See instructions. | <b>7</b>            |
| <b>8</b>                         | Distributable amount for 2025 from Section C, line 6                                                                                                | <b>8</b>            |
| <b>9</b>                         | Line 7 amount divided by line 8 amount                                                                                                              | <b>9</b>            |

| <b>Section E – Distribution Allocations</b> (see instructions)                                                                                                                           | <b>(i)<br/>Excess Distributions</b> | <b>(ii)<br/>Underdistributions<br/>Pre-2025</b> | <b>(iii)<br/>Distributable<br/>Amount for 2025</b> |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------------------|----------------------------------------------------|
| <b>1</b> Distributable amount for 2025 from Section C, line 6                                                                                                                            |                                     |                                                 |                                                    |
| <b>2</b> Underdistributions, if any, for years prior to 2025 (reasonable cause required— <i>explain in Part VI</i> ). See instructions.                                                  |                                     |                                                 |                                                    |
| <b>3</b> Excess distributions carryover, if any, to 2025                                                                                                                                 |                                     |                                                 |                                                    |
| <b>a</b> From 2020 .....                                                                                                                                                                 |                                     |                                                 |                                                    |
| <b>b</b> From 2021 .....                                                                                                                                                                 |                                     |                                                 |                                                    |
| <b>c</b> From 2022 .....                                                                                                                                                                 |                                     |                                                 |                                                    |
| <b>d</b> From 2023 .....                                                                                                                                                                 |                                     |                                                 |                                                    |
| <b>e</b> From 2024 .....                                                                                                                                                                 |                                     |                                                 |                                                    |
| <b>f</b> <b>Total</b> of lines 3a through 3e                                                                                                                                             |                                     |                                                 |                                                    |
| <b>g</b> Applied to underdistributions of prior years                                                                                                                                    |                                     |                                                 |                                                    |
| <b>h</b> Applied to 2025 distributable amount                                                                                                                                            |                                     |                                                 |                                                    |
| <b>i</b> Carryover from 2020 not applied (see instructions)                                                                                                                              |                                     |                                                 |                                                    |
| <b>j</b> Remainder. Subtract lines 3g, 3h, and 3i from line 3f.                                                                                                                          |                                     |                                                 |                                                    |
| <b>4</b> Distributions for 2025 from<br>Section D, line 6: \$                                                                                                                            |                                     |                                                 |                                                    |
| <b>a</b> Applied to underdistributions of prior years                                                                                                                                    |                                     |                                                 |                                                    |
| <b>b</b> Applied to 2025 distributable amount                                                                                                                                            |                                     |                                                 |                                                    |
| <b>c</b> Remainder. Subtract lines 4a and 4b from line 4.                                                                                                                                |                                     |                                                 |                                                    |
| <b>5</b> Remaining underdistributions for years prior to 2025, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions. |                                     |                                                 |                                                    |
| <b>6</b> Remaining underdistributions for 2025. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.                        |                                     |                                                 |                                                    |
| <b>7</b> <b>Excess distributions carryover to 2026.</b> Add lines 3j and 4c.                                                                                                             |                                     |                                                 |                                                    |
| <b>8</b> Breakdown of line 7:                                                                                                                                                            |                                     |                                                 |                                                    |
| <b>a</b> Excess from 2021 .....                                                                                                                                                          |                                     |                                                 |                                                    |
| <b>b</b> Excess from 2022 .....                                                                                                                                                          |                                     |                                                 |                                                    |
| <b>c</b> Excess from 2023 .....                                                                                                                                                          |                                     |                                                 |                                                    |
| <b>d</b> Excess from 2024 .....                                                                                                                                                          |                                     |                                                 |                                                    |
| <b>e</b> Excess from 2025 .....                                                                                                                                                          |                                     |                                                 |                                                    |

**Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, 3b, and 3c; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5 and 7; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

PART II, LINE 10 - OTHER INCOME DETAIL

\$ 13,017

SUPPLEMENTAL INFORMATION

PART 11, LINE 10: GAINS FROM SALE OF INVESTMENT ASSETS, MISC. INCOME:  
\$3,954

Name of the organization: RICHARDS LIBRARY
Employer identification number: 14-1364588

Organization type (check one):

Filers of: Section:
Form 990 or 990-EZ [X] 501(c)( 3 ) (enter number) organization
[ ] 4947(a)(1) nonexempt charitable trust not treated as a private foundation
[ ] 527 political organization
Form 990-PF [ ] 501(c)(3) exempt private foundation
[ ] 4947(a)(1) nonexempt charitable trust treated as a private foundation
[ ] 501(c)(3) taxable private foundation

Check if your organization is covered by the General Rule or a Special Rule.
Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

[ ] For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

[X] For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.
[ ] For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.
[ ] For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year \$

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Name of organization

RICHARDS LIBRARY

Employer identification number

14-1364588

**Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                                            | (c)<br>Total contributions | (d)<br>Type of contribution                                                                                                                                            |
|------------|----------------------------------------------------------------------------------------------|----------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1          | NEW YORK STATE LIBRARY<br>CULTURAL EDUCATION CENTER<br>222 MADISON AVENUE<br>ALBANY NY 12230 | \$ 11,940                  | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for<br>noncash contributions.) |
|            |                                                                                              | \$                         | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for<br>noncash contributions.)            |
|            |                                                                                              | \$                         | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for<br>noncash contributions.)            |
|            |                                                                                              | \$                         | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for<br>noncash contributions.)            |
|            |                                                                                              | \$                         | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for<br>noncash contributions.)            |
|            |                                                                                              | \$                         | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for<br>noncash contributions.)            |
|            |                                                                                              | \$                         | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for<br>noncash contributions.)            |

Name of the organization

RICHARDS LIBRARY

Employer identification number

14-1364588

Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts
Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include: 1 Total number at end of year, 2 Aggregate value of contributions to (during year), 3 Aggregate value of grants from (during year), 4 Aggregate value at end of year, 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?, 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

Conservation Easements

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).
2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.
3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year
4 Number of states where property subject to conservation easement is located
5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?
6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conversation easements during the year
7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year
8 Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B) (i) and section 170(h)(4)(B)(ii)?
9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets
Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.
b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items.
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items.

**Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)**

- 3** Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply).

**a** ☐ Public exhibition

**b** ☐ Scholarly research

**c** ☐ Preservation for future generations

**d** ☐ Loan or exchange program

**e** ☐ Other .....

- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

- 5** During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☒ No

**Escrow and Custodial Arrangements**

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

- b** If "Yes," explain the arrangement in Part XIII and complete the following table.

**c** Beginning balance .....

**d** Additions during the year .....

**e** Distributions during the year .....

**f** Ending balance .....

|           | Amount |
|-----------|--------|
| <b>1c</b> |        |
| <b>1d</b> |        |
| <b>1e</b> |        |
| <b>1f</b> |        |

- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ No

- b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII ☐

**Endowment Funds**

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

|                                                               | (a) Current year | (b) Prior year | (c) Two years back | (d) Three years back | (e) Four years back |
|---------------------------------------------------------------|------------------|----------------|--------------------|----------------------|---------------------|
| <b>1a</b> Beginning of year balance .....                     |                  |                |                    |                      |                     |
| <b>b</b> Contributions .....                                  |                  |                |                    |                      |                     |
| <b>c</b> Net investment earnings, gains, and losses .....     |                  |                |                    |                      |                     |
| <b>d</b> Grants or scholarships .....                         |                  |                |                    |                      |                     |
| <b>e</b> Other expenditures for facilities and programs ..... |                  |                |                    |                      |                     |
| <b>f</b> Administrative expenses .....                        |                  |                |                    |                      |                     |
| <b>g</b> End of year balance .....                            |                  |                |                    |                      |                     |

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

**a** Board designated or quasi-endowment ..... %

**b** Permanent endowment ..... %

**c** Term endowment ..... %

The percentages on lines 2a, 2b, and 2c should equal 100%.

- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

**(i)** Unrelated organizations? .....

**(ii)** Related organizations? .....

- b** If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? .....

|               | Yes | No |
|---------------|-----|----|
| <b>3a(i)</b>  |     |    |
| <b>3a(ii)</b> |     |    |
| <b>3b</b>     |     |    |

- 4** Describe in Part XIII the intended uses of the organization's endowment funds.

**Land, Buildings, and Equipment**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

| Description of property                                                                                | (a) Cost or other basis (investment) | (b) Cost or other basis (other) | (c) Accumulated depreciation | (d) Book value |
|--------------------------------------------------------------------------------------------------------|--------------------------------------|---------------------------------|------------------------------|----------------|
| <b>1a</b> Land .....                                                                                   |                                      | 50,000                          |                              | 50,000         |
| <b>b</b> Buildings .....                                                                               |                                      |                                 |                              |                |
| <b>c</b> Leasehold improvements .....                                                                  |                                      |                                 |                              |                |
| <b>d</b> Equipment .....                                                                               |                                      | 2,153,951                       | 1,043,159                    | 1,110,792      |
| <b>e</b> Other .....                                                                                   |                                      |                                 |                              |                |
| <b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B)). |                                      |                                 |                              | 1,160,792      |

**Investments – Other Securities**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

| (a) Description of security or category<br>(including name of security)   | (b) Book value | (c) Method of valuation:<br>Cost or end-of-year market value |
|---------------------------------------------------------------------------|----------------|--------------------------------------------------------------|
| (1) Financial derivatives                                                 |                |                                                              |
| (2) Closely held equity interests                                         |                |                                                              |
| (3) Other                                                                 |                |                                                              |
| (A)                                                                       |                |                                                              |
| (B)                                                                       |                |                                                              |
| (C)                                                                       |                |                                                              |
| (D)                                                                       |                |                                                              |
| (E)                                                                       |                |                                                              |
| (F)                                                                       |                |                                                              |
| (G)                                                                       |                |                                                              |
| (H)                                                                       |                |                                                              |
| <b>Total.</b> (Column (b) must equal Form 990, Part X, line 12, col. (B)) |                |                                                              |

**Investments – Program Related**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

| (a) Description of investment                                             | (b) Book value | (c) Method of valuation:<br>Cost or end-of-year market value |
|---------------------------------------------------------------------------|----------------|--------------------------------------------------------------|
| (1)                                                                       |                |                                                              |
| (2)                                                                       |                |                                                              |
| (3)                                                                       |                |                                                              |
| (4)                                                                       |                |                                                              |
| (5)                                                                       |                |                                                              |
| (6)                                                                       |                |                                                              |
| (7)                                                                       |                |                                                              |
| (8)                                                                       |                |                                                              |
| (9)                                                                       |                |                                                              |
| <b>Total.</b> (Column (b) must equal Form 990, Part X, line 13, col. (B)) |                |                                                              |

**Other Assets**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

| (a) Description                                                           | (b) Book value |
|---------------------------------------------------------------------------|----------------|
| (1)                                                                       |                |
| (2)                                                                       |                |
| (3)                                                                       |                |
| (4)                                                                       |                |
| (5)                                                                       |                |
| (6)                                                                       |                |
| (7)                                                                       |                |
| (8)                                                                       |                |
| (9)                                                                       |                |
| <b>Total.</b> (Column (b) must equal Form 990, Part X, line 15, col. (B)) |                |

**Other Liabilities**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

| 1.                                                                        | (a) Description of liability | (b) Book value |
|---------------------------------------------------------------------------|------------------------------|----------------|
| (1)                                                                       | Federal income taxes         |                |
| (2)                                                                       | CURRENT LIABILITIES          | 13,036         |
| (3)                                                                       |                              |                |
| (4)                                                                       |                              |                |
| (5)                                                                       |                              |                |
| (6)                                                                       |                              |                |
| (7)                                                                       |                              |                |
| (8)                                                                       |                              |                |
| (9)                                                                       |                              |                |
| <b>Total.</b> (Column (b) must equal Form 990, Part X, line 25, col. (B)) |                              | 13,036         |

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII ☐

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

|          |                                                                                       |           |           |  |
|----------|---------------------------------------------------------------------------------------|-----------|-----------|--|
| <b>1</b> | Total revenue, gains, and other support per audited financial statements .....        |           | <b>1</b>  |  |
| <b>2</b> | Amounts included on line 1 but not on Form 990, Part VIII, line 12:                   |           |           |  |
| <b>a</b> | Net unrealized gains (losses) on investments .....                                    | <b>2a</b> |           |  |
| <b>b</b> | Donated services and use of facilities .....                                          | <b>2b</b> |           |  |
| <b>c</b> | Recoveries of prior year grants .....                                                 | <b>2c</b> |           |  |
| <b>d</b> | Other (Describe in Part XIII.) .....                                                  | <b>2d</b> |           |  |
| <b>e</b> | Add lines 2a through 2d .....                                                         |           | <b>2e</b> |  |
| <b>3</b> | Subtract line 2e from line 1 .....                                                    |           | <b>3</b>  |  |
| <b>4</b> | Amounts included on Form 990, Part VIII, line 12, but not on line 1:                  |           |           |  |
| <b>a</b> | Investment expenses not included on Form 990, Part VIII, line 7b .....                | <b>4a</b> |           |  |
| <b>b</b> | Other (Describe in Part XIII.) .....                                                  | <b>4b</b> |           |  |
| <b>c</b> | Add lines 4a and 4b .....                                                             |           | <b>4c</b> |  |
| <b>5</b> | Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) ..... |           | <b>5</b>  |  |

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

|                                                                                           |           |           |  |
|-------------------------------------------------------------------------------------------|-----------|-----------|--|
| <b>1</b> Total expenses and losses per audited financial statements                       |           | <b>1</b>  |  |
| <b>2</b> Amounts included on line 1 but not on Form 990, Part IX, line 25:                |           |           |  |
| <b>a</b> Donated services and use of facilities                                           | <b>2a</b> |           |  |
| <b>b</b> Prior year adjustments                                                           | <b>2b</b> |           |  |
| <b>c</b> Other losses                                                                     | <b>2c</b> |           |  |
| <b>d</b> Other (Describe in Part XIII.)                                                   | <b>2d</b> |           |  |
| <b>e</b> Add lines 2a through 2d                                                          |           | <b>2e</b> |  |
| <b>3</b> Subtract line 2e from line 1                                                     |           | <b>3</b>  |  |
| <b>4</b> Amounts included on Form 990, Part IX, line 25, but not on line 1:               |           |           |  |
| <b>a</b> Investment expenses not included on Form 990, Part VIII, line 7b                 | <b>4a</b> |           |  |
| <b>b</b> Other (Describe in Part XIII.)                                                   | <b>4b</b> |           |  |
| <b>c</b> Add lines 4a and 4b                                                              |           | <b>4c</b> |  |
| <b>5</b> Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) |           | <b>5</b>  |  |

## Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

**Supplemental Information** *(continued)*

Supplemental information area with horizontal lines for text entry.

|                          |                                |
|--------------------------|--------------------------------|
| Name of the organization | Employer identification number |
| RICHARDS LIBRARY         | 14-1364588                     |

FORM 990, PART III - ADDITIONAL INFORMATION  
PART 111, LINE 4 - DESCRIPTION OF ORGANIZATION COLLECTIONS & HOW FURTHERS  
EXEMPT PURPOSE:  
DONATED LOCAL HISTORICAL ARTIFACTS ARE DISPLAYED FOR EDUCATIONAL PURPOSES  
AND MAINTAINED FOR PRESERVATION FOR FUTURE GENERATIONS.

FORM 990, PART VI - ADDITIONAL INFORMATION  
FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORCEMENT OF  
CONFLICTS:  
ANNUALLY, DISCLOSURE OF INTEREST THAT COULD GIVE RISE TO CONFLICTS OF  
INTEREST ARE DISCLOSED IN WRITING AND UPDATED IN THERE INTERIM, IF  
APPLICABLE. ANY ACTION TAKEN BY THE LIBRARY, WHETHER CONTRACTS OF SERVICE  
OR OTHERWISE, ARE BROUGHT BEFORE THE BOARD FOR APPROVAL. IF THE POSSIBILITY  
OF A CONFLICT(S) EXISTS, THAT MEMBER(S) OF THE BOARD IS PRECLUDED FROM A  
VOTE OF APPROVAL, ABSTAINING FROM ANY VOTE.  
FORM 990, PART VI, LINE 19 -- OTHER ORGANIZATION DOCUMENTS PUBLICLY  
AVAILABLE:  
THE LIBRARY MAKES THE RELATED DOCUMENTS AVAILABLE IF REQUESTED BY THE  
PUBLIC.  
FORM 990, PART VI LINE 11B -- FORM 990 REVIEW PROCESS:  
FORM 990 IN ITS ENTIRETY, TOGETHER WITH ALL SUPPORTING STATEMENTS IS MADE  
AVAILABLE TO THE BOARD OFFICERS, LIBRARY DIRECTOR AND THE BOARD TRUSTEES.  
THE REVIEW OF FORM 990 IS CONDUCTED AT A REGULARLY SCHEDULED BOARD MEETING.

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990  
NO REVIEW WAS OR WILL BE CONDUCTED.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY  
ANNUALLY, DISCLOSURE OF INTEREST THAT COULD GIVE RISE TO CONFLICTS OF  
INTEREST ARE DISCLOSED IN WRITING AND UPDATED IN THE INTERIM, IF  
APPLICABLE.  
ANY ACTION TAKEN BY THE LIBRARY, WHETHER CONTRACTS OF SERVICE OR  
OTHERWISE, ARE BROUGHT BEFORE THE BOARD FOR APPROVAL. IF THE POSSIBILITY  
OF A CONFLICT(S) EXISTS, THAT MEMBER(S) OF THE BOARD IS PRECLUDED FROM A  
VOTE.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION  
THE LIBRARY MAKES THE RELATED DOCUMENTS AVAILABLE IF REQUESTED BY THE  
PUBLIC.

FORM 990, PART XI, LINE 9 - OTHER CHANGES IN NET ASSETS EXPLANATION  
ROUNDING \$ -1

**Depreciation and Amortization**  
(Including Information on Listed Property)  
Attach to your tax return.Go to [www.irs.gov/Form4562](http://www.irs.gov/Form4562) for instructions and the latest information.**2025**Attachment  
Sequence No. **179**

RICHARDS LIBRARY

INDIRECT DEPRECIATION

Identifying number

14-1364588

**Election To Expense Certain Property Under Section 179****Note:** If you have any listed property, complete Part V before you complete Part I.

|    |                                                                                                                                         |                              |                  |
|----|-----------------------------------------------------------------------------------------------------------------------------------------|------------------------------|------------------|
| 1  | Maximum amount (see instructions)                                                                                                       | 1                            | 2,500,000        |
| 2  | Total cost of section 179 property placed in service (see instructions)                                                                 | 2                            |                  |
| 3  | Threshold cost of section 179 property before reduction in limitation (see instructions)                                                | 3                            | 4,000,000        |
| 4  | Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-                                                        | 4                            |                  |
| 5  | Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions | 5                            |                  |
| 6  | (a) Description of property                                                                                                             | (b) Cost (business use only) | (c) Elected cost |
| 7  | Listed property. Enter the amount from line 29                                                                                          | 7                            |                  |
| 8  | Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7                                                    | 8                            |                  |
| 9  | Tentative deduction. Enter the <b>smaller</b> of line 5 or line 8                                                                       | 9                            |                  |
| 10 | Carryover of disallowed deduction from line 13 of your 2024 Form 4562                                                                   | 10                           |                  |
| 11 | Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions                       | 11                           |                  |
| 12 | Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11                                                    | 12                           |                  |
| 13 | Carryover of disallowed deduction to 2026. Add lines 9 and 10, less line 12                                                             | 13                           |                  |

**Note:** Don't use Part II or Part III below for listed property. Instead, use Part V.**Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.)**

|    |                                                                                                                                            |    |  |
|----|--------------------------------------------------------------------------------------------------------------------------------------------|----|--|
| 14 | Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year. See instructions | 14 |  |
| 15 | Property subject to section 168(f)(1) election                                                                                             | 15 |  |
| 16 | Other depreciation (including ACRS)                                                                                                        | 16 |  |

**MACRS Depreciation (Don't include listed property. See instructions.)****Section A**

|    |                                                                                                                                                            |    |        |
|----|------------------------------------------------------------------------------------------------------------------------------------------------------------|----|--------|
| 17 | MACRS deductions for assets placed in service in tax years beginning before 2025                                                                           | 17 | 51,945 |
| 18 | If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here <input type="checkbox"/> |    |        |

**Section B—Assets Placed in Service During 2025 Tax Year Using the General Depreciation System**

| (a) Classification of property (see instructions) | (b) Month and year placed in service | (c) Basis for depreciation (business/investment use only—see instructions) | (d) Recovery period | (e) Convention | (f) Method | (g) Depreciation deduction |
|---------------------------------------------------|--------------------------------------|----------------------------------------------------------------------------|---------------------|----------------|------------|----------------------------|
| 19a 3-year property                               |                                      |                                                                            |                     |                |            |                            |
| b 5-year property                                 |                                      |                                                                            |                     |                |            |                            |
| c 7-year property                                 |                                      |                                                                            |                     |                |            |                            |
| d 10-year property                                |                                      |                                                                            |                     |                |            |                            |
| e 15-year property                                |                                      |                                                                            |                     |                |            |                            |
| f 20-year property                                |                                      |                                                                            |                     |                |            |                            |
| g 25-year property                                |                                      |                                                                            | 25 yrs.             |                | S/L        |                            |
| h 50-year property                                |                                      |                                                                            | 50 yrs.             | MM             | S/L        |                            |
| i Residential rental property                     |                                      |                                                                            | 27.5 yrs.           | MM             | S/L        |                            |
| j Nonresidential real property                    |                                      |                                                                            | 27.5 yrs.           | MM             | S/L        |                            |
|                                                   |                                      |                                                                            | 39 yrs.             | MM             | S/L        |                            |
|                                                   |                                      |                                                                            |                     | MM             | S/L        |                            |

**Section C—Assets Placed in Service During 2025 Tax Year Using the Alternative Depreciation System**

|                |  |        |         |    |     |       |
|----------------|--|--------|---------|----|-----|-------|
| 20a Class life |  | 98,072 | 10.0    | HY | S/L | 5,239 |
| b 12-year      |  |        | 12 yrs. |    | S/L |       |
| c 30-year      |  |        | 30 yrs. | MM | S/L |       |
| d 40-year      |  |        | 40 yrs. | MM | S/L |       |
| e 50-year      |  |        | 50 yrs. | MM | S/L |       |

For Paperwork Reduction Act Notice, see separate instructions.

Form **4562** (2025)

THERE ARE NO AMOUNTS FOR PAGE 3

**Summary (See instructions.)**

|                                                                                                                                                                                                                                                                                              |            |        |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|--------|
| <b>21</b> Listed property. Enter amount from line 28                                                                                                                                                                                                                                         | <b>21</b>  |        |
| <b>22 Total.</b> Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions.                                                                        | <b>22</b>  | 57,184 |
| <b>23a</b> For assets shown in Part III that are placed in service during the current tax year, and have costs capitalized under section 263A, enter the amount of the basis attributable to interest costs capitalized under section 263A(f).                                               | <b>23a</b> |        |
| <b>b</b> For assets shown in Part III that are placed in service during the current tax year, and have costs capitalized under section 263A, enter the amount of the basis attributable to costs capitalized under section 263A other than interest costs capitalized under section 263A(f). | <b>23b</b> |        |

**Listed Property** (Include automobiles, certain other vehicles, certain aircraft, and property used for entertainment, recreation, or amusement.)

**Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

**Section A—Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)**

|                                                                                                                                                                                    |                                         |                                                                 |                                   |                                                                           |                                  |                                     |                                         |                                           |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|-----------------------------------------------------------------|-----------------------------------|---------------------------------------------------------------------------|----------------------------------|-------------------------------------|-----------------------------------------|-------------------------------------------|
| <b>24a</b> Do you have evidence to support the business/investment use claimed?                                                                                                    | <input type="checkbox"/> Yes            | <input type="checkbox"/> No                                     |                                   |                                                                           |                                  |                                     |                                         |                                           |
| <b>b</b> If "Yes," is the evidence written?                                                                                                                                        | <input type="checkbox"/> Yes            | <input type="checkbox"/> No                                     |                                   |                                                                           |                                  |                                     |                                         |                                           |
| <b>c</b> Do you own, lease, or charter an aircraft? Check all that apply. See instructions.                                                                                        | <input type="checkbox"/> Own            | <input type="checkbox"/> Lease <input type="checkbox"/> Charter |                                   |                                                                           |                                  |                                     |                                         |                                           |
| <b>(a)</b><br>Type of property<br>(list vehicles first)                                                                                                                            | <b>(b)</b><br>Date placed<br>in service | <b>(c)</b><br>Business/<br>investment use<br>percentage         | <b>(d)</b><br>Cost or other basis | <b>(e)</b><br>Basis for depreciation<br>(business/investment<br>use only) | <b>(f)</b><br>Recovery<br>period | <b>(g)</b><br>Method/<br>Convention | <b>(h)</b><br>Depreciation<br>deduction | <b>(i)</b><br>Elected section 179<br>cost |
| <b>25</b> Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use. See instructions. | <b>25</b>                               |                                                                 |                                   |                                                                           |                                  |                                     |                                         |                                           |
| <b>26</b> Property used more than 50% in a qualified business use:                                                                                                                 |                                         |                                                                 |                                   |                                                                           |                                  |                                     |                                         |                                           |
|                                                                                                                                                                                    |                                         | %                                                               |                                   |                                                                           |                                  |                                     |                                         |                                           |
|                                                                                                                                                                                    |                                         | %                                                               |                                   |                                                                           |                                  |                                     |                                         |                                           |
| <b>27</b> Property used 50% or less in a qualified business use :                                                                                                                  |                                         |                                                                 |                                   |                                                                           |                                  |                                     |                                         |                                           |
|                                                                                                                                                                                    |                                         | %                                                               |                                   |                                                                           |                                  | S/L-                                |                                         |                                           |
|                                                                                                                                                                                    |                                         | %                                                               |                                   |                                                                           |                                  | S/L-                                |                                         |                                           |
| <b>28</b> Add amounts in column (h), lines 25 through 27. Enter here and on line 21                                                                                                | <b>28</b>                               |                                                                 |                                   |                                                                           |                                  |                                     |                                         |                                           |
| <b>29</b> Add amounts in column (i), line 26. Enter here and on line 7.                                                                                                            | <b>29</b>                               |                                                                 |                                   |                                                                           |                                  |                                     |                                         |                                           |

**Section B—Information on Use of Vehicles**

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

|                                                                                                          |                         |                         |                         |                         |                         |                         |
|----------------------------------------------------------------------------------------------------------|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|
| <b>30</b> Total business/investment miles driven during the year ( <b>don't</b> include commuting miles) | <b>(a)</b><br>Vehicle 1 | <b>(b)</b><br>Vehicle 2 | <b>(c)</b><br>Vehicle 3 | <b>(d)</b><br>Vehicle 4 | <b>(e)</b><br>Vehicle 5 | <b>(f)</b><br>Vehicle 6 |
| <b>31</b> Total commuting miles driven during the year                                                   |                         |                         |                         |                         |                         |                         |
| <b>32</b> Total other personal (noncommuting) miles driven                                               |                         |                         |                         |                         |                         |                         |
| <b>33</b> Total miles driven during the year. Add lines 30 through 32                                    |                         |                         |                         |                         |                         |                         |
| <b>34</b> Was the vehicle available for personal use during off-duty hours?                              | <b>Yes</b>              | <b>No</b>               | <b>Yes</b>              | <b>No</b>               | <b>Yes</b>              | <b>No</b>               |
| <b>35</b> Was the vehicle used primarily by a more than 5% owner or related person?                      |                         |                         |                         |                         |                         |                         |
| <b>36</b> Is another vehicle available for personal use?                                                 |                         |                         |                         |                         |                         |                         |

**RICHARDS LIBRARY**

Financial Statements

December 31, 2025

RICHARDS LIBRARY  
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December 31, 2025

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63 Putnam Street, Ste. 204  
Saratoga Springs, NY 12866  
(866) 247-6800

## INDEPENDENT ACCOUNTANT'S REVIEW REPORT

The Board of Trustees

**Richards Library**

Warrensburg, NY

We have reviewed the accompanying financial statements of **Richards Library** (a non-profit organization), which comprise the statement of financial position as of **December 31, 2025**, and the related statements of activities, functional expenses, and cash flows for the year then ended, and the related notes to the financial statements. A review includes primarily applying analytical procedures to management's financial data and making inquiries of entity management. A review is substantially less in scope than an audit, the objective of which is the expression of an opinion regarding the financial statements as a whole. Accordingly, we do not express such an opinion.

### Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement whether due to fraud or error.

### Accountant's Responsibility

Our responsibility is to conduct the review engagement in accordance with Statements on Standards for Accounting and Review Services (SSARS) promulgated by the Accounting and Review Services Committee of the AICPA. Those standards require us to perform procedures to obtain limited assurance as a basis for reporting whether we are aware of any material modifications that should be made to the financial statements for them to be in accordance with accounting principles generally accepted in the United States of America. We believe that the results of our procedures provide a reasonable basis for our conclusion.

We are required to be independent of **Richards Library** and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements related to our review.

### Accountant's Conclusion

Based on our review, we are not aware of any material modifications that should be made to the accompanying financial statements in order for them to be in accordance with accounting principles generally accepted in the United States of America.

A handwritten signature in blue ink, appearing to read "Catherine Harris".

Catherine Harris, CPA  
& Wealth Management Services, PLLC

Saratoga Springs, NY

March 30, 2026

RICHARDS LIBRARY  
STATEMENT OF FINANCIAL POSITION  
December 31, 2025

|                                            | <u>2025</u>                |
|--------------------------------------------|----------------------------|
| <b><u>ASSETS</u></b>                       |                            |
| Current Assets                             |                            |
| Cash, Unrestricted                         | \$ 113,392                 |
| Cash, Temporarily Restricted               | 45,293                     |
| Certificates of Deposit                    | 25,352                     |
| Accounts Receivable                        | -                          |
| Prepaid Expenses                           | 7,627                      |
| Total Current Assets                       | <u>191,664</u>             |
| Property & Equipment                       |                            |
| Land                                       | 50,000                     |
| Building & Improvements                    | 1,575,726                  |
| Furniture, Fixtures & Equipment            | 173,770                    |
| Books & Periodicals                        | 382,320                    |
| Artifacts & Paintings                      | 22,135                     |
|                                            | <u>2,203,951</u>           |
| Less Accumulated Depreciation              | <u>(1,043,159)</u>         |
|                                            | 1,160,792                  |
| Other Assets - Restricted Use              |                            |
| Investments                                | 48,504                     |
| <b>Total Assets</b>                        | <u><u>1,400,960</u></u>    |
| <b><u>LIABILITIES &amp; NET ASSETS</u></b> |                            |
| Current Liabilities                        |                            |
| Accounts Payable                           | 1,085                      |
| Accrued Expenses                           | 13,035                     |
| Deferred Revenue                           | -                          |
| Current Portion Long-Term Debt             | -                          |
| Total Current Liabilities                  | <u>14,120</u>              |
| Long-Term Liabilities                      |                            |
| Notes Payable                              | -                          |
| Long-Term debt, Less Current Portion       | -                          |
| Total Long-Term Liabilities                | <u>-</u>                   |
| <b>Total Liabilities</b>                   | 14,120                     |
| Commitments & Contingent Liabilities       | -                          |
| Net Assets                                 |                            |
| Without Donor Restrictions                 | 1,338,336                  |
| With Donor Restrictions                    | 48,504                     |
| <b>Total Net Assets</b>                    | <u>1,386,840</u>           |
| <b>Total Liabilities and Net Assets</b>    | <u><u>\$ 1,400,960</u></u> |

*See accompanying notes to financial statements*

RICHARDS LIBRARY  
STATEMENT OF ACTIVITIES & CHANGE IN NET ASSETS  
Year Ended December 31, 2025

|                                     | <u>2025</u>             |
|-------------------------------------|-------------------------|
| <b>Revenues &amp; Other Support</b> |                         |
| Contributed Support                 | 271,509                 |
| Grants                              | 3,098                   |
| Donations                           | 10,757                  |
| Fees                                | 289                     |
| Investment Income (loss), net       | 4,864                   |
| Other Income                        | 3,249                   |
| Total Revenues &                    |                         |
| Other Support                       | <u>293,766</u>          |
| <br><b>Expenses</b>                 |                         |
| Library Services                    | 201,990                 |
| Support Services - Management &     |                         |
| General Support                     | <u>86,200</u>           |
| Total Expenses                      | <u>288,190</u>          |
| Change in Net Assets                | 5,576                   |
| Net Assets, Beginning of Year       | <u>1,381,264</u>        |
| <b>Net Assets, End of Year</b>      | <u><u>1,386,840</u></u> |

*See accompanying notes to financial statements*

RICHARDS LIBRARY  
STATEMENT OF FUNCTIONAL EXPENSES  
Year Ended December 31, 2025

|                                | <b>2025</b>         |                         |                |
|--------------------------------|---------------------|-------------------------|----------------|
|                                | Program<br>Services | Management<br>& General | Total          |
| Salaries & Wages               | \$ 88,682           | \$ 62,716               | \$ 151,398     |
| Payroll Taxes & Benefits       | 7,731               | 5,467                   | 13,198         |
| Utilities                      | 10,929              | 1,214                   | 12,143         |
| Professional Fees              | -                   | 6,100                   | 6,100          |
| Insurance                      | -                   | 9,011                   | 9,011          |
| Automation Fees                | 5,308               | -                       | 5,308          |
| Building Repairs & Maintenance | 9,210               | 1,025                   | 10,235         |
| Telephone                      | 1,585               | -                       | 1,585          |
| Office Expenses                | 4,059               | 451                     | 4,510          |
| Library Operating Expenses     | 13,198              | -                       | 13,198         |
| Miscellaneous                  | 4,105               | 216                     | 4,321          |
| Depreciation                   | 57,183              | -                       | 57,183         |
| <b>Total Expenses</b>          | <b>201,990</b>      | <b>86,200</b>           | <b>288,190</b> |

*See accompanying notes to financial statements*

RICHARDS LIBRARY  
STATEMENT OF CASH FLOWS  
Year Ended December 31, 2025

|                                                     | <u>2025</u>       |
|-----------------------------------------------------|-------------------|
| Cash Provided From (Used For) Operating Activities: |                   |
| Change in Net Assets                                | \$ 5,576          |
| Adjustments To Reconcile Change In Net              |                   |
| Assets To Cash Provided By Operating Activities     |                   |
| Depreciation                                        | 57,183            |
| Net (Gain) Loss on Investments                      | (1,349)           |
| Changes In Operating Assets & Liabilities           |                   |
| Accounts Receivable                                 | 45                |
| Prepaid Expenses                                    | 4,674             |
| Deferred Revenue                                    | -                 |
| Accounts Payable And Accrued Expenses               | 14,120            |
| Cash From Operating Activities                      | <u>80,249</u>     |
| Cash Used For Investing Activities:                 |                   |
| Net (Gain) Loss on Asset Disposition                | -                 |
| Acquisition Of Property, Plant & Equipment          | (94,598)          |
| Cash From Investing Activities                      | <u>(94,598)</u>   |
| Cash From (Used For) Financing Activities           |                   |
| Proceeds From Short-Term Borrowings                 | -                 |
| Payments On Short-Term Borrowings                   | -                 |
| Proceeds From Long-Term Borrowing                   | -                 |
| Payments On Long-Term Borrowing                     | -                 |
| Cash (Used For) Financing Activities                | <u>-</u>          |
| Increase (Decrease) In Cash                         |                   |
| Unrestricted                                        | (214,995)         |
| Temporarily Restricted                              | (8,715)           |
| Net Change                                          | <u>(223,710)</u>  |
| Cash & Equivalents, Beginning Of Year               | 382,395           |
| Cash & Equivalents, End of Year                     | <u>\$ 158,685</u> |
| Supplemental Information:                           |                   |
| Interest Paid                                       | <u>\$ -</u>       |

*See accompanying notes to financial statements*

## **RICHARDS LIBRARY**

### Notes to Financial Statements

December 31, 2025

(1) Nature of Activities and Summary of Significant Accounting Policies

(a) Organization

Richards Library, located in Warren County, New York, was founded by a large individual gift. Miss Clara King Richards of Warrensburg and her sister, Mrs. Mary Richards Kellogg who resided in Elizabethtown, presented this as a free gift to the town. Richards Library was chartered in 1901. The purpose of Richards Library is to provide free loans of print and non-print materials to the public and to provide reading programs from pre-school to adult. The library is primarily supported by property taxes.

(b) Basis of Accounting

The financial statements have been prepared on the accrual basis of accounting and reflect all significant receivables, payables, and other liabilities.

(c) Basis of Presentation

Financial statement presentation follows the recommendation of the Financial Accounting Standards Board (FASB) in its Accounting Standards Codification (ASC). Richards Library is required to report information regarding its financial position and activities according to two classes of net assets: net assets without donor restrictions, and net assets with donor restrictions (in accordance with donor-imposed restrictions on the use of net assets).

(d) Cash and Cash Equivalents

Richards Library defines cash and cash equivalents as amounts readily convertible into cash and includes deposit accounts with banks.

(e) Income Taxes

Richards Library is exempt from income taxes under Section 501(c)(3) of the Internal Revenue Code, is classified as an organization that is not a private foundation, and qualifies for the charitable contribution deduction for individual donors. Management believes there are no sources of unrelated business taxable income and no uncertain tax positions. Richards Library is required to file Federal Form 990 "Return of Organization Exempt from Income Tax".

(f) Assets Whose Use is Limited - Investments

Investments consist of mutual funds which are carried at fair value. Fair value is determined based on quoted market prices. Investment gains and losses are recognized in the statement of activities.

## **RICHARDS LIBRARY**

### Notes to Financial Statements

December 31, 2025

(1) Nature of Activities and Summary of Significant Accounting Policies (cont.)

(g) Property and Equipment

Property and equipment are recorded at cost at date of acquisition or estimated fair value at date of donation. Depreciation is computed under the straight-line method over the estimated useful lives of property and equipment. Richards Library has a policy to capitalize fixed asset expenditures with a unit value greater than \$1,000 and a useful life greater than one year. Expenditures for normal repairs and maintenance are charged to operations as incurred.

(h) Use of Estimates

The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect certain reported amounts and disclosures. Actual results could differ.

(i) Revenue Recognition

Property Taxes

Property tax revenue is based upon an annual tax levy on properties within the Warrensburg Central School District. The Library recognizes this revenue over its calendar fiscal year. Amounts received prior to the library's fiscal year are recorded as deferred revenue on the statement of financial position.

(j) Contributions and Investment Income

Contributions and investment income are recorded as without donor restrictions or with donor restrictions depending on the existence and/or nature of donor restrictions. When a restriction expires (i.e., when a stipulated time restriction ends or purpose restriction is accomplished), net assets with donor restrictions are reclassified to net assets without donor restrictions and reported in the statement of activities as net assets released from restrictions. Restrictions imposed that are met in the same year they are received are included in net assets without donor restrictions. Contributions of non-cash items are recorded at fair value at the date of donation. The accompanying statement of activities includes non-cash donations of \$1,673.

(k) Contributed Services

No amounts have been reflected in the financial statements for contributed services. Richards Library generally pays for services requiring specific expertise. However, many individuals volunteer their time and perform tasks that assist Richards Library with its activities.

## RICHARDS LIBRARY

### Notes to Financial Statements

December 31, 2025

(1) Nature of Activities and Summary of Significant Accounting Policies (cont.)

(I) Financial Assets - Liquidity and Availability

Richards Library has \$184,037 of financial assets available within one year of the statement of financial position date to meet cash needs for general expenditures consisting of cash and cash equivalents of \$158,685 and certificates of deposit of \$25,352. None of these financial assets are subject to donor or contractual restrictions that make them unavailable for general expenditures within one year of the statement of financial position date. Richards Library also has investments of \$48,504 at December 31, 2025. These investments are donor restricted. The dividend earnings are able to be utilized within one year of the statement of financial position date, but any market gains or losses are unavailable to be utilized. As part of its liquidity management, Richards Library has a policy to structure its financial assets to be available as general expenditures, liabilities and other obligations become due.

(2) Investments

A summary of investments (whose use is restricted) at December 31, 2025, is as follows:

|              |          |
|--------------|----------|
| Mutual Funds | \$48,504 |
|--------------|----------|

Investment income for the year ended December 31, 2025 is recorded in the statement of activities as follows:

|                                        |         |
|----------------------------------------|---------|
| Net assets without donor restrictions: |         |
| Interest and dividends                 | \$428   |
| Net assets with donor restrictions:    |         |
| Gain (Loss) on investments             | \$4,436 |

(3) Functional Reporting of Expenses

Richards Library is required to present its expenses by functional classification, which shows the amount spent for program and support services. Expenses that can be specifically identified as a program or support service are charged directly to program or support services. Costs common to both functions have been allocated among the functions benefitted.

(4) Restriction on Net Assets

The restriction on net assets relates to donations received to be held for the purpose of providing income to be used for the continued operation of the library. The funds are maintained in a separate brokerage investment account. Income earned on these invested funds is utilized currently for the operation of the library. The principal amount of the donations, including any market appreciation, is recorded as net assets with donor restrictions in the statement of financial position.

## RICHARDS LIBRARY

### Notes to Financial Statements

December 31, 2025

(5) Fair Value Measurements

FASB "Accounting Standards Codification 820" establishes a framework for measuring fair value. That framework provides a hierarchy that prioritizes inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (level 1 measurements) and the lowest priority to unobservable inputs (level 3 measurements).

The asset or liabilities fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement.

Assets and liabilities measured at fair value on a recurring basis recognized in the statement of financial position at December 31, 2025, and the level within the fair value hierarchy is as follows:

|                            | <u>Level 1</u> | <u>Level 2</u> | <u>Level 3</u> |
|----------------------------|----------------|----------------|----------------|
| Investments - Mutual funds | \$48,504       | -0-            | -0-            |

Cash and cash equivalents and current liabilities - carrying amounts reported in the statement of financial position approximate fair values because of the short maturities of those instruments.

(6) Contingent Liability

Grant Programs

Richards Library periodically receives grants. These grants are sometimes subject to financial and compliance audits by the grantors or their representatives. Accordingly, Richards Library's compliance with applicable grant and contract requirements may be established at some future date. The amount, if any, of expenditures or funding which may be disallowed by the granting agencies cannot be determined at this time although management expects such amounts, if any, to be immaterial.

(7) Lease Transactions

The Organization is subject to Accounting Standards Codification 842 (ASU 2016-02) - *Accounting for Leases*. Under this standard, management is required to examine any outstanding or future financial contracts, if known, to determine if they are leases, and if so, whether they qualify for accounting and disclosure. Management has reviewed its financial contracts and determined that no leases fall under, or will fall under, ASC 842 as of the report date.

(8) Coronavirus (COVID-19)

The United States recently experienced a protracted national health pandemic due to the Coronavirus ("COVID-19"). The overall consequences of COVID-19 are unknown but have the potential to result in extended economic impacts. The full impact of this event on the Organization and its future results and financial positions is not presently determinable.

**RICHARDS LIBRARY**

Notes to Financial Statements

December 31, 2025

(9) Concentration of Credit Risk

Financial instruments that potentially subject Richards Library to concentrations of credit risk consist of cash account balances in a financial institution which, from time to time, may exceed FDIC insured coverage limits. At year end, there were no deposits which exceeded federally insured coverage limits.

(10) Subsequent Events

Management has evaluated subsequent events through the report date, and determined that there have been no subsequent events that have occurred that would modify our report or require adjustments to our disclosures in the financial statements.



December 23, 2025

**VIA EMAIL**

Sarah Gebbie-Measeck  
President of the Board of Trustees  
The Richards Library  
36 Elm Street  
Warrensburg, NY 12885

Re: *State and Municipalities ("SAM")  
Improvements to the library  
Project ID: 29686*

Dear Sarah Gebbie-Measeck:

As you know, the State has awarded the The Richards Library ("Grantee") a State and Municipalities ("SAM") grant for the above-referenced project in the amount of \$130,000.00 (the "Grant").

This letter outlines important information regarding the administration process for the Grant in subject line:

- *The Grant Administration process is primarily dependent on the timely return of documentation as requested. If initial or follow-up documentation requested is not returned in a timely manner, is insufficient, or is returned without supporting documentation as may be required, the process will be delayed.*
- *DASNY reserves the right to request updated documentation if there is a delay at any point in the Grant Administrative process.*
- *The Grant Administration process **may take more than 6 months to a year** before your organization can execute a contract with the State and submit for reimbursement. Please see FAQs for more information on each required review, and timeframes generally for the administrative process and reimbursement.*
- *If choosing to finance your project costs prior to contract execution and disbursement please reach out to DASNY as soon as possible to schedule a meeting, before entering any finance arrangement including loans, tax credits, lines of credit, etc., as doing so may impact your ability to submit for reimbursement under your Grant Award.*

On the following page of this letter, please find the next steps regarding the Grant Administration process.

*[Continued on Next Page]*



The next steps in the Grant Administration Process are:

- *Please return the following Due Diligence paperwork and supporting documentation as noted on each exhibit:*
  - Project Cover Page
  - Exhibit A – Organization Information
  - Exhibit B – Budget
  - Exhibit C – Site control
  - Exhibit D – SEQR/SHPO
  - Exhibit E – Certifications
  - Appendices
  - Please note: upon review, additional documentation may be requested at DASNY's discretion

- *Please complete documentation electronically and return to [CallCenter@DASNY.org](mailto:CallCenter@DASNY.org) within thirty (30) days of receipt of this letter, with subject line:*

*SAM (29686) The Richards Library*

***If you are not able to meet this timeframe, please send an email to [CallCenter@DASNY.org](mailto:CallCenter@DASNY.org) with your requested timeline for submission.***

Please note as per State policy, updated due diligence paperwork is required throughout the grant administration process. The due diligence paperwork will be sent to you after the return of the paperwork above if you do not have current due diligence paperwork on file with DASNY at the time of submission.

If your organization is a not-for-profit please also see the 'Prior to Final Approval' section in attached FAQs for information regarding the prequalification requirement through NY State Financial System (SFS).

Grantees are also advised that grant-funded projects are subject to the State Environmental Quality Review Act (SEQRA) and State Historic Preservation Act (SHPA). Information regarding the SEQRA and SHPA process is included in the FAQs.

Should you have any questions concerning the enclosed documentation please either call (518) 257-3177 or email [CallCenter@DASNY.org](mailto:CallCenter@DASNY.org) and a member of the Call Center Team will assist.

Sincerely,

*DASNY Grants Administration*

**DASNY****Dormitory Authority  
of the State of New York****Project Cover Page****Grantee:** The Richards Library**Program:** SAM**Project ID:** 29686**Grant Amount:** \$130,000.00Provide general description of overall Project

The Richards Library requires critical capital improvement projects of its building to address public safety, ADA accessibility as well as the longevity and flexibility of our facility to serve our community. The proposed work consists of 4 capital improvement components that address the continued use of this historic stone facility.

1. New ADA compliant and historically accurate handrails will be installed on the front steps. In order to install the handrails the bottom cracked stone step will be removed, new concrete footers will be installed and the restored stone step will be put back in place to create a safe and even surface for the handrails.
2. A generator will be purchased and installed to maintain power at the Library during power outages. Today's more extreme weather events have led to a more unstable power grid and storms that can interrupt power supply. A generator will allow us to stay open in times of instability in order to continue serving our patrons, including being a heating and cooling center. It will also create a climate controlled environment to better preserve our collection.
3. Our current gutter system is incomplete and constantly is in need of repair. A new gutter system for the entire building will be installed to prevent water damage to the historic stone and mortar exterior.
4. An archway inside our Children's Room will be constructed and painted with a local Adirondack theme. This will create a more fun and welcoming atmosphere for children and their families.

Describe the specific Project costs that will be reimbursed by Grant  
(e.g. plumbing, HVAC, acquisition, wiring/cabling, electrical)

Remove cracked front stone step  
Pour new concrete footers  
Restore and reinstall stone step  
Fabricate and install ADA/historic handrails  
Purchase and install generator  
Dig trench to connect generator to propane tank  
Install ice stoppers on roof to stop ice and snow from fall on generator  
Remove old gutters  
Install new gutter system around the entire building  
Include heat tape to prevent winter damage to gutters  
Construct arch out of plywood and install in Children's Room  
Paint arch and corresponding wall space with a local Adirondack theme as a mural

**DASNY****Dormitory Authority  
of the State of New York****Exhibit A – Organization Information**

Grantee: The Richards Library

Program: SAM

Project ID: 29686

Grant Amount: \$130,000.00

Grantee Legal Name: Richards Library

D/B/As: \_\_\_\_\_

**IMPORTANT NOTE:** Grantee Legal Name as listed on this form (or d/b/a) should be on all paperwork submitted for administrative review requiring identification of Grantee legal name moving forward (e.g. organizational documentation listed below, Grantee Questionnaire, site control documentation, etc.)

FEIN: 14-1364588Main Business Phone: 518-623-3011

Address of  
Principal  
Place of Business  
(Street/City/Town/Zip)

36 Elm Street  
Warrensburg, NY 12885

List two main contacts for Grantee

**Contact Name #1:** Sarah Gebbie-MeaseckTitle: President of The Richards Library Board of TrusteesPhone: 518-744-7554

Ext: \_\_\_\_\_

Email: richardslibrarysarah@gmail.com**Contact Name #2:** Shelby BurkhardtTitle: Library DirectorPhone: 518-623-3011

Ext: \_\_\_\_\_

Email: war-director@sals.edu

**DASNY****Dormitory Authority  
of the State of New York****Exhibit A – Organization Information**

Grantee: The Richards Library

Program: SAM

Project ID: 29686

Grant Amount: \$130,000.00

List two officers who are authorized to sign contracts on behalf of Grantee (can be same as contacts).

**Officer #1:** Sarah Gebbie-Measeck

Title: President of The Richards Library Board of Trustees

Phone: 518-744-7554

Ext: \_\_\_\_\_

Email: richardslibrarysarah@gmail.com

**Officer #2:** Shelby Burkhardt

Title: Library Director

Phone: 518-623-3011

Ext: \_\_\_\_\_

Email: sburkhardt@sals.edu

**Supporting Documentation Required for Exhibit A**

- Articles of Incorporation (including any Amendments) or Charter
- D/B/As (if applicable)
- Scan of W-9 (2024 version) signed by hand and dated (note: please complete using grantee legal name, and for 3a if choosing 'other' please list whether NFP or municipality)
- Note: if you do not have a current (less than 1 year old) Grantee Questionnaire (GQ) on file with DASNY – DASNY will send a GQ to your authorized officers via DocuSign. The first authorized officer listed will have to complete and sign the GQ, and the second authorized officer will have to dual sign the GQ



**DASNY**

**Dormitory Authority  
of the State of New York**

**Exhibit B – Budget**

**Grantee:** The Richards Library

**Program:** SAM

**Project ID:** 29686

**Grant Amount:** \$130,000.00

[Placeholder - Complete Excel Budget provided and return with Supporting Documentation required for Exhibit B as noted on the 'Start Here' tab of the Excel]

| Cost<br>Row # | Columns to be completed by Grantee                      |                                            |
|---------------|---------------------------------------------------------|--------------------------------------------|
|               | Cost Description (limit to 1 sentence)                  | Documentation ID (Quote #<br>or Invoice #) |
| 1             | Install ADA/historic handrails on the front stone steps |                                            |
| 2             | Purchase and install generator                          | 3954                                       |
| 3             | New gutter system for entire building                   | 202427                                     |
| 4             | Construct and paint arch/mural for children's room      |                                            |
| 5             | 10% contingency                                         |                                            |
| 6             |                                                         |                                            |
| 7             |                                                         |                                            |
| 8             |                                                         |                                            |
| 9             |                                                         |                                            |
| 10            |                                                         |                                            |
| 11            |                                                         |                                            |
| 12            |                                                         |                                            |
| 13            |                                                         |                                            |
| 14            |                                                         |                                            |
| 15            |                                                         |                                            |
| 16            |                                                         |                                            |
| 17            |                                                         |                                            |
| 18            |                                                         |                                            |
| 19            |                                                         |                                            |
| 20            |                                                         |                                            |
| 21            |                                                         |                                            |
| 22            |                                                         |                                            |
| 23            |                                                         |                                            |
| 24            |                                                         |                                            |
| 25            |                                                         |                                            |
| 26            |                                                         |                                            |
| 27            |                                                         |                                            |
| 28            |                                                         |                                            |
| 29            |                                                         |                                            |
| 30            |                                                         |                                            |

Cells Below Automatically Calculate - Please do not change formulas

|                                                |           |                   |
|------------------------------------------------|-----------|-------------------|
| <b>Total Costs Submitted for Grant Funding</b> | <b>\$</b> | <b>125,707.43</b> |
| Total Approved for Bonding                     | \$        | -                 |
| Not Approved for Bonding                       | \$        | -                 |

|                                                      |           |          |
|------------------------------------------------------|-----------|----------|
| <b>Total Costs Submitted Other Funding Source(s)</b> | <b>\$</b> | <b>-</b> |
|------------------------------------------------------|-----------|----------|

|                                    |           |                   |
|------------------------------------|-----------|-------------------|
| <b>Total Project Budget</b>        | <b>\$</b> | <b>125,707.43</b> |
| Total Project Incurred to date     | \$        | -                 |
| Total Project Not Incurred to date | \$        | -                 |

[illegible]

[illegible]



## Exhibit C – Site Control

Grantee: The Richards Library

Program: SAM

Project ID: 29686

Grant Amount: \$130,000.00

Complete an Exhibit C for Each Project location with a separate form of site control documentation

Street address: 36 Elm Street

City/Town/Zip: Warrensburg, NY 12885

County: Warren

### Anticipated Useful Life Guidance

The following are general estimates for the anticipated useful life of capital assets:

- New Construction: 30 years
- Real Property Acquisition: 30 years
- Renovation: 15-20 years
- Heavy Duty Fixed Assets or Heavy Duty Vehicles: 10-15 years
- Recreational or Passenger Vehicles: 5 years
- Moveable Furniture, Fixtures, and Equipment: 3-5 years
- Laptops/Tablets: 3 years

If grant will fund a capital asset not listed in a category above, based on Grantee's prior experience, please provide a narrative of the anticipated useful life of the capital asset(s) at Project location noted above to be funded in whole or in part by Grant:

If grantee will not occupy 100% of project location listed above, please provide an explanation that includes information regarding the other entitie(s) that will have site control over project location for the duration of the economic life as noted above (eg. Sublessees, co-owners, shared common areas, etc.)

**DASNY****Dormitory Authority  
of the State of New York****Exhibit C – Site Control**

Grantee: The Richards Library

Program: SAM

Project ID: 29686

Grant Amount: \$130,000.00

**Supporting Documentation Required for Exhibit C**

For each Exhibit C submitted – choose option below and return Exhibit C with requisite supporting documentation

- ☒ Option #1: Project Location is owned by Grantee under Grantee legal name  
➤ Attach Deed

- ☐ Option #2: Project Location is leased/Subleased by Grantee under legal name

Commencement Date: \_\_\_\_\_

Lease Term End Date: \_\_\_\_\_

Renewal options extend until: \_\_\_\_\_

- Attach Lease (master and sublease if applicable)

- ☐ Option #3: Project Location will be acquired with Grant funding through the acquisition of Real Property

- Attach Real Property Certification (see appendices if applicable)
- Attach Draft contract of sale attached
- Attach Appraisal Report that meets the following requirements:
  - Appraisal is in conformity with USPAP
  - Includes analysis upon which value conclusion is based (i.e. an Appraisal Report as opposed to a Restricted Appraisal)
  - Is less than one (1) year old at time of submission or within one (1) year of Property Acquisition (Note: DASNY may in its discretion request another appraisal if market conditions dictate a more recent appraisal)
  - Appraised value is 'as is' at the time of submission or at the time of acquisition.
  - Appraisal analysis that includes on-site inspection of property to be acquired by the appraiser
  - Lists DASNY as an intended user (note if you submit an appraisal where DASNY is not listed as an intended user – DASNY may at its discretion request that appraisal be re-issued)

- ☐ Option #4: Project Location will be acquired with Grant funding through the purchase of vehicle

- Attach Vehicle Questionnaire (see appendices if applicable)

- ☐ Option #5: Project Location is owned, and Grantee is a municipality

- Attach Certificate of Municipal Site Control or Certificate of Municipal District Site Control (see appendices if applicable)



Complete an Exhibit D for Each Project location where responses to questions below vary by Project location

Note: Grantees are advised that grant-funded projects are subject to the New York State Environmental Quality review Act (SEQRA) and State Historic Preservation Act (SHPA).

Street address: 36 Elm Street

City/Town/Zip: Warrensburg, NY 12885

Does the work at Project Location include renovation, construction, or the acquisition of Real Property? (Y/N) Yes

\*\*\*\*\* Only complete section below if the answer to the question above = Yes \*\*\*\*\*

1) If project includes renovation of existing building:

a. GSF of building: 8,530

b. GSF of renovation of interior \_\_\_\_\_ and/or exterior 4,320

c. Year building constructed 1901

2) If Project is new construction, or an addition of existing building:

a. GSF of new construction \_\_\_\_\_

b. # of stories \_\_\_\_\_

c. GSF basement (if applicable) \_\_\_\_\_

3) If the Project includes acquisition of real property:

a. # Property Acres \_\_\_\_\_

b. Acquisition date/Anticipated acquisition date: \_\_\_\_\_

c. # of structures on property \_\_\_\_\_

d. Current use of property \_\_\_\_\_



- 4) Described any local planning decisions that are/were required for the proposed Project (e.g. site plan review or variance):

A local site plan review will be required by the Town of Warrensburg for the installation of the handrails. We will obtain a plan or drawing from the contractor and then we will be issued a land use development permit. This will be taken to Warren County Building Codes & Fire Prevention so we can be issued a building permit.

- 5) If Project requires Demolition:

a. GSF interior demo \_\_\_\_\_

b. GSF exterior demo \_\_\_\_\_

- 6) Describe any excavation required on site for Project:

- 7) Does the site/building have a historic status?

### Supporting Documentation Required for Exhibit D

Return Exhibit D(s) with any of the following documentation (if applicable)

- If a local municipality or other State agency has indicated that the project requires SEQR, please send a copy of the completed SEQR review (e.g., EAF parts 1,2,3, and Negative Declaration). If the SEQR process has not yet begun, please ask the Lead Agency to include DASNY as an involved agency.
- The project(s) will need to be reviewed for historic and archaeological significance pursuant to SHPA. If your project site(s) are found to have significance, DASNY Office of Environmental Affairs (OEA) may reach out to you for additional information.

If you have any questions regarding the SEQRA or SHPA process, please email [grantsseqr@dasny.org](mailto:grantsseqr@dasny.org).

**DASNY****Dormitory Authority  
of the State of New York****Exhibit E – Certifications**

Grantee: The Richards Library

Project ID: 29686

Grant Amount: \$130,000.00

**WE, THE UNDERSIGNED AUTHORIZED OFFICERS OF THE GRANTEE DO HEREBY  
WARRANT, REPRESENT, AND CERTIFY TO DASNY:**

- The The Richards Library (the "Grantee") has applied for a State and Municipalities ("SAM") Grant in the amount of \$130,000.00 (the "Grant"). The Grant will be used for the Improvements to the library (the "Project"). We understand that the Grant funds may be used only for the purposes as set forth in the Grant enabling legislation.
- The Grantee will use best efforts to maintain site control for the Project location(s), and to utilize Project for substantially the same purpose for which the Grant was intended, for the anticipated useful life of the capital asset(s) to be funded by the Grant.
- All contractors and vendors retained to perform services in connection with the Grant funded portion of the Project shall be authorized to do business in the State of New York and shall possess and maintain all professional licenses and/or certifications required to perform the tasks undertaken in connection with the Project.
- No other external funding source, including but not limited to, State or Federal restructuring loans, State or Federal grants, or grants, loans, or other funding from any other public or private source (currently or within the last six (6) years), will be used for substantially the same Project costs submitted or to be submitted for reimbursement under the Grant.
- If the Project includes vehicle purchase(s), removable equipment, or furnishings including but not limited to, computer hardware and software, air conditioning units, lab equipment, security cameras, office furniture and telephone systems, the Grantee has or will: i) develop, implement, and maintain an inventory system for tracking such items, and items will be installed, stored, or secured on property owned by and/or under the control of the Grantee; and ii) the Grantee has or will develop, implement, and maintain a usage policy for items in compliance with all State and Federal regulations or privacy laws, including use, retention, storage, or deletion of any data, images, or videos stemming from Grant funded purchase of such items if applicable.
- The Grantee will maintain accurate books and records through Project completion/payout of the Grant as well as for six (6) years from the date the Project is completed and will make those books and records available to agents, officers, and employees of DASNY during the business hours upon reasonable request.

[continued next page]



## Exhibit E – Certifications

Grantee: The Richards Library

Project ID: 29686

Grant Amount: \$130,000.00

- Disclosed below is a description of any tax-exempt bonds outstanding at Project location(s) submitted or to be submitted for review. Furthermore, the issuer of any bonds disclosed below has been notified, provided an accurate description of the Project to be undertaken to the issuer of said bonds, and a determination has been made by such issuer (or the Trustee for such bonds, as applicable), that the undertaking of the Project will not conflict with or result in a breach of any of the terms or provisions of, or constitute a default under, any indenture, mortgage, agreement, tax certificate, or other instrument to which the Grantee is a party or by which it is or any of its properties are bound. (Mark NA if not applicable)

NA

- The following supplement statements are true and accurate unless as otherwise disclosed below:
- No portion of the Project financed with grant proceeds shall be used for any of the following purposes: sectarian instruction or study, or as a place of devotional activities or religious worship, or as a facility used primarily in connection with any part of the program of a school or department of divinity for any religious denomination, or the training of ministers or other similar persons in the field of religion.
  - The Project or program shall be open to all individuals eligible to avail themselves of the Project or program without regard to religious affiliation, ethnicity, race, or sexual preference.
  - The Grantee shall take affirmative steps to ensure that information regarding the Project or program is widely disseminated to the public, which information shall include a statement that the Project or program is funded in whole or in part with public funds and that the Project or program shall be open to all eligible persons without regard to religion, ethnicity, race, or sexual preference. (Mark NA if not applicable)

NA

[continued next page]

**DASNY****Dormitory Authority  
of the State of New York****Exhibit E – Certifications**

Grantee: The Richards Library

Project ID: 29686

Grant Amount: \$130,000.00

- Disclosed below is a description of every criminal or civil litigation proceeding that has been initiated, remains pending, or has been closed that has or will have the potential to impact this Project or Project location, included but not limited to legal challenges in the form of eminent domain, environmental lawsuits and zoning regulations, workplace safety, payment disputes, or allegations of fraud or breach of fiduciary duties and obligations. Furthermore the Grantee shall disclose any criminal or civil litigation that is initiated during the course of the administration of this Grant award, including but not limited to foreclosures or other types of actions that has or will have the potential to impact the Project or Project location and the Grantee's ability to operate and use the grant funded property for its intended purpose, including through the disbursement period. (Mark NA if not applicable)

NA

- Disclosed below is a description of any confidential information submitted or to be submitted to DASNY that should be exempt from the Freedom of Information Law, and description below includes an explanation regarding the basis for such claim(s). (Mark NA if not applicable)

NA

- Tax credits will not be applied to the same Project costs as Grant Proceeds, nor will Project costs to be submitted for reimbursement by the Grant be used as an eligible basis to generate tax credits, and any tax credits applied to Project or Project location(s) are fully disclosed below. Grantee shall provide prior notice to DASNY before entering into any tax credit agreements for funding for Project or Project location(s). (Mark NA if not applicable)

NA

[continued next page]



**DASNY**

**Dormitory Authority  
of the State of New York**

**Exhibit E – Certifications**

**Grantee:** The Richards Library

**Project ID:** 29686

**Grant Amount:** \$130,000.00

- If Grantee is a State related entity, or if the Project location(s) are owned by a State related entity, the Grantee or Project location(s) related entity status to the State is disclosed below, and Grantee shall notify DASNY within six (6) months if the status of the Grantee or Project location(s) changes, or other changes occur that would impact the tax-exempt status of the Grant. (Mark NA if not applicable)

NA

- The Grantee acknowledges that Grant proceeds cannot be used to reimburse:
- deposits, advance payments, or progress payments until work is completed, or goods received by Grantee;
  - to pay down debt (i.e. any debt such as loan, line of credit, bond issue, financing agreement, etc. unless disclosed below and approved by DASNY. (Mark NA below if not applicable);
  - any interest or financing fees;
  - internal labor costs;
  - rental or leased equipment, or equipment with an anticipated useful life of less than three (3) years;
  - stockpiled materials;
  - recurring software costs, including licensing or maintenance fees; and/or
  - materials and/or services provided by another entity other than a licensed contractor or vendor.

NA

[continued next page]

**DASNY****Dormitory Authority  
of the State of New York****Exhibit E – Certifications**

Grantee: The Richards Library

Program: SAM

Project ID: 29686

Grant Amount: \$130,000.00

- We have the authority to submit this certification on behalf of the Grantee.
- By signing these documents, we certify that we are authorized officers for the Grantee.
- As Authorized Officers of the Grantee we are not related by blood, marriage, foster arrangement, or adoption, nor do we share a domicile, or share an external interest in a business connection, enterprise, or real property unrelated to Grantee organization.

FURTHERMORE, The undersigned certifies that they have or will read and understand all the documentation submitted or to be submitted to DASNY for the purposes of administration of Grant award; has supplied or will supply fully complete and accurate responses to each item identified as applicable to the Project contained herein, and shall notify DASNY of any material changes of fact(s) that occur throughout economic useful life of the capital assets to be funded in whole or in part by Grant; is knowledgeable about the business operations of the Grantee; understands that DASNY and DASNY's outside bond counsel will rely on the information submitted to complete the required reviews and determine whether the Project can be funded with the proceeds of tax-exempt bonds issued by DASNY.

Please sign this certification by typing your full name into signature line(s) below as indicated. Please return these documents to DASNY from the Grantee's organizational email address and retain the original copies for production to DASNY if requested. By typing electronic signatures below, the Grantee's designees will be providing validly binding legal documents, just the same as a pen-and-paper signature.

Sarah Gebbie-Measeck

Authorized Officer #1 Signature (type)

President of The Richards Library Board of Trustees

Title (type)



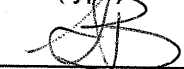
Dated 3/26/26

Shelby Burkhardt

Authorized Officer #2 Signature (type)

Library Director

Title (type)



Dated March 26, 2026



Thursday, February 19, 2026

Re: **Exterior Masonry Restoration**  
The Richards Library  
39 Elm Street  
Warrensburg, NY 12885

PCC Contracting, Inc. proposes the following for the supply of all supervision, labor, material, and equipment necessary to perform the detailed work below for the lump sum of **\$49,830.00 (Forty-Nine Thousand Eight Hundred Thirty Dollars)**.  
*If the project is not New York sales tax exempt, add \$3,488.10*

**Scope of Work:**

- 1) ***Historically Correct Restoration of Stone Steps***
  - a. *To correctly install new ADA-compliant railings, it is necessary to replace the concrete footing to bring the stone steps into ADA compliance.*
    - i. *Remove stone treads and landing.*
    - ii. *Remove failed concrete foundation.*
    - iii. *Form and place a new concrete foundation.*
    - iv. *Restore stone treads and landing.*
  - b. *Historically correct installation of ADA-compliant handrails.*
    - i. *3 railings: right, left, and middle.*
    - ii. *Design to be determined.*

**Qualifications:**

**Excludes:** sales tax, permits, bond fees, engineering, MEP relocation/removals, hazardous material identification/abatement/removal, temporary heat/enclosures, water usage fees, electrical usage fees, grass and pavement restoration, DBE requirements, and anything not specifically included.

The proposal is subject to acceptance within 30 days at the above-quoted prices and execution of a mutually acceptable contract. Thank you for the opportunity to present this proposal. Please call me at (518)441-4436 with any questions.

Sincerely,

**PCC Contracting, Inc.**

*Monty Montgomery*

Monty Montgomery  
Project Manager

# GORE ELECTRIC SERVICES LLC

3239 STATE RT 28  
NORTH CREEK, NY 12853  
518-251-3990

## Estimate

| Date      | Estimate # |
|-----------|------------|
| 2/27/2026 | 3954       |

| Name / Address                                                 |
|----------------------------------------------------------------|
| SARAH GEBBIE-MEASECK<br>32 ELM STREET<br>WARRENSBURG, NY 12883 |

|                                  |                                                           |                                          |
|----------------------------------|-----------------------------------------------------------|------------------------------------------|
| EMAIL:<br>goreelectric@gmail.com | OFFICE # 518-251-3990<br>EMERGENCY ONLY #<br>518-260-5450 | Website:<br>www.goreelectricservices.com |
|----------------------------------|-----------------------------------------------------------|------------------------------------------|

| Project |
|---------|
|         |

| Description                                                                                                                                                                                                                                                                                                                                                            | Qty | Rate      | U/M | Total      |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|-----------|-----|------------|
| ESTIMATE TO INSTALL 60KW GENERAC<br>GENERATOR AT 36 ELM STREET, WARRENSBURG                                                                                                                                                                                                                                                                                            |     |           |     |            |
| 60KW GENERAC GENERATOR - XG06045 ANAC                                                                                                                                                                                                                                                                                                                                  | 1   | 29,000.00 |     | 29,000.00T |
| GENERATOR INSTALL                                                                                                                                                                                                                                                                                                                                                      | 1   | 3,500.00  |     | 3,500.00   |
| GENERATOR WIRE - 120FT TTL                                                                                                                                                                                                                                                                                                                                             | 1   | 2,000.00  |     | 2,000.00T  |
| DITCH TRENCHING FOR WIRE AND PROPANE                                                                                                                                                                                                                                                                                                                                   | 1   | 1,000.00  | ea  | 1,000.00T  |
| ATS 400 AMP                                                                                                                                                                                                                                                                                                                                                            | 1   | 3,200.00  |     | 3,200.00T  |
| WHOLE HOUSE SURGE PROTECTION                                                                                                                                                                                                                                                                                                                                           | 1   | 300.00    |     | 300.00T    |
| COLD WEATHER PACKAGE                                                                                                                                                                                                                                                                                                                                                   | 1   | 450.00    |     | 450.00T    |
| MOBILE DEVICE FOR GENERATOR AND CELLULAR<br>SUBSCRIPTION \$150/YR                                                                                                                                                                                                                                                                                                      | 1   | 475.00    |     | 475.00T    |
| TANK MONITOR DEVICE AND ANNUAL<br>SUBSCRIPTION \$50/YR                                                                                                                                                                                                                                                                                                                 | 1   | 350.00    |     | 350.00T    |
| THIS ESTIMATE DOES NOT INCLUDE THE COST OF<br>PROPANE. PROPANE COSTS WILL BE BILLED TO<br>YOU DIRECTLY FROM YOUR PROVIDER.<br>*A NON REFUNDABLE \$1000.00 DEPOSIT IS<br>REQUIRED ON ACCEPTANCE OF THE ESTIMATE.<br>** HALF DOWN IS REQUIRED PRIOR TO<br>INSTALLATION, THE REMAINING BALANCE IS DUE<br>AT THE TIME OF INSTALLATION.<br>***ESTIMATE VALID FOR 30 DAYS*** |     | 0.00      |     | 0.00T      |
|                                                                                                                                                                                                                                                                                                                                                                        |     | 0.00      |     | 0.00       |

|                                               |                                                                                                                                                         |                         |             |
|-----------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|-------------|
| THANK YOU FOR<br>CONSIDERING GORE<br>ELECTRIC | We do not ask for wire transfers. Payment methods are<br>credit card, check or cash only. All payments should be<br>made to Gore Electric Services LLC. | <b>Subtotal</b>         | \$40,275.00 |
|                                               |                                                                                                                                                         | <b>Sales Tax (0.0%)</b> | \$0.00      |
|                                               |                                                                                                                                                         | <b>Total</b>            | \$40,275.00 |

# ESTIMATE



## Prepared For

RICHARDS LIBRARY  
36 Elm St, Warrensburg, NY 12885  
(518) 744-7554

### Adk Gutter Pro

5 Buttermilk Falls Rd, Fort Ann, NY 12827  
Phone: (518) 480-7212  
Email: adkgutterfilters@gmail.com

Estimate # 202427  
Date 03/06/2026

| Description                                                         | Total              |
|---------------------------------------------------------------------|--------------------|
| 6 INCH GUTTER ROYAL BROWN AND ARROW GUTTER GUARDS and fix heat tape | \$7,350.00         |
| hydro flow covers 6 inch                                            | \$3,850.00         |
| Heat tape                                                           | \$3,700.00         |
| <b>Subtotal</b>                                                     | <b>\$14,900.00</b> |
| <b>Total</b>                                                        | <b>\$14,900.00</b> |

### Notes:

New install of gutters and downspouts in the font main entrance and side entrance and back of building alson where no unite is geting installed installing gutter guards on the entire backside of building

Thank you for your time yesterday sarah it was a pleasure meeting you please call me if you have any questions

By signing this document, the customer agrees to the services and conditions outlined in this document.

Hannah Williams Artistry

Hannah Williams, Muralist & Public Art Consultant

Queensbury, NY

[hanwilliamsart@gmail.com](mailto:hanwilliamsart@gmail.com) 518-232-6441 Hanwilliamsart.com

Date: 3/25/26

## **Mural Project Budget Proposal**

Client: Richard's Library

Location: 36 Elm Street, Warrensburg, NY

This proposal outlines the scope and total project cost for a custom interior mural installation at Richard's Library. The mural will be designed specifically for the library's archway and will feature Adirondack wildlife, thoughtfully composed to reflect the natural character of the region. The design will incorporate dimensional elements, including custom carpentry cutouts, to create added depth and visual impact.

The total mural surface area is approximately 185.14 square feet, which includes additional square footage for the wood cutouts. This project includes concept development, design, surface preparation, execution of the mural, coordination and integration of dimensional components, and appropriate finishing processes for durability and longevity within an interior environment: **\$6,774.48**

As a public-facing installation within a library setting, this mural is intended to serve as both a visual enhancement and an educational element, celebrating regional ecology and creating an engaging, welcoming environment for visitors of all ages.

Please note that all carpentry elements associated with the dimensional features will be completed by a qualified professional. Costs associated with fabrication and installation of these elements are approximately: **\$2,500.00**

The total project cost for this mural and wood cutouts is:

**\$9,274.48**

This figure reflects the full scope of work including design, travel, materials, anticipated project-related costs, and coordination of additional professional services.

## **Artist Qualifications**

Hannah Williams is a full-time professional muralist with over 12 years of experience specializing in large-scale public and community-based artwork. She has completed more than 50 murals throughout the Capital Region and Adirondack areas, working with municipalities, schools, and local businesses.

Williams is fully insured, lift-certified, and experienced in both interior and exterior mural applications, including proper surface preparation and the use of high-quality materials designed for longevity. Her work focuses on creating meaningful, site-specific designs that enhance public spaces and foster community connection.

Please feel free to reach out with any questions or if additional documentation is needed to support grant or funding applications.

Sincerely,

Hannah Williams

Hannah Williams Artistry

**Annual Report For Public And Association Libraries**

The State Library due date for the annual reports will be April 16, 2026.

[Instructions](#)

**1. GENERAL LIBRARY INFORMATION**

Library / Director Information

The report saves automatically after every new entry or change.

Multiple users can view and edit reports at the same time.

Report all information in Part 1 as of December 31, 2025, except for questions related to the current library director/manager (questions 1.37 through 1.44).

|                                                                                                                              |                               |
|------------------------------------------------------------------------------------------------------------------------------|-------------------------------|
| 1.1Library ID Number                                                                                                         | 7600636770                    |
| 1.2Library Name                                                                                                              | RICHARDS LIBRARY              |
| 1.3Name Status (State use only)                                                                                              | no change from the prior year |
| 1.4Structure Status (State use only)                                                                                         | no change                     |
| 1.5Community                                                                                                                 | Warrensburg                   |
| 1.6Beginning Fiscal Reporting Year                                                                                           | 01/01/2025                    |
| 1.7Ending Fiscal Reporting Year                                                                                              | 12/31/2025                    |
| 1.8Is the library now reporting on a different fiscal year than it reported on in the previous Annual Report?                | No                            |
| 1.9If yes, please indicate the beginning date of library's new reporting year. Enter N/A if No was answered to Question 1.8. | N/A                           |
| 1.10Please indicate the ending date of library's new reporting year. Enter N/A if No was answered to Question 1.8.           | N/A                           |
| 1.11Beginning Local Fiscal Year                                                                                              | 01/01/2025                    |
| 1.12Ending Local Fiscal Year                                                                                                 | 12/31/2025                    |
| 1.13Address Status                                                                                                           | no change from the prior year |
|                                                                                                                              |                               |

|                                                                                                                                                                                              |                                                                               |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------|
| 1.14Street Address                                                                                                                                                                           | 36 ELM STREET                                                                 |
| 1.15City                                                                                                                                                                                     | WARRENSBURG                                                                   |
| 1.16Zip Code                                                                                                                                                                                 | 12885                                                                         |
| 1.17Mailing Address                                                                                                                                                                          | 36 ELM STREET                                                                 |
| 1.18City                                                                                                                                                                                     | WARRENSBURG                                                                   |
| 1.19Zip Code                                                                                                                                                                                 | 12885                                                                         |
| 1.20Telephone Number (enter 10 digits only and hit the Tab key; enter M (Missing) if no telephone number)                                                                                    | 5186233011                                                                    |
| 1.21E-Mail Address (enter M (Missing) if no E-Mail)                                                                                                                                          | war-director@sals.edu                                                         |
| 1.22Library Home Page URL (Enter M (Missing) if no home page URL)                                                                                                                            | <a href="https://therichardslibrary.com/">https://therichardslibrary.com/</a> |
| 1.23Population Chartered to Serve (per 2020 Census)                                                                                                                                          | 5,054                                                                         |
| 1.24Indicate the type of library as stated in the library's charter (select one):                                                                                                            | ASSOCIATION                                                                   |
| 1.25Indicate the area chartered to serve as stated in the library's charter (select one):                                                                                                    | Other                                                                         |
| 1.26During the reporting year, has there been any change to the library's legal service area boundaries? Changes must be the result of a Regents charter action. Answer Y for Yes, N for No. | N                                                                             |
| 1.27Indicate the type of charter the library currently holds (select one):                                                                                                                   | Absolute                                                                      |
| 1.28Date the library was granted its absolute charter or the date of the provisional charter if the library does not have an absolute charter                                                | 07/11/1901                                                                    |
| 1.29Date the library was last registered                                                                                                                                                     | 10/17/1907                                                                    |
| 1.30Federal Employer Identification Number                                                                                                                                                   | 141364588                                                                     |
| 1.31County                                                                                                                                                                                   | WARREN                                                                        |
| 1.32School District                                                                                                                                                                          | Warrensburg Central School                                                    |
| 1.33Town/City                                                                                                                                                                                | Warrensburg                                                                   |
| 1.34Library System                                                                                                                                                                           | Southern Adirondack Library System                                            |

-

THESE QUESTIONS ARE FOR NYC LIBRARIES ONLY. PLEASE PROCEED TO THE NEXT QUESTION.

|                                 |  |
|---------------------------------|--|
| 1.35aPresident/CEO Name         |  |
| 1.35bPresident/CEO Phone Number |  |
| 1.35cPresident/CEO Email        |  |

-  
For questions 1.36 through 1.42, report all information for the current library director/manager.

|                                                                                                                                                                                                                                                 |                     |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------|
| 1.36First Name of Library Director/Manager                                                                                                                                                                                                      | Shelby              |
| 1.37Last Name of Library Director/Manager                                                                                                                                                                                                       | Burkhardt           |
| 1.38NYS Public Librarian Certification Number                                                                                                                                                                                                   | N/A                 |
| 1.39What is the highest education level of the library manager/director?                                                                                                                                                                        | Bachelor's Degree   |
| 1.40If the library manager/director holds a Master's Degree, is it a Master's Degree in Library/Information Science?                                                                                                                            | N/A                 |
| 1.41Do all staff working in the budgeted Librarian (certified) positions reported in 6.6 have an active NYS Public Librarian Certificate? If No, list the name and e-mail address of each staff member without an active certificate in a Note. | N/A                 |
| 1.42E-mail Address of the Director/Manager                                                                                                                                                                                                      | sburkhardt@sals.edu |
| 1.43Does the library charge fees for library cards to people residing outside the system's service area?                                                                                                                                        | N                   |

#### Public Votes / Contracts

|                                                                                                                                                                                                                                                                                               |   |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|
| 1.44Was all or part of the library's funding subject to a public vote(s) held during Calendar Year 2025? (Please respond even if the vote was unsuccessful). Enter Y for Yes, N for No. If Yes, complete one record for the public vote from each funding source. If no, go to question 1.45. | Y |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|

-  
Please Note: last year's answers for repeating groups cannot be displayed.

| 1.44a Name of municipality or district holding the public vote | 1.44b Indicate the type of municipality or district holding the public vote | 1.44c Date the vote was held(mm/dd/2025 ) | 1.44d Was the vote successful? Y/N | 1.44e What type of public vote was it? | 1.44f.i Most recent prior year approved appropriation from a public vote: | 1.44f.ii Proposed increase in appropriation as a result of the vote held on the date reported in question number 3: | 1.44f.iii Total proposed appropriation (manually sum of 6a and 6b): |
|----------------------------------------------------------------|-----------------------------------------------------------------------------|-------------------------------------------|------------------------------------|----------------------------------------|---------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------|
| Warrensburg                                                    | School District                                                             | 05/20/2025                                | Yes                                | school district                        | \$265,476                                                                 | \$4,048                                                                                                             | \$269,524                                                           |

|                            |                                 |
|----------------------------|---------------------------------|
| Central School<br>District | ballot proposition<br>(Ed. Law) |
|----------------------------|---------------------------------|

-  
This question should only be answered if "No" was answered in Q1.44 OR the library has votes from different municipalities/districts that were held in different years, both current and prior.

|                                                                                                                                                                                                                                                                      |   |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|
| 1.45Did the library receive funding from an appropriation which was approved by public vote in a prior year? (Prior to Calendar Year 2025) Enter Y for Yes, N for No. If Yes, complete one record for the vote from each funding source. If No, go to question 1.46. | N |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|

-  
Please Note: last year's answers for repeating groups cannot be displayed.

|                                                                |                                                                             |                                                           |                                        |                                                                                                                       |
|----------------------------------------------------------------|-----------------------------------------------------------------------------|-----------------------------------------------------------|----------------------------------------|-----------------------------------------------------------------------------------------------------------------------|
| 1.45a Name of municipality or district holding the public vote | 1.45b Indicate the type of municipality or district holding the public vote | 1.45c Date the last successful vote was held (mm/dd/yyyy) | 1.45d What type of public vote was it? | 1.45e What was the total dollar amount of the appropriation from tax dollars resulting from the last successful vote? |
|----------------------------------------------------------------|-----------------------------------------------------------------------------|-----------------------------------------------------------|----------------------------------------|-----------------------------------------------------------------------------------------------------------------------|

Contractual Agreements

|                                                                                                                                                                                                                                                                                                 |   |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|
| 1.46Does the reporting library have a contractual agreement with a municipality or district to provide library services to residents of an area not served by a chartered library? Enter Y for Yes, N for No. If yes, please complete one record for each contract. If no, go to question 1.47. | N |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|

-  
Please Note: last year's answers for repeating groups cannot be displayed.

|                           |                         |                         |                        |                 |
|---------------------------|-------------------------|-------------------------|------------------------|-----------------|
| 1.46a Name of contracting | 1.46b Is this a written | 1.46c Population of the | 1.46d Dollar amount of | 1.46e Enter the |
|---------------------------|-------------------------|-------------------------|------------------------|-----------------|

|                          |                        |                                         |          |                                                               |
|--------------------------|------------------------|-----------------------------------------|----------|---------------------------------------------------------------|
| municipality or district | contractual agreement? | geographic area served by this contract | contract | appropriate code for range of services provided (select one): |
|--------------------------|------------------------|-----------------------------------------|----------|---------------------------------------------------------------|

### Unusual Circumstances

|                                                                                                                                                                                                                                                                                                                                                                              |   |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|
| 1.47 For the reporting year, has the library experienced any unusual circumstance(s) that affected the statistics reported (e.g., natural disaster, fire, closed for renovations, massive weeding of collection, etc.)? If yes, please annotate explaining the circumstance(s) and the impact on the library using the Note; if no, please go to Part 2, Library Collection. | N |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|

## 2. LIBRARY COLLECTION

### Physical Holdings

Report holdings, additions, and subscriptions as of the end of the fiscal year reported in Questions 1.6 and 1.7 in Part 1. Please read general information instructions below before completing this section.

<https://ny.countingopinions.com/docs/ny/Instructions2025AnnualReportPublicAssociationLibraries.pdf>

This section of the survey (2.1-2.16) collects data on selected types of materials.

It does not cover all materials (i.e., microforms, loose sheet music, maps, and pictures) for which expenditures are reported under Print Materials Expenditures, Electronic Materials Expenditures, and Other Materials Expenditures (questions 12.6, 12.7 and 12.8). Under this category report only items that have been purchased, leased or licensed by the library, a consortium, the state library, a donor or other person or entity. Included items must only be accessible with a valid library card or at a physical library location; inclusion in the catalog is not required. Do not include items freely available online.

---

**PRINT MATERIALS****Cataloged Books**

|                                                       |        |
|-------------------------------------------------------|--------|
| 2.1Adult Fiction Books                                | 5,027  |
| 2.2Adult Non-fiction Books                            | 4,151  |
| 2.3Total Adult Books (Total questions 2.1 & 2.2)      | 9,178  |
| 2.4Children's Fiction Books                           | 3,590  |
| 2.5Children's Non-fiction Books                       | 2,093  |
| 2.6Total Children's Books (Total questions 2.4 & 2.5) | 5,683  |
| 2.7Total Cataloged Books (Total questions 2.3 & 2.6)  | 14,861 |

**Other Print Materials**

|                                                                    |        |
|--------------------------------------------------------------------|--------|
| 2.8Total Uncataloged Books                                         | 317    |
| 2.9Total Print Serials                                             | 35     |
| 2.10All Other Print Materials                                      | 101    |
| 2.11Total Other Print Materials (Total questions 2.8 through 2.10) | 453    |
| 2.12Total Print Materials (Total questions 2.7 and 2.11)           | 15,314 |

**ALL OTHER MATERIALS**

|                                                                       |       |
|-----------------------------------------------------------------------|-------|
| 2.13Audio - Physical Units                                            | 1,102 |
| 2.14Video - Physical Units                                            | 2,521 |
| 2.15Other Circulating Physical Items                                  | 5     |
| 2.16Total Other Physical Materials(Total questions 2.13 through 2.15) | 3,628 |

**Grand Total / Additions to Holdings**

|                                                          |        |
|----------------------------------------------------------|--------|
| 2.17GRAND TOTAL HOLDINGS (Total questions 2.12 and 2.16) | 18,942 |
|----------------------------------------------------------|--------|

**ADDITIONS TO HOLDINGS - Do not subtract withdrawals or discards.**

|                                                         |     |
|---------------------------------------------------------|-----|
| 2.18Cataloged Books                                     | 602 |
| 2.19All Other Print Materials                           | 16  |
| 2.20All Other Materials                                 | 152 |
| 2.21Total Additions (Total questions 2.18 through 2.20) | 770 |

**3. LIBRARY PROGRAMS, POLICIES, AND SERVICES**

Report all information on questions 3.1 through 3.3 and 3.17a through 3.34e as of the last day of the fiscal year stated in 1.6. and 1.7 in Part 1; report information on questions 3.4 through 3.16 and 3.35 through 3.77b based on the 2025 calendar year. Please [click here](#) to read general instructions before completing this section.

Please report information on LIBRARY USE as of the end of the fiscal year reported in Questions 1.6 and 1.7 in Part 1.

**LIBRARY USE**

|                                                                                                                                     |              |
|-------------------------------------------------------------------------------------------------------------------------------------|--------------|
| 3.1Library visits (total annual attendance)                                                                                         | 10,396       |
| 3.1aRegarding the number of Library Visits entered, is this an annual count or an annual estimate based on a typical week or weeks? | Annual Count |
| 3.2Registered resident borrowers                                                                                                    | 1,298        |
| 3.3Registered non-resident borrowers                                                                                                | 166          |

**WRITTEN POLICIES (Answer Y for Yes, N for No)**

Please report information on WRITTEN POLICIES as of 12/31/25.

Answers are prefilled with the prior year's answers. If a change is made please add a note of explanation.

|                                                                                |   |
|--------------------------------------------------------------------------------|---|
| 3.4Does the library have an open meeting policy?                               | Y |
| 3.5Does the library have an Internet use policy?                               | Y |
| 3.6Does the library have a board-approved conflict of interest policy?         | Y |
| 3.7Does the library have a board-approved whistle blower policy?               | Y |
| 3.8Does the library have a board-approved sexual harassment prevention policy? | Y |

**ACCESSIBILITY (Answer Y for Yes, N for No)**

Please report information on ACCESSIBILITY as of 12/31/25.

|                                                                                                                                                                 |   |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|---|
| 3.11Does the library provide service to persons who cannot visit the library (homebound persons, persons in nursing homes, persons in jail, etc.)? <sup>1</sup> | Y |
| 3.12Does the library have assistive devices for persons who are deaf and hearing impaired (TTY/TDD)?                                                            | N |
| 3.13Does the library have large print books?                                                                                                                    | Y |
| 3.14Does the library have assistive technology for people who are visually impaired or blind?                                                                   | Y |

**3.15 - If so, what do you have? If no, go to next question**

|                                                                                                                                                                                                                                              |   |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|
| screen reader, such as JAWS, Windoweyes or NVDA <sup>2</sup>                                                                                                                                                                                 | Y |
| refreshable Braille commonly referred to as a refreshable Braille display                                                                                                                                                                    | N |
| screen magnification software, such as Zoomtext                                                                                                                                                                                              | N |
| electronic scanning and reading software, such as OpenBook                                                                                                                                                                                   | N |
| 3.16Is the library registered for services from either the New York State Talking Book and Braille Library (New York State Library, Albany) or the Andrew Heiskell Braille and Talking Book Library (The New York Public Library, New York)? | N |

**Library Sponsored Programs**

**LIVE PROGRAM SESSIONS and ATTENDANCE**

Report information on Library Program Sessions and Attendance based on the fiscal reporting year entered for Questions 1.6 and 1.7 in Section 1 General Library Information.

## Live Program Sessions

A live program session is any planned event which introduces the group attending to library services or which provides information to participants. Program sessions may cover use of the library, library services, or library tours. Program sessions may also provide cultural, recreational, or educational information. Examples of these types of program sessions include, but are not limited to, film showings, lectures, story hours, literacy programs, citizenship classes, and book discussions.

For specific examples of live and prerecorded programs (previously called synchronous and asynchronous), please refer to the chart in Instructions.

**IMPORTANT:** If no programs within a category were offered/attended, enter 0. If they were offered/attended but that data is not available, enter M (Missing). N/A should not be entered for any programs.

**NOTE:** Summer Reading, Early Literacy, Adult Literacy, ESOL, and Digital Literacy programs are subsets of Live and Prerecorded programs and should be entered in those sections as well as in the appropriate subsequent section.

|                                                                                                     |     |
|-----------------------------------------------------------------------------------------------------|-----|
| 3.17aNumber of Sessions Targeted at Children Ages 0-5 <sup>3</sup>                                  | 29  |
| 3.17bAttendance at Sessions Targeted at Children Ages 0-5                                           | 257 |
| 3.18aNumber of Sessions Targeted at Children Ages 6-11 <sup>4</sup>                                 | 28  |
| 3.18bAttendance at Sessions Targeted at Children Ages 6-11                                          | 327 |
| 3.19aNumber of Sessions Targeted at Young Adults Ages 12-18 <sup>5</sup>                            | 2   |
| 3.19bAttendance at Sessions Targeted at Young Adults Ages 12-18 <sup>6</sup>                        | 1   |
| 3.20aNumber of Sessions Targeted at Adults Age 19 or Older <sup>7</sup>                             | 52  |
| 3.20bAttendance at Sessions Targeted at Adults Age 19 or Older                                      | 241 |
| 3.21aNumber of General Interest Program Sessions <sup>8</sup>                                       | 28  |
| 3.21bAttendance at General InterestProgram Sessions                                                 | 168 |
| 3.22Total Sessions of Live Programs Categorized by Age (sum of 3.17a, 3.18a, 3.19a, 3.20a, 3.21a)   | 139 |
| 3.23Total Attendance at Live Programs Categorized by Age (sum of 3.17b, 3.18b, 3.19b, 3.20b, 3.21b) | 994 |

**Live Programs Categorized by Venue**

|                                                                                         |     |
|-----------------------------------------------------------------------------------------|-----|
| 3.24aTotal Live Onsite Program Sessions <sup>9</sup>                                    | 118 |
| 3.24bTotal Live Onsite Program Attendance                                               | 658 |
| 3.25aTotal Live Offsite Program Sessions                                                | 21  |
| 3.25bTotal Live Offsite Program Attendance                                              | 336 |
| 3.26aTotal Live Virtual Program Sessions <sup>10</sup>                                  | 0   |
| 3.26bTotal Live Virtual Program Attendance                                              | 0   |
| 3.27Total Sessions of Live Programs Categorized by Venue (sum of 3.24a, 3.25a, 3.26a)   | 139 |
| 3.28Total Attendance at Live Programs Categorized by Venue (sum of 3.24b, 3.25b, 3.26b) | 994 |

**Prerecorded and One-on-One Programs**

|                                                                     |     |
|---------------------------------------------------------------------|-----|
| 3.29Total Number of Prerecorded Program Presentations               | 0   |
| 3.30Total Views of Prerecorded Program Presentations within 30 Days | 0   |
| 3.31One-on-One Program Sessions <sup>11</sup>                       | 286 |
| 3.32Attendance at One-on-One Program Sessions <sup>12</sup>         | 286 |

**Teen-Led Promotions**

|                                                                                                                                                                                                                                                             |     |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| 3.33Did your library offer teen-led activities during the 2025 calendar year?                                                                                                                                                                               | N   |
| 3.34aDo library staff, trustees and/or volunteers reach outside of the library to promote library programs and services through group presentations, information tables and/or other similar educational activities sponsored by the Library? <sup>13</sup> | Yes |
| 3.34bDoes your library use Facebook for promotion?                                                                                                                                                                                                          | Yes |
| 3.34cDoes your library use Instagram for promotion?                                                                                                                                                                                                         | No  |
| 3.34dDoes your library use Twitter/X for promotion?                                                                                                                                                                                                         | No  |
| 3.34eDoes your library use TikTok for promotion?                                                                                                                                                                                                            | No  |

**SUMMER READING PROGRAM**

Please report information on SUMMER READING PROGRAMS for the 2025 calendar year. These are a subset of Library Sponsored Programs and should also be entered there.

|                                                                                                                                      |     |
|--------------------------------------------------------------------------------------------------------------------------------------|-----|
| 3.35Did the library offer a summer reading program in 2025? (Enter Y for Yes, N for No) If entering no, proceed to the next section. | Y   |
| 3.36Library outlets offering the summer reading program                                                                              | 1   |
| 3.37Children registered for the library's summer reading program                                                                     | 20  |
| 3.38Young adults registered for the library's summer reading program                                                                 | 1   |
| 3.39Adults registered for the library's summer reading program                                                                       | 0   |
| 3.40Total number registered for the library's summer reading program (total 3.37 + 3.38 + 3.39)                                      | 21  |
| 3.41aChildren's program sessions - Summer 2025                                                                                       | 13  |
| 3.41bChildren's program attendance - Summer 2025                                                                                     | 116 |
| 3.42aYoung adult program sessions - Summer 2025                                                                                      | 1   |
| 3.42bYoung adult program attendance - Summer 2025                                                                                    | 1   |
| 3.43aAdult program sessions - Summer 2025                                                                                            | 2   |
| 3.43bAdult program attendance - Summer 2025                                                                                          | 11  |
| 3.44Total program sessions - Summer 2025 (total 3.41a + 3.42a + 3.43a)                                                               | 16  |
| 3.45Total program attendance - Summer 2025 (total 3.41b + 3.42b + 3.43b)                                                             | 128 |
| 3.46Did the library use the Summer Reading at New York Libraries name and/or logo?                                                   | Y   |
| 3.47Did the library use the Collaborative Summer Library Program (CSLP) Manual, provided through the New York State Library?         | Y   |

**COLLABORATORS**

|                                                   |   |
|---------------------------------------------------|---|
| 3.48Public school district(s) and/or BOCES        | 1 |
| 3.49Non-public school(s)                          | 0 |
| 3.50Childcare center(s)                           | 1 |
| 3.51Summer camp(s)                                | 0 |
| 3.52Municipality/Municipalities                   | 0 |
| 3.53Literacy provider(s)                          | 0 |
| 3.54Other (describe using the State note)         | 0 |
| 3.55Total Collaborators (total 3.48 through 3.54) | 2 |

**Early Literacy**

Please report information on EARLY LITERACY for the 2025 calendar year. These are a subset of Library Sponsored Programs and should also be entered there.

|                                                                                                                                        |   |
|----------------------------------------------------------------------------------------------------------------------------------------|---|
| 3.56Did the library offer early literacy programs in 2025? (Enter Y for Yes, N for No)<br>If entering no, proceed to the next section. | Y |
|----------------------------------------------------------------------------------------------------------------------------------------|---|

**EARLY LITERACY PROGRAMS**

|                                                              |     |
|--------------------------------------------------------------|-----|
| 3.57aFocus on birth - school entry (kindergarten) sessions   | 12  |
| 3.57bFocus on birth - school entry (kindergarten) attendance | 218 |
| 3.58aFocus on parents & caregivers sessions                  | 0   |
| 3.58bFocus on parents & caregivers attendance                | 0   |
| 3.59aCombined audience sessions <sup>14</sup>                | 13  |
| 3.59bCombined audience attendance                            | 39  |
| 3.60Total Sessions                                           | 25  |
| 3.61Total Attendance                                         | 257 |

**3.62 - Collaborators (check all that apply):**

|                                                           |     |
|-----------------------------------------------------------|-----|
| 3.62a.Childcare center(s)                                 | Yes |
| 3.62b.Public School District(s) and/or BOCES              | Yes |
| 3.62c.Non-Public School(s)                                | No  |
| 3.62d.Health care providers/agencies                      | No  |
| 3.62e.Other (describe using the State note) <sup>15</sup> | Yes |

**Adult Literacy**

Please report information on ADULT LITERACY for the 2025 calendar year. These are a subset of Library Sponsored Programs and should also be entered there.

**ADULT LITERACY**

|                                                                                                                                        |    |
|----------------------------------------------------------------------------------------------------------------------------------------|----|
| 3.63Did the library offer adult literacy programs in 2025? (Enter Y for Yes, N for No)<br>If entering no, proceed to the next section. | Y  |
| 3.64aTotal group program sessions <sup>16</sup>                                                                                        | 11 |
| 3.64bTotal group program attendance                                                                                                    | 70 |
| 3.65aTotal one-on-one program sessions                                                                                                 | 0  |
| 3.65bTotal one-on-one program attendance                                                                                               | 0  |

**3.66 - Collaborators (check all that apply)**

|                                                        |    |
|--------------------------------------------------------|----|
| 3.66a.Literacy NY (Literacy Volunteers of America)     | No |
| 3.66b.Public School District(s) and/or BOCES           | No |
| 3.66c.Non-Public Schools                               | No |
| 3.66d.Other (see instructions and describe using Note) | No |

**ESOL / Digital Literacy**

Please report information on ESOL, for the 2025 calendar year. These are a subset of Library Sponsored Programs and should also be entered there.

**ENGLISH FOR SPEAKERS OF OTHER LANGUAGES (ESOL) PROGRAMS**

|                                                                                                                                                                                   |   |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|
| 3.67Did the library offer English for Speakers of Other Languages (ESOL) programs in 2025? (Enter Y for Yes, N for No) If entering no, proceed to the next section. <sup>17</sup> | N |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|

**DIGITAL LITERACY**

Please report information on DIGITAL LITERACY for the 2025 calendar year. These are a subset of Library Sponsored Programs and should also be entered there.

|                                                                                                                                       |    |
|---------------------------------------------------------------------------------------------------------------------------------------|----|
| 3.75Did the library offer digital literacy programs in 2025? (Enter Y for Yes, N for No) If entering no, proceed to the next section. | Y  |
| 3.76aTotal group program sessions <sup>18</sup>                                                                                       | 19 |
| 3.76bTotal group program attendance                                                                                                   | 14 |
| 3.77aTotal one-on-one program sessions                                                                                                | 38 |
| 3.77bTotal one-on-one program Attendance                                                                                              | 38 |

**4. LIBRARY TRANSACTIONS**

Report all transactions as of the end of the fiscal year reported in Questions 1.6 and 1.7 in Part 1. (Please note: Internal Library usage is not considered part of circulation.)

**Circulation / Reference Transactions**

- The total annual circulation of all physical library materials of all types, including renewals.
- Count all physical materials in all formats that are charged out for use outside the library. Circulation of uncataloged books, and other non-book materials should be reported in the appropriate category - Adult or Children's Other Materials. Include non-traditional items that are charged out, such as cake pans, tools, Roku sticks, etc. under Circulation of Other Materials.
- Interlibrary loan transactions included are only items borrowed for users. Include items borrowed for users of the reporting library through interlibrary loan (materials received) and charged out for home use by the reporting library's patrons.
- Items loaned in bulk (bulk loans) by your library to schools or other institutions for circulation by the school or institution are counted as one circulation per item (the initial loan from your library to the school or institution).
- Do not include items checked out to another library. Items sent to another autonomous library as interlibrary loan are not counted as circulation by the reporting library.
- Items sent from one outlet of the reporting library to another, i.e., from main library to a branch, are not counted as circulation.
- Items packaged together as a unit which are generally checked out as a unit, should be counted once for each loan of the unit ( e.g., two compact discs, two films, two videocassettes, a kit or a set of 25slides).

**CATALOGED BOOK CIRCULATION**

|                                                                |       |
|----------------------------------------------------------------|-------|
| 4.1Adult Fiction Books                                         | 5,351 |
| 4.2Adult Non-fiction Books                                     | 1,682 |
| 4.3Total Adult Books (Total questions 4.1 & 4.2)               | 7,033 |
| 4.4Children's Fiction Books                                    | 2,309 |
| 4.5Children's Non-fiction Books                                | 525   |
| 4.6Total Children's Books (Total questions 4.4 & 4.5)          | 2,834 |
| 4.7Total Cataloged Book Circulation (Total question 4.3 & 4.6) | 9,867 |

**CIRCULATION OF OTHER MATERIALS**

|                                                                                                                                                                                                                                                                  |       |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|
| 4.8aCirculation of Adult Other Materials - Non-Audio/Visual                                                                                                                                                                                                      |       |
| 4.8bCirculation of Adult Other Materials - Audio/Visual                                                                                                                                                                                                          |       |
| 4.9aCirculation of Children's Other Materials - Non-Audio/Visual                                                                                                                                                                                                 |       |
| 4.9bCirculation of Children's Other Materials - Audio/Visual                                                                                                                                                                                                     |       |
| 4.10Circulation of Other Physical Items (Total questions 4.8a, 4.9a)                                                                                                                                                                                             | 0     |
| 4.11Physical Item Circulation (Total questions 4.7 & 4.8 b & 4.9b & 4.10)                                                                                                                                                                                        | 9,867 |
| 4.12As of the end of the reporting period, does the library charge overdue fines to any users when they fail to return physical print materials by the date due? <sup>19</sup>                                                                                   | Yes   |
| 4.13Did your library offer automatic renewal for any physical materials during the reporting period? NOTE: Patrons do not have to take any action for automatic renewals. The Integrated Library System [ILS] rules determine how/when automatic renewals occur. | No    |

**REFERENCE TRANSACTIONS**

|                                                                                                                                              |              |
|----------------------------------------------------------------------------------------------------------------------------------------------|--------------|
| 4.14Total Reference Transactions                                                                                                             | 678          |
| 4.14aRegarding the number of Reference Transactions entered, is this an annual count or an annual estimate based on a typical week or weeks? | Annual Count |
| 4.15Does the library offer virtual reference?                                                                                                | N            |

**INTERLIBRARY LOAN - MATERIALS RECEIVED (BORROWED)**

|                              |       |
|------------------------------|-------|
| 4.16TOTAL MATERIALS RECEIVED | 3,891 |
|------------------------------|-------|

**INTERLIBRARY LOAN - MATERIALS PROVIDED (LOANED)**

|                              |       |
|------------------------------|-------|
| 4.17TOTAL MATERIALS PROVIDED | 2,903 |
|------------------------------|-------|

**E-RATE**

|                                                              |     |
|--------------------------------------------------------------|-----|
| 4.18Does the library file for E-ratebenefits?                | N   |
| 4.19Is the library part of a consortium for E-rate benefits? | N   |
| 4.20If yes, in which consortium are you participating?       | N/A |

**5. ELECTRONIC USE**

**Electronic Holdings**

For all questions: Answer Missing if the answer is unknown

Report information for Electronic Use based on the fiscal reporting year entered for Questions 1.6 and 1.7 in Section 1 General Library Information.

**Electronic Books**

E-books are the digital equivalent of printed books that may be accessed online from an electronic device. E-books also include e-comics. Do not consider resources available for free in the public domain when answering the following questions.

|                                                                                                                                                      |     |
|------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| 5.1Did the library provide access to e-books purchased solely by the library?                                                                        | No  |
| 5.2Did the library provide access to e-books purchased via a consortium, cooperative, or other similar group at the local, regional, or state level? | Yes |
| 5.3Did the library provide access to e-books provided by the New York State Library at no or minimal cost to the library?                            | No  |

**Electronic Serials**

E-serials are periodic digital publications equivalent to printed newspapers, magazines, and similar media that are viewed as entire issues rather than as single articles returned from a research query. Do not consider resources available for free in the public domain when answering the following questions. Answer Yes/No/Missing (Unknown)

|                                                                                                                                                        |     |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| 5.4Did the library provide access to e-serials purchased solely by the library?                                                                        | No  |
| 5.5Did the library provide access to e-serials purchased via a consortium, cooperative, or other similar group at the local, regional, or state level? | Yes |
| 5.6Did the library provide access to e-serials provided by the New York State Library at no or minimal cost to the library?                            | No  |

**Electronic Audio**

E-audio are digital files of sound only (e.g., audiobooks, music) that may be accessed online from an electronic device. Do not consider resources available for free in the public domain when answering the following questions. Answer Yes/No/Missing (Unknown)

|                                                                                                                                                      |     |
|------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| 5.7Did the library provide access to e-audio purchased solely by the library?                                                                        | No  |
| 5.8Did the library provide access to e-audio purchased via a consortium, cooperative, or other similar group at the local, regional, or state level? | Yes |
| 5.9Did the library provide access to e-audio provided by the New York State Library at no or minimal cost to the library?                            | No  |

**Electronic Video**

E-videos are digital files of moving visual images with or without sound (e.g., movies, television shows) that may be accessed online from an electronic device. Examples include Hoopla, Kanopy, and cloudlibrary. Do not consider resources available for free in the public domain when answering the following questions. Answer Yes/No/Missing (Unknown)

|                                                                                                                                                                                                                                                       |    |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|
| 5.10Did the library provide access to e-videos purchased solely by the library?                                                                                                                                                                       | No |
| 5.11Did the library provide access to e-videos purchased via a consortium, cooperative, or other similar group at the local, regional, or state level? (Do not include New York State Library-provided content here; that should be entered in 5.12.) | No |
| 5.12Did the library provide access to e-videos provided by the New York State Library at no or minimal cost to the library?                                                                                                                           | No |

**Research Databases**

Research databases are organized collections of electronic data or records (e.g., facts, abstracts, articles, bibliographic data, texts, photographs) that can be searched to retrieve information. Do not consider resources available for free when answering the following questions. Answer Yes/No/Missing (Unknown)

|                                                                                                                                                                                |     |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| 5.13Did the library provide access to research databases purchased solely by the library?                                                                                      | No  |
| 5.14Did the library provide access to research databases purchased via a consortium, cooperative, or other similar group at the local, regional, or state level? <sup>20</sup> | Yes |
| 5.15Did the library provide access to research databases provided by the New York State Library at no or minimal cost to the library (e.g., NOVELny)? <sup>21</sup>            | Yes |

**Online Learning**

Online learning platforms primarily provide instruction, tools, and resources to enhance education, lifelong learning, and skill building. Platforms may offer homework assistance, language learning, test preparation, professional development, resume assistance, hobby instruction, etc. Answer Yes if library provided access to a platform even if the platform itself is not owned by the library (e.g., paying for access to Ryan Dowd's Homeless Library). Do not consider resources available for free when answering the following questions. Answer Yes/No/Missing (Unknown)

|                                                                                                                                                                         |     |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| 5.16Did the library provide access to online learning platforms purchased solely by the library? <sup>22</sup>                                                          | Yes |
| 5.17Did the library provide access to online learning platforms purchased via a consortium, cooperative, or other similar group at the local, regional, or state level? | No  |
| 5.18Did the library provide access to online learning platforms provided by the New York State Library at no or minimal cost to the library?                            | No  |

**E-Material Circulation**

Electronic (digital) materials can be accessed online from an electronic device. Types of electronic materials include e-books, e-serials, e-audio, and e-video. Only count items that require user authentication and have a limited period of use. Count all checkouts, including renewals.

|                                                                     |       |
|---------------------------------------------------------------------|-------|
| 5.19The total circulation of e-books during the reporting period    | 754   |
| 5.20The total circulation of e-serials during the reporting period. | 789   |
| 5.21The total circulation of e-audio during the reporting period    | 1,427 |
| 5.22The total circulation of e-videos during the reporting period.  | 0     |

**6. STAFF INFORMATION**

All staff questions refer to PAID staff.

Note: Report figures as of the last day of the fiscal year reported in Questions 1.6 and 1.7 in Part 1. Include the FTE for all positions funded in the library's budget whether those positions are filled or not. This report requires conversion of part-time hours to full-time equivalents (FTE). To compute the FTE of employees in any category, take the total number of hours worked per week for all budgeted positions in that category and divide that total by the number of hours per week the library considers to be full-time. Report the FTE to two decimal places.

**FTE (FULL-TIME EQUIVALENT CALCULATION)**

|                                                                                                         |       |
|---------------------------------------------------------------------------------------------------------|-------|
| 6.1The number of hours per workweek used to compute FTE for all paid library personnel in this section. | 37.00 |
|---------------------------------------------------------------------------------------------------------|-------|

**BUDGETED POSITIONS IN FULL-TIME EQUIVALENTS**

|                                                                         |      |
|-------------------------------------------------------------------------|------|
| 6.2Library Director (certified)                                         | 0.00 |
| 6.3Vacant Library Director (certified)                                  | 0.00 |
| 6.4Library Manager (not certified)                                      | 0.89 |
| 6.5Vacant Library Manager (not certified)                               | 0.00 |
| 6.6Librarian                                                            | 0.00 |
| 6.7Vacant Librarian                                                     | 0.00 |
| 6.8Library Specialist/Paraprofessional                                  | 0.00 |
| 6.9Vacant Library Specialist/Paraprofessional                           | 0.00 |
| 6.10Other Staff                                                         | 2.59 |
| 6.11Vacant Other Staff                                                  | 0.27 |
| 6.12TOTAL PAID STAFF (Total questions 6.2, 6.4, 6.6, 6.8 & 6.10)        | 3.48 |
| 6.13VACANT TOTAL PAID STAFF (Total questions 6.3, 6.5, 6.7, 6.9 & 6.11) | 0.27 |

**SALARY INFORMATION**

|                                             |     |
|---------------------------------------------|-----|
| 6.14FTE - Library Director(certified)       | 0   |
| 6.15Salary - Library Director (certified)   | \$0 |
| 6.16FTE - Library Manager (not certified)   | 1   |
| 6.17Salary - Library Manager (notcertified) | \$  |
| 6.18FTE - Librarian                         | 0   |
| 6.19Salary - Librarian                      | \$0 |

**7. MINIMUM PUBLIC LIBRARY STANDARDS**

All public, free association and Indian libraries in New York State are required to meet the minimum standards listed below. Please indicate which of these standards your

library meets as of December 31, 2025. Please [click here](#) to read general instructions before completing this section. Helpful information for meeting minimum public library standards is available on the State Library's website. <https://nyslibrary.libguides.com/publiclibrarystandards>

|                                                                                                                                                                                                                                                           |   |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|
| 7.1.Is governed by written bylaws which define the structure and governing functions of the library board of trustees, and which shall be reviewed and re-approved by the board of trustees at least once every five years or earlier if required by law. | Y |
| 7.2.Has a community-based, board-approved, written long-range plan of service developed by the library board of trustees and staff.                                                                                                                       | Y |
| 7.3.Provides a board-approved written annual report to the community on the library's progress in meeting its mission, goals and objectives, as outlined in the library's long-range plan of service.                                                     | Y |
| 7.4.Has board-approved written policies for the operation of the library, which shall be reviewed and updated at least once every five years or earlier if required by law.                                                                               | Y |
| 7.4.a.Does the Library have a Board-approved policy for the selection of library materials and reconsideration of such selection?                                                                                                                         | Y |
| 7.4.b.Does the Library have a Board-approved policy explaining the public usage of library space and meeting rooms? <sup>23</sup>                                                                                                                         | Y |
| 7.4.c.Does the Library have Board-approved Codes of conduct?                                                                                                                                                                                              | Y |
| 7.4.d.Does the library have a policy protecting the confidentiality of library records?                                                                                                                                                                   | Y |
| 7.4.e.Does the library have Board-approved personnel policies ensuring consistent staff management and fair employment practices?                                                                                                                         | N |
| 7.4.f.Does the library have a disaster plan? <sup>24</sup>                                                                                                                                                                                                | Y |
| 7.4.g.Does the Library have Board-approved financial control policies that fulfill the legal and fiduciary responsibilities of the governing body and promote fiscal oversight, accountability, and sustainable management?                               | Y |
| 7.5.Annually prepares and publishes a board-approved, written budget, which enables the library to address the community's needs, as outlined in the library's long-range plan of service.                                                                | Y |
| 7.6.Periodically evaluates the effectiveness of the library's programs, services and collections to address community needs, as outlined in the library's long-range plan of service.                                                                     | Y |
| 7.7.Is open the minimum standard number of public service hours for population served. (see instructions)                                                                                                                                                 | Y |

**7.8. Maintains a facility that addresses community needs, as outlined in the library's long-range plan of service, including adequate:**

|                           |   |
|---------------------------|---|
| 7.8a.space                | Y |
| 7.8b.lighting             | Y |
| 7.8c.shelving             | Y |
| 7.8d.seating              | Y |
| 7.8e.power infrastructure | Y |
| 7.8f.data infrastructure  | Y |
| 7.8g.public restroom      | Y |

-

|                                                                                                               |   |
|---------------------------------------------------------------------------------------------------------------|---|
| 7.9.Provides programming to address community needs, as outlined in the library's long-range plan of service. | Y |
|---------------------------------------------------------------------------------------------------------------|---|

**7.10. Provides**

|                                                                                                                         |   |
|-------------------------------------------------------------------------------------------------------------------------|---|
| 7.10a.a circulation system that facilitates access to the local library collection and other library catalogs           | Y |
| 7.10b.equipment, technology, and internet connectivity to address community needs and facilitate access to information. | Y |

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|                                                                                                                                                                                                                                                              |   |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|
| 7.11.Provides access to current library information in print and online, facilitating the understanding of library services, operations and governance; information provided online shall include the standards referenced in numbers (1) through (5) above. | Y |
| 7.12.Employs a paid director in accordance with the provisions of Commissioner's Regulation 90.8.                                                                                                                                                            | Y |
| 7.13.Provides library staff with annual technology training, appropriate to their position, to address community needs, as outlined in the library's long-range plan of service.                                                                             | Y |
| 7.14.Establishes and maintains partnerships with other educational, cultural or community organizations which enable the library to address the community's needs, as outlined in the library's long-range plan of service.                                  | Y |

**8. PUBLIC SERVICE INFORMATION**

Report all information as of the end of the fiscal year reported in Questions 1.6 and 1.7 in Part 1. Please [click here](#) to read general instructions before completing this section. Questions 8.1-8.4 are pre-filled with prior year answers but not locked to allow updating.

PUBLIC SERVICE OUTLETS - Libraries reporting main libraries, branches and bookmobiles should complete Service Outlets Information in Part 9.

|                                                             |   |
|-------------------------------------------------------------|---|
| 8.1Main Library                                             | 1 |
| 8.2Branches                                                 | 0 |
| 8.3Bookmobiles                                              | 0 |
| 8.4Other Outlets                                            | 0 |
| 8.5TOTAL PUBLIC SERVICE OUTLETS (Total questions 8.1 - 8.4) | 1 |

**PUBLIC SERVICE HOURS - Report hours to two decimal places.**

|                                                                              |          |
|------------------------------------------------------------------------------|----------|
| 8.6Minimum Weekly Total Hours - Main Library                                 | 47.00    |
| 8.7Minimum Weekly Total Hours - Branch Libraries                             | 0.00     |
| 8.8Minimum Weekly Total Hours - Bookmobiles                                  | 0.00     |
| 8.9Minimum Weekly Total Hours - Total Hours Open (Total questions 8.6 - 8.8) | 47.00    |
| 8.10Annual Total Hours - Main Library                                        | 2,344.00 |
| 8.11Annual Total Hours - Branch Libraries                                    | 0.00     |
| 8.12Annual Total Hours - Bookmobiles                                         | 0.00     |
| 8.13Annual Hours Open - Total Hours Open (Total questions 8.10 through 8.12) | 2,344.00 |

**9. SERVICE OUTLET INFORMATION**

Outlets should be arranged in alphabetical order if possible.

Report all information as of the end of the fiscal year reported in Questions 1.6 and 1.7 in Part 1. Please [click here](#) to read general instructions before completing this section. Questions 1-14, 20-25, and 34-36 are pre-filled with prior year answers but not locked to allow updating.

NOTE: Libraries reporting Public Service Outlets in questions 8.1, 8.2 and 8.3 of Part 8 are required to complete this part of the Annual Report. Use this section to enter outlet information on main libraries, branches or bookmobiles. Complete one record for each main library, branch or bookmobile.

NEW OUTLETS: If a new outlet was open in the reporting year for any amount of time, it must be entered here. For locked fields, use the note to input information; enter New in the note for Question 40.

CLOSED OUTLETS: Even if an outlet was closed for the entire year it still must be reported and not simply left out of reporting. In these cases, enter either Closed, will reopen or Closed permanently in the note for Question 40. Permanently closed outlets will be removed and not appear in subsequent reports.

If you have multiple libraries, you may 1) enter the data for the Service Outlet Information section directly into the survey as usual or 2) send Counting Opinions the data for this section to be uploaded into LibPAS. If you choose to send your data for uploading, you will enter the data into the spreadsheet that Counting Opinions will provide. Complete this spreadsheet and email it to [support@countingopinions.com](mailto:support@countingopinions.com) and your data will be uploaded into LibPAS within 24 hours. The data will be loaded in the same order in which it appears in your file, so libraries should be in the correct order on the spreadsheet.

Outlet fields 5-6, 11-14, and 20-23 should be locked.

**Name**

|                  |  |                  |                               |
|------------------|--|------------------|-------------------------------|
| Location         |  | 1. Outlet Name   | 2. Outlet Name Status         |
| RICHARDS LIBRARY |  | RICHARDS LIBRARY | no change from the prior year |

**Address**

|                  |  |                   |                                 |
|------------------|--|-------------------|---------------------------------|
| Location         |  | 3. Street Address | 4. Outlet Street Address Status |
| RICHARDS LIBRARY |  | 36 ELM STREET     | no change from the prior year   |

## Address / Phone

|                  |  |             |             |                                 |
|------------------|--|-------------|-------------|---------------------------------|
| Location         |  | 5. City     | 6. Zip Code | 7. Phone (enter 10 digits only) |
| RICHARDS LIBRARY |  | WARRENSBURG | 12885       | (518) 623-3011                  |

## Contact

|                  |  |                       |                                 |
|------------------|--|-----------------------|---------------------------------|
| Location         |  | 8. E-mail Address     | 9. Outlet URL                   |
| RICHARDS LIBRARY |  | war-director@sals.edu | https://therichardslibrary.com/ |

-

|                  |  |            |                                     |                                    |                                    |
|------------------|--|------------|-------------------------------------|------------------------------------|------------------------------------|
| Location         |  | 10. County | 11. School District                 | 12. Library System                 | 13. Outlet Type Code (select one): |
| RICHARDS LIBRARY |  | WARREN     | Warrensburg Central School District | Southern Adirondack Library System | Central Library                    |

## Hours / Meetings

|                  |  |                                                   |                                         |                                                            |                                                          |                                                                   |                                                                                   |
|------------------|--|---------------------------------------------------|-----------------------------------------|------------------------------------------------------------|----------------------------------------------------------|-------------------------------------------------------------------|-----------------------------------------------------------------------------------|
| Location         |  | 14. Public Service Hours Per Year for This Outlet | 15. Number of Weeks This Outlet is Open | 16. Total number of meeting spaces available to the public | 17. How many of the above meeting spaces are reservable? | 18. Number of times members of the public reserved meeting spaces | 19. Is the meeting space available for public use even when the outlet is closed? |
| RICHARDS LIBRARY |  | 2,344                                             | 52                                      | 1                                                          | <sup>25</sup> 1                                          | 14                                                                | N                                                                                 |

## Building

|                  |  |                                                     |                                    |                                                      |                                                             |                                                                                         |
|------------------|--|-----------------------------------------------------|------------------------------------|------------------------------------------------------|-------------------------------------------------------------|-----------------------------------------------------------------------------------------|
| Location         |  | 20. Enter the appropriate outlet code (select one): | 21. Who owns this outlet building? | 22. Who owns the land on which this outlet is built? | 23. Indicate the year this outlet was initially constructed | 24. Indicate the year this outlet underwent a major renovation costing \$25,000 or more |
| RICHARDS LIBRARY |  | LO                                                  | Library Board                      | Library Board                                        | 1901                                                        | <sup>26</sup> 2025                                                                      |

## Space / Use

| Location         |  | 25. Square footage of the outlet | 26. Number of Internet Computers Used by General Public | 27. Number of uses (sessions) of public Internet computers per year | 27a Reporting Method for Number of Uses of Public Internet Computers Per Year |
|------------------|--|----------------------------------|---------------------------------------------------------|---------------------------------------------------------------------|-------------------------------------------------------------------------------|
| RICHARDS LIBRARY |  | 8,530                            | <sup>27</sup> 7                                         | 1,152                                                               | Annual Count                                                                  |

## Internet Connection

| Location         |  | 28. Type of connection on the outlet's public Internet computers | 29. Maximum download speed of connection on the outlet's public Internet computers | 30. Maximum upload speed of connection on the outlet's public Internet computers |
|------------------|--|------------------------------------------------------------------|------------------------------------------------------------------------------------|----------------------------------------------------------------------------------|
| RICHARDS LIBRARY |  | Cable                                                            | 11 Greater than or equal to 100 mbps and less than 1 gbps                          | 7 Greater than or equal to 10 mbps and less than 15 mbps                         |

## Internet / WiFi

| Location         |  | 31. Internet Provider      | 32. WiFi Access           | 33. Wireless Sessions | 33a Reporting Method for Wireless Sessions |
|------------------|--|----------------------------|---------------------------|-----------------------|--------------------------------------------|
| RICHARDS LIBRARY |  | Spectrum/Time Warner Cable | No restrictions to access | <sup>28</sup> 4,004   | Annual Count                               |

## Accessibility / Makerspace

| Location         |  | 34. Does the outlet have a building entrance that is physically accessible to a person in a wheelchair? | 35. Is every public part of the outlet accessible to a person in a wheelchair? | 36. Does your outlet have a Makerspace? |
|------------------|--|---------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------|-----------------------------------------|
| RICHARDS LIBRARY |  | Y                                                                                                       | Y                                                                              | N                                       |

ID

Questions 35-39 37-40 are locked fields for New York State Library use only.

|                  |  |            |            |                                                           |                             |
|------------------|--|------------|------------|-----------------------------------------------------------|-----------------------------|
| Location         |  | 37. LIBID  | 38. FSCSID | 39. Number of Bookmobiles in the Bookmobile Outlet Record | 40. Outlet Structure Status |
| RICHARDS LIBRARY |  | 7600636770 | NY0631     | 0                                                         | no change                   |

10. OFFICERS AND TRUSTEES

Guidance at the start of the section has been updated to clarify that entries should reflect Officers and Board Members as of February 1, 2026.

Trustees and Terms / Trustee Names

Report information about trustee meetings as of December 31, 2025. All public and association libraries are required by Education Law to hold at least four meetings a year.

BOARD MEETINGS

|                                                                                                    |    |
|----------------------------------------------------------------------------------------------------|----|
| 10.1Total number of board meetings held during calendar year (January 1,2025 to December 31, 2025) | 12 |
|----------------------------------------------------------------------------------------------------|----|

**NUMBER OF TRUSTEES AND TERMS**

|                                                                                                                                                                                     |         |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|
| 10.2 If the library's charter documents (incorporation) state a range of trustees, what is it? If a range is not stated, select N/A.                                                | 5 - 15  |
| 10.3 If your library has a range, how many voting positions are stated in the library's current by-laws? If a range is not stated, select N/A.                                      | 7       |
| 10.4 If your library does not have a range, how many voting positions are stated in the library's charter documents (incorporation)? If library does have a range, select N/A here. | N/A     |
| 10.5 What is the trustee term length, as stated in your library's charter documents (incorporation)? If a term length is not stated, please explain in a Note.                      | 5 years |
| 10.6 I attest that all trustees participated in trustee education in the last calendar year (2025). If entering No, provide explanation in a Note.                                  | Y       |

**BOARD MEMBER SELECTION**

|                                                                    |                                          |
|--------------------------------------------------------------------|------------------------------------------|
| 10.7 Enter Board Member Selection Code (select one): <sup>29</sup> | O - other (specify using the State note) |
|--------------------------------------------------------------------|------------------------------------------|

-

List Officers and Board Members as of February 1, 2026.

Trustee information has been pre-filled with prior year answers but not locked; please make sure to delete former trustees, add new ones, and update position titles, dates and make any other needed changes. You may 1) enter the data for the Officers and Board Members directly into the survey as usual or 2) send Counting Opinions the data for this section to be uploaded into LibPAS. If you choose to send your data for uploading, you must enter the data into the spreadsheet that Counting Opinions will send you. Please Note: It is customized and contains previously entered data in need of updating. Complete this spreadsheet and email it to support@countingopinions.com.

| 10.7a Status | 10.7b First Name of Board Member | 10.7c Last Name of Board Member | 10.7d Mailing Address | 10.7e City | 10.7f Zip Code (5 digits only) | 10.7g E-mail address | 10.7h Office Held or Trustee | 10.7i Term Begins - Month | 10.7j Term Begins - Year | 10.7k Term Expires | 10.7l Term Expires - Year (yyyy) | 10.7m Is the trustee serving a full term? If No, add a Note. The | 10.7n The date the Oath of Office ( mm/dd/yyyy) was taken | 10.7o The date the Oath of Office was filed with town or | 10.7p Is this a brand new trustee? |
|--------------|----------------------------------|---------------------------------|-----------------------|------------|--------------------------------|----------------------|------------------------------|---------------------------|--------------------------|--------------------|----------------------------------|------------------------------------------------------------------|-----------------------------------------------------------|----------------------------------------------------------|------------------------------------|
|--------------|----------------------------------|---------------------------------|-----------------------|------------|--------------------------------|----------------------|------------------------------|---------------------------|--------------------------|--------------------|----------------------------------|------------------------------------------------------------------|-----------------------------------------------------------|----------------------------------------------------------|------------------------------------|

|        |        |           |                                        |                      |                                             |                          |                    |                   |                   | Note<br>should<br>identify<br>the<br>previous<br>trustee<br>whose u<br>nexpired<br>term is<br>being<br>filled,<br>and<br>should<br>identify<br>the begi<br>nning<br>and<br>ending<br>date of<br>the unex<br>pired<br>previous<br>trustee?<br>s term.<br>Exempl<br>e:<br>Trustee<br>is filli | county<br>clerk (m<br>m/dd/yy<br>yy) |   |  |
|--------|--------|-----------|----------------------------------------|----------------------|---------------------------------------------|--------------------------|--------------------|-------------------|-------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|---|--|
| Filled | John   | Schroeter | [REDACTED]<br>[REDACTED]<br>[REDACTED] | Warrensb12885<br>urg | kentschro Trustee<br>et@gmail<br>.com       | <sup>30</sup><br>January | <sup>31</sup> 2021 | Decembe 2026<br>r | <sup>32</sup> Yes | N/A                                                                                                                                                                                                                                                                                         | N/A                                  | N |  |
| Filled | Esther | McTague   | [REDACTED]<br>[REDACTED]               | Warrensb12885<br>urg | richardsli Trustee<br>braryemct<br>@gmail.c | April                    | 2022               | Decembe 2027<br>r | Yes               | N/A                                                                                                                                                                                                                                                                                         | N/A                                  | N |  |

|        |          |                |                                        |                   |                                                                      |              |               |     |     |     |   |
|--------|----------|----------------|----------------------------------------|-------------------|----------------------------------------------------------------------|--------------|---------------|-----|-----|-----|---|
| Filled | Becky    | Smith-Lawler   | ██████████                             | Warrensburg 12885 | om<br>blsmithla Financial<br>wler@ya Officer<br>hoo.com              | January 2026 | December 2030 | Yes | N/A | N/A | N |
| Filled | Samantha | Newcomb        | ██████████<br>██████████<br>██████████ | Warrensburg 12885 | samantha Trustee<br>.newcom<br>b@arrow<br>bank.com                   | January 2022 | December 2026 | No  | N/A | N/A | Y |
| Filled | Susan    | Matzner        | ██████████<br>██████████               | Warrensburg 12885 | richardsli Secretary<br>brarysue<br>@gmail.c<br>om                   | January 2026 | December 2030 | Yes | N/A | N/A | N |
| Filled | Mary     | Beadnell       | ██████████<br>██████████<br>██████████ | Warrensburg 12885 | richardsli Vice<br>brarymar President<br>ybeadnell<br>@yahoo.<br>com | January 2022 | December 2027 | Yes | N/A | N/A | N |
| Filled | Sarah    | Gebbie-Measeck | ██████████<br>██████████               | Warrensburg 12885 | richardsli President<br>brarysara<br>h@gmail.<br>com                 | January 2025 | December 2029 | Yes | N/A | N/A | N |

## 11. OPERATING FUNDS RECEIPTS

Report financial data based on the fiscal reporting year reported in Part 1. (Q1.6 and Q1.7, or Q1.9 and Q1.10 if the fiscal reporting year has changed since the previous annual report). ROUND TO THE NEAREST DOLLAR. Please [click here](#) to read general instructions before completing this section.

### LOCAL PUBLIC FUNDS

|                                                                                                                                          |   |
|------------------------------------------------------------------------------------------------------------------------------------------|---|
| 11.1 Does the library receive any local public funds? If yes, complete one record for each taxing authority; if no, go to question 11.3. | Y |
|------------------------------------------------------------------------------------------------------------------------------------------|---|

-

| 11.1.a Source of Funds | 11.1.b Name of funding County, Municipality or School District | 11.1.c Amount | 11.1.d Subject to public vote held in reporting year or in a previous reporting year(s). | 11.1.e Written Contractual Agreement |
|------------------------|----------------------------------------------------------------|---------------|------------------------------------------------------------------------------------------|--------------------------------------|
| School District        | Warrensburg Central School District                            | \$265,476     | Y                                                                                        | N                                    |
| County                 | Warren County                                                  | \$6,033       | N                                                                                        | N                                    |

-

Please Note: last year's answers for repeating groups cannot be displayed.

|                              |           |
|------------------------------|-----------|
| 11.2TOTAL LOCAL PUBLIC FUNDS | \$271,509 |
|------------------------------|-----------|

#### SYSTEM CASH GRANTS TO MEMBER LIBRARY

|                                                                                      |         |
|--------------------------------------------------------------------------------------|---------|
| 11.3Local Library Services Aid (LLSA)                                                | \$1,437 |
| 11.4Record all Central Library Services Aid monies received from system headquarters | \$0     |
| 11.5Additional State Aid received from the System                                    | \$0     |
| 11.6Federal Aid received from the System                                             | \$0     |
| 11.7Other Cash Grants                                                                | \$0     |
| 11.8TOTAL SYSTEM CASH GRANTS (Add Questions 11.3, 11.4, 11.5, 11.6 and 11.7)         | \$1,437 |

#### OTHER STATE AID

|                                                                                                                                       |         |
|---------------------------------------------------------------------------------------------------------------------------------------|---------|
| 11.9State Aid other than LLSA, Central Library Aid (CLDA and/or CBA), or other State Aid reported as system cash grants <sup>33</sup> | \$1,661 |
|---------------------------------------------------------------------------------------------------------------------------------------|---------|

**FEDERAL AID FOR LIBRARY OPERATION**

|                                                                                      |     |
|--------------------------------------------------------------------------------------|-----|
| 11.10LSTA                                                                            | \$0 |
| 11.11Other Federal Aid                                                               | \$0 |
| 11.12TOTAL FEDERAL AID (Add Questions 11.10 and 11.11)                               | \$0 |
| 11.13CONTRACTS WITH PUBLIC LIBRARIES AND/OR PUBLIC LIBRARY SYSTEMS IN NEW YORK STATE | \$0 |

**OTHER RECEIPTS**

|                                                                                             |           |
|---------------------------------------------------------------------------------------------|-----------|
| 11.14Gifts and Endowments                                                                   | \$8,984   |
| 11.15Fund Raising                                                                           | \$100     |
| 11.16Income from Investments                                                                | \$14      |
| 11.17Library Charges                                                                        | \$2,638   |
| 11.18Other                                                                                  | \$900     |
| 11.19TOTAL OTHER RECEIPTS (Add Questions 11.14, 11.15, 11.16, 11.17 and 11.18)              | \$12,636  |
| 11.20TOTAL OPERATING FUND RECEIPTS (Add Questions 11.2, 11.8, 11.9, 11.12, 11.13 and 11.19) | \$287,243 |
| 11.21BUDGET LOANS                                                                           | \$0       |

**Transfers / Grand Total****TRANSFERS**

|                                                                                                                                                         |           |
|---------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|
| 11.22From Capital Fund (Same as Question 14.8)                                                                                                          | \$0       |
| 11.23From Other Funds                                                                                                                                   | \$0       |
| 11.24TOTAL TRANSFERS (Add Questions 11.22 and 11.23)                                                                                                    | \$0       |
| 11.25BALANCE IN OPERATING FUND - Beginning Balance for Fiscal Year Ending 2025 (Same as Question 12.39 of previous year if fiscal year has not changed) | \$56,995  |
| 11.26GRAND TOTAL RECEIPTS, BUDGET LOANS, TRANSFERS AND BALANCE (Add Questions 11.20, 11.21, 11.24 and 11.25; Same as Question 12.40)                    | \$344,238 |

**12. OPERATING FUND DISBURSEMENTS**

Report financial data based on the fiscal reporting year reported in Part 1. (Q1.6 and Q1.7, or Q1.9 and Q1.10 if the fiscal reporting year has changed since the previous annual report). ROUND TO THE NEAREST DOLLAR. Please [click here](#) to read general instructions before completing this section.

**STAFF EXPENDITURES****Salaries & Wages Paid from Library Funds**

|                                                                       |           |
|-----------------------------------------------------------------------|-----------|
| 12.1Certified Librarians                                              | \$0       |
| 12.2Other Staff                                                       | \$151,290 |
| 12.3Total Salaries & Wages Expenditures (Add Questions 12.1 and 12.2) | \$151,290 |
| 12.4Employee Benefits Expenditures                                    | \$13,250  |
| 12.5Total Staff Expenditures (Add Questions 12.3 and 12.4)            | \$164,540 |

**COLLECTION EXPENDITURES**

|                                                                       |          |
|-----------------------------------------------------------------------|----------|
| 12.6Print Materials Expenditures                                      | \$10,616 |
| 12.7Electronic Materials Expenditures                                 | \$1,679  |
| 12.8Other Materials Expenditures                                      | \$0      |
| 12.9Total Collection Expenditures (Add Questions 12.6, 12.7 and 12.8) | \$12,295 |

**CAPITAL EXPENDITURES FROM OPERATING FUNDS**

|                                                                 |     |
|-----------------------------------------------------------------|-----|
| 12.10From Local Public Funds (71PF)                             | \$0 |
| 12.11From Other Funds (71OF)                                    | \$0 |
| 12.12Total Capital Expenditures (Add Questions 12.10 and 12.11) | \$0 |

**OPERATION AND MAINTENANCE OF BUILDINGS**

**Repairs to Building & Building Equipment**

|                                                                                 |          |
|---------------------------------------------------------------------------------|----------|
| 12.13From Local Public Funds (72PF)                                             | \$11,033 |
| 12.14From Other Funds (72OF)                                                    | \$0      |
| 12.15Total Repairs (Add Questions 12.13 and 12.14)                              | \$11,033 |
| 12.16Other Disbursements for Operation & Maintenance of Buildings               | \$21,767 |
| 12.17Total Operation & Maintenance of Buildings (Add Questions 12.15 and 12.16) | \$32,800 |

**MISCELLANEOUS EXPENSES**

|                                                                                        |          |
|----------------------------------------------------------------------------------------|----------|
| 12.18Office and Library Supplies                                                       | \$9,171  |
| 12.19Telecommunications                                                                | \$3,144  |
| 12.21Professional & Consultant Fees                                                    | \$8,297  |
| 12.22Equipment                                                                         | \$500    |
| 12.23Other Miscellaneous                                                               | \$1,075  |
| 12.24Total Miscellaneous Expenses (Add Questions 12.18, 12.19, 12.21, 12.22 and 12.23) | \$22,187 |

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|                                                                                      |         |
|--------------------------------------------------------------------------------------|---------|
| 12.25CONTRACTS WITH PUBLIC LIBRARIES AND/OR PUBLIC LIBRARY SYSTEMS IN NEW YORK STATE | \$5,310 |
|--------------------------------------------------------------------------------------|---------|

**DEBT SERVICE**

**Capital Purposes Loans (Principal and Interest)**

|                                                                                                          |           |
|----------------------------------------------------------------------------------------------------------|-----------|
| 12.26From Local Public Funds (73PF)                                                                      | \$0       |
| 12.27From Other Funds (73OF)                                                                             | \$0       |
| 12.28Total (Add Questions 12.26 and 12.27) Other Loans                                                   | \$0       |
| 12.29Budget Loans (Principal and Interest)                                                               | \$0       |
| 12.30Short-Term Loans                                                                                    | \$0       |
| 12.31Total Debt Service (Add Questions 12.28, 12.29 and 12.30)                                           | \$0       |
| 12.32TOTAL OPERATING FUND DISBURSEMENTS (Add Questions 12.5, 12.9, 12.12, 12.17, 12.24, 12.25 and 12.31) | \$237,132 |

**Transfers to Capital Fund**

|                                                                                                             |           |
|-------------------------------------------------------------------------------------------------------------|-----------|
| 12.33From Local Public Funds (76PF)                                                                         | \$0       |
| 12.34From Other Funds (76OF)                                                                                | \$0       |
| 12.35Total Transfers to Capital Fund (Add Questions 12.33 and 12.34; same as Question 13.8)                 | \$0       |
| 12.36Transfer to Other Funds                                                                                | \$32,863  |
| 12.37TOTAL TRANSFERS (Add Questions 12.35 and 12.36)                                                        | \$32,863  |
| 12.38TOTAL DISBURSEMENTS AND TRANSFERS (Add Questions 12.32 and 12.37)                                      | \$269,995 |
| 12.39BALANCE IN OPERATING FUND - Ending Balance for the Fiscal Year Ending 2025                             | \$74,243  |
| 12.40GRAND TOTAL DISBURSEMENTS, TRANSFERS & BALANCE (Add Questions 12.38 and 12.39; same as Question 11.26) | \$344,238 |

**ASSURANCE**

|                                                                                                                                                                                                                                 |            |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|
| 12.41The Library operated in accordance with all provisions of Education Law and the Regulations of the Commissioner, and assures that the Annual Report was reviewed and accepted by the Library Board on (date - mm/dd/yyyy). | 04/07/2026 |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|

FISCAL AUDIT

|                                                                    |                                      |
|--------------------------------------------------------------------|--------------------------------------|
| 12.42Last audit performed (mm/dd/yyyy)                             | 03/18/2025                           |
| 12.43Time period covered by this audit (mm/dd/yyyy) - (mm/dd/yyyy) | 01/01/2024-12/31/2024                |
| 12.44Indicate type of audit (select one): <sup>34</sup>            | Other (specify using the State note) |

CAPITAL FUND

|                                                                                                                                            |   |
|--------------------------------------------------------------------------------------------------------------------------------------------|---|
| 12.45Does the library have a separate Capital Fund? Enter Y for Yes, N for No. If No, stop here. If Yes, complete the Capital Fund Report. | N |
|--------------------------------------------------------------------------------------------------------------------------------------------|---|

13. CAPITAL FUND RECEIPTS

Report financial data based on the fiscal year reported in Questions 1.6 and 1.7 in Part 1. ROUND TO THE NEAREST DOLLAR. Please [click here](#) to read general instructions before completing this section.

REVENUES FROM LOCAL SOURCES

|                                                                     |     |
|---------------------------------------------------------------------|-----|
| 13.1Revenues from Local Government Sources                          | \$0 |
| 13.2All Other Revenues from Local Sources                           | \$0 |
| 13.3Total Revenues from Local Sources (Add Questions 13.1 and 13.2) | \$0 |

STATE AID FOR CAPITAL PROJECTS

|                                                   |     |
|---------------------------------------------------|-----|
| 13.4State Aid Received for Construction           | \$0 |
| 13.5Other State Aid                               | \$0 |
| 13.6Total State Aid (Add Questions 13.4 and 13.5) | \$0 |

FEDERAL AID FOR CAPITAL PROJECTS

|                       |     |
|-----------------------|-----|
| 13.7TOTAL FEDERAL AID | \$0 |
|-----------------------|-----|

**INTERFUND REVENUE**

|                                                                                                                                                        |     |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| 13.8Transfer from Operating Fund(Same as Question 12.35)                                                                                               | \$0 |
| 13.9TOTAL REVENUES (Add Questions 13.3, 13.6, 13.7 and 13.8)                                                                                           | \$0 |
| 13.10NON-REVENUE RECEIPTS                                                                                                                              | \$0 |
| 13.11TOTAL CASH RECEIPTS (Add Questions 13.9 and 13.10)                                                                                                | \$0 |
| 13.12BALANCE IN CAPITAL FUND - Beginning Balance for Fiscal Year Ending 2025 (Same as Question 14.11 of previous year, if fiscal year has not changed) | \$0 |
| 13.13TOTAL CASH RECEIPTS AND BALANCE(Add Questions 13.11 and 13.12; same as Question 14.12)                                                            | \$0 |

**14. CAPITAL FUND DISBURSEMENTS**

Report financial data based on the fiscal reporting year reported in Part 1. ROUND TO THE NEAREST DOLLAR. Please [click here](#) to read general instructions before completing this section.

**PROJECT EXPENDITURES**

|                             |     |
|-----------------------------|-----|
| 14.1Construction            | \$0 |
| 14.2Incidental Construction | \$0 |

**Other Disbursements**

|                                                                                 |     |
|---------------------------------------------------------------------------------|-----|
| 14.3Purchase of Buildings                                                       | \$0 |
| 14.4Interest                                                                    | \$0 |
| 14.5Collection Expenditures                                                     | \$0 |
| 14.6Total Other Disbursements (Add Questions 14.3, 14.4 and 14.5)               | \$0 |
| 14.7TOTAL PROJECT EXPENDITURES (Add Questions 14.1, 14.2 and 14.6)              | \$0 |
| 14.8TRANSFER TO OPERATING FUND (Same as Question 11.22)                         | \$0 |
| 14.9NON-PROJECT EXPENDITURES                                                    | \$0 |
| 14.10TOTAL CASH DISBURSEMENTS AND TRANSFERS (Add Questions 14.7, 14.8 and 14.9) | \$0 |
| 14.11BALANCE IN CAPITAL FUND - Ending Balance for the Fiscal Year Ending 2025   | \$0 |
| 14.12TOTAL CASH DISBURSEMENTS AND BALANCE                                       | \$0 |

**16. FEDERAL TOTALS**

All questions in Part 16 are calculated, locked fields.

Note: See instructions for definitions and calculations of each of these Federal Totals.

|                                                                  |           |
|------------------------------------------------------------------|-----------|
| 16.1Total ALA-MLS                                                | 0.00      |
| 16.2Total Librarians                                             | 0.82      |
| 16.3All Other Paid Staff                                         | 2.65      |
| 16.4Total Paid Employees                                         | 3.47      |
| 16.5State Government Revenue                                     | \$3,098   |
| 16.6Federal Government Revenue                                   | \$0       |
| 16.7Other Operating Revenue                                      | \$12,636  |
| 16.8Total Operating Revenue                                      | \$287,243 |
| 16.9Other Operating Expenditures                                 | \$60,297  |
| 16.10Total Operating Expenditures                                | \$237,132 |
| 16.11Total Capital Expenditures                                  | \$0       |
| 16.12Print Materials                                             | 15,213    |
| 16.12aTotal Physical Items in Collection                         | 17,840    |
| 16.13Circulation of Children's Physical Material                 | 2,834     |
| 16.14Total Registered Borrowers                                  | 1,464     |
| 16.15Other Capital Revenue and Receipts                          | 0         |
| 16.16Number of Internet Computers Used by General Public         | 7         |
| 16.17Total Uses (sessions) of Public Internet Computers Per Year | 1,152     |
| 16.18Wireless Sessions                                           | 4,004     |
| 16.19Total Capital Revenue                                       | \$0       |

**17. FOR NEW YORK STATE LIBRARY USE ONLY**

|                                                         |                                                           |
|---------------------------------------------------------|-----------------------------------------------------------|
| 17.1LIB ID                                              | 7600636770                                                |
| 17.2Interlibrary Relationship Code                      | Member of a Federation or Cooperative                     |
| 17.3Legal Basis Code                                    | Non-profit Association or Agency                          |
| 17.4Administrative Structure Code                       | Administrative Entity with a Single Direct Service Outlet |
| 17.5FSCS Public Library Definition                      | Yes                                                       |
| 17.6Geographic Code                                     | Multi-MCD, entirety                                       |
| 17.7FSCS ID                                             | NY0631                                                    |
| 17.8SED CODE                                            |                                                           |
| 17.9INSTITUTION ID                                      |                                                           |
| User defined ID. used to link two or more AEs together. |                                                           |
| Old FSCSKEY                                             |                                                           |

**SUGGESTED IMPROVEMENTS**

|                                                                                                                                                                                                 |                                    |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|
| Library Name:                                                                                                                                                                                   | The Richards Library               |
| Library System:                                                                                                                                                                                 | Southern Adirondack Library System |
| Name of Person Completing Form:                                                                                                                                                                 | Shelby Burkhardt                   |
| Phone Number:                                                                                                                                                                                   | (518) 623-3011                     |
| I am satisfied that this resource (LibPAS) is meeting library needs:                                                                                                                            | Agree                              |
| Applying this resource (LibPAS) will help improve library services to the public:                                                                                                               | Yes                                |
| Please share with us your suggestions for improving the Annual Report. When providing feedback, if applicable please indicate the question number each comment/suggestion refers to. Thank you! |                                    |

<sup>1</sup>, 3.11 Homebound persons upon request. Persons in Countryside Adult Home twice a month.(0-2026-04-01)

<sup>2</sup>, Merlin HD Ultra Magnifier(0-2026-04-01)

<sup>3</sup>, 3.17a 5 sessions were offered with 0 attendance.(0-2026-04-01)

<sup>4</sup>, 3.18a 1 session offered with 0 attendance.(0-2026-04-01)

<sup>5</sup>, 3.19a 1 session was offered with 0 attendance.(0-2026-04-01)

<sup>6</sup>, 3.19b 19 young adults (ages 12-18) attended programs targeted towards other age groups or general interest.(0-2026-04-01)

<sup>7</sup>, 3.20a 11 sessions were offered with 0 attendance.(0-2026-04-01)

<sup>8</sup>, 3.21a 7 sessions offered with 0 attendance.(0-2026-04-01)

<sup>9</sup>, 3.24a 118 onsite program sessions were offered.(0-2026-04-01)

<sup>10</sup>, 3.26a No live virtual programs were offered.(0-2026-04-01)

<sup>11</sup>, 3.31 Take & Make Kits(0-2026-04-01)

<sup>12</sup>, 3.32 Take & Make Kits(0-2026-04-01)

<sup>13</sup>, 3.34a Warrensburg Riverside Farmers' Market Festivals and Warren County Youth Fair.(0-2026-04-01)

<sup>14</sup>, 3.59a 5 sessions offered with 0 attendance.(0-2026-04-01)

<sup>15</sup>, 3.62e. Local Homeschooling Families(0-2026-04-01)

<sup>16</sup>, 3.64a The Richards Library Book Club(0-2026-04-01)

<sup>17</sup>, 3.67 We have brochures available to patrons for the Tri-County Literacy Center serving Warren, Washington, and Saratoga Counties.(0-2026-04-01)

<sup>18</sup>, 3.76a 10 sessions (OATS - Older Adult Technology Services from Senior Planet) were offered with 0 attendance.(0-2026-04-03)

<sup>19</sup>, 4.12 Fines are only charged on physical print materials in our New & Popular collections.(0-2026-04-01)

<sup>20</sup>, 5.14 Heritage Quest and Ancestry(0-2026-04-01)

<sup>21</sup>, 5.15 NOVELny(0-2026-04-01)

<sup>22</sup>, 5.16 Tech-Talk(0-2026-04-01)

<sup>23</sup>, 7.4.b. We have our Building Use Policy for the Jeffrey M. Levine Community Room, but may need a policy for using other public library space for activities such as tutoring.(0-2026-04-01)

<sup>24</sup>, 7.4.f. This plan is still drafted, but is almost ready for Board approval. We are waiting on a walk-through with personnel from Warren County to see if we are missing anything.(0-2026-04-01)

<sup>25</sup>, 19. Yes, but only private group meetings, events, or programs. Library scheduled programs take priority. If the public is invited, then the group reserving the room must provide a certificate of liability insurance. Otherwise, usage of the room is first come, first served.(0-2026-04-01)

<sup>26</sup>, 24. HVAC replacement - new furnaces and A/C units(0-2026-04-01)

<sup>27</sup>, 27a 5 desktops and 2 laptops(0-2026-04-01)

<sup>28</sup>, 33a Unique sessions from Meraki Reports.(0-2026-04-01)

<sup>29</sup>, 10.7 Sitting Board members recruit new members when there are vacancies and by majority vote of the sitting members approve the new Board members.(0-2026-04-01)

<sup>30</sup>, 10.7p Started May 2025 to complete term vacated by S. Glebus.(0-2026-04-01)

<sup>31</sup>, 10.7p Started May 2025 to complete term vacated by S. Glebus.(0-2026-04-01)

<sup>32</sup>, 10.7p S. Newcomb is completing the term vacated by S. Glebus.(0-2026-04-01)

<sup>33</sup>, 11.9 Remaining 10% of awarded NYS grant funds from the Accessibility Improvements Project which was completed in 2025.(0-2026-04-03)

<sup>34</sup>, 12.44 Audit Review(0-2026-04-01)