Form **990-EZ**

Short Form
Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

Sponsoring organizations, and controlling organization as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$100,000 and total assets less than \$250,000 at the end of the year may use this form.

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

OMB No. 1545-1150

Open to Public Inspection

Department of the Treasury Internal Revenue Service -

_		r the 2006 calendar year, or tax year beginning and ending							
8		able:	ple: Please C Name of Organization				loyer i	dentification number	
·	Ad	direct use IRS ALBERT WISNER PURDIC ILLERARY D					• •		
	Na	Me. Industri FOUNDATION TNC 日本風景原 夏 - 夏 - 夏 - 夏 - 夏 - 夏 - 夏 - 夏 - 夏 - 夏					20-3272640		
Σ	Ini rei	tiai	Number and street (or P.O. hox, if mail is not delivered to street address)						
F	Fir	nal	Specific 2 COLONIAL AVINE	1	1.00	1	•	986-1047	
	□∏Ar	nended							
F	H ^{rei} Ap	Nication FTB TOTT TTT 10000				1	•	•	
		Application WARWICK, NY 10990 Nu							
	• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schodulo A (Form 200 or 200 E7)							X Cash Accrual	
	Schedule A (Form 990 or 990-EZ). Website: ► N/A H. Check ► □								
	The state of the s						X if the organization is not		
		ganization type (check only one)— X 501(c) (3) ◀ (insert no.) 4947(a)(1) or 527 required to attack							
K	Check X if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not								
			ut if the organization chooses to file a return, be sure to file a complete return.						
		lines 5	b, 6b, and 7b, to line 9 to determine gross receipts; if \$100,000 or more, file Form 990 in	istead of F	orm 990-EZ		\$		
	art		Revenue, Expenses, and Changes in Net Assets or Fund Ba				nstruct	ions.)	
	1		ntributions, gifts, grants, and similar amounts received				1	·	
	2		gram service revenue including government fees and contracts				2	······································	
	3	Me	mbership dues and assessments				3		
	4	Inv	estment income				4		
	5	a Gro	oss amount from sale of assets other than inventory5a						
	ı		ss: cost or other basis and sales expenses5b						
			n or (loss) from sale of assets other than inventory (line 5a less line 5b) (attach schedule	a)			5c		
9	6		ecial events and activities (attach schedule). If any amount is from gaming, check here		•••••				
ē			oss revenue (not including \$ of contributions						
Revenue			orted on line 1) 6a						
_			ss: direct expenses other than fundraising expenses 6b						
			tincome or (loss) from special events and activities (line 6a less line 6b)				6c		
	٦		oss sales of inventory, less returns and allowances 7a			•••••			
			ss: cost of goods sold 7b					Ti.	
			oss profit or (loss) from sales of inventory (line 7a less line 7b)				7c		
	8		var ravanua /daeariba		••••••	٠٠٠٠٠٠	8		
	9			'	9				
	10								
	11		Benefits paid to or for members						
rn.	12						11 12		
enses	13		Salaries, other compensation, and employee benefits Professional fees and other payments to independent contractors						
ped			• •				13		
Expe	14		Occupancy, rent, utilities, and maintenance				14		
	15		Other expenses (describe						
	16						16 17		
_	17		Total expenses (add lines 10 through 16)					<u></u>	
ş	18		cess or (deficit) for the year (line 9 less line 17)	•••••			18		
Se	19		Net assets or fund balances at beginning of year (from line 27, column (A))						
Net Assets			(must agree with end-of-year figure reported on prior year's return)						
	20	Oti	ner changes in net assets or fund balances (attach explanation)				20		
1000	21		t assets or fund balances at end of year (combine lines 18 through 20)				21	L	
Part II Balance Sheets - If Total assets on line 25, column (B) are \$250,000 or more, file Form 990 instead of Form 990-EZ.							(D) Fod of con-		
			(See page 51 of the instructions.)		(A) Beginning	ur year	ـلـــا	(B) End of year	
22			avings, and investments				22		
23			nd buildings				23		
24			ssets (describe 🟲				24		
25		Total assets					25		
26			abilities (describe ►	_)			26		
27	7 1	let ass	ets or fund balances (line 27 of column (B) must agree with line 21)	<i>,</i>			27		

b If "Yes," has it filed a tax return on Form 990-T for this year?

37a Enter amount of political expenditures, direct or indirect, as described in the instructions.

b If "Yes," attach the schedule specified in the line 38 instructions and enter the amount involved

a Initiation fees and capital contributions included on line 9

b Gross receipts, included on line 9, for public use of club facilities

Was there a liquidation, dissolution, termination, or substantial contraction during the year? (If "Yes," attach a statement.)

b Did the organization file Form 1120-POL for this year?

38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior

year and still unpaid at the start of the period covered by this return?

Form **990-EZ** (2006)

35b

36

37b

38a

N/A

N/A

38b

39a

X

X

X

501(c)(7) organizations. Enter:

		(2006) FOUNDATION, INC.		<u> 20-</u>	327264	.0	Page 3
Par	ŧΨ	Other Information (Note the statement requirement in General Instruction V.) (Continue	ed)				
40a	501(c)	(3) organizations. Enter amount of tax imposed on the organization during the year under:					
:	section	4911 ▶ ; section 4912 ▶ ; section 4955 ▶ ; section 4955				<u> </u>	T = -
b a	501(c)	(3) and (4) organizations. Did the organization engage in any section 4958 excess benefit transaction duri	ng the year (or did it	_		No
	becom	e aware of an excess benefit transaction from a prior year? If "Yes," attach an explanation			41)b	X
		mount of tax imposed on organization managers or disqualified persons during the year under					
	eaction	s 4012 4055 and 4058	<u> </u>				
d	Enter a	mount of tax on line 40c reimbursed by the organization	▶				
e	All org	nanizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transact	ion?		4)e	<u>X</u>
41	List the	e states with which a copy of this return is filed. NY				1045	,
42a	The bo	oks are in care of ► CAROL MEZZETTI, TREASURER T	elephone no	. ► <u>84</u>	5-986	-1047	<u></u>
		dat ► 2 COLONIAL AVE., WARWICK, NY	-	ZIP+	4 ► <u>10</u>	990	
b	At any	time during the calendar year, did the organization have an interest in or a signature or other authority				<u> </u>	
	over a	financial account in a foreign country (such as a bank account, securities account, or other financial			_	Yes	
	accour			·····	4	2b	X
		," enter the name of the foreign country: 🕨	·		🛭		
	See th	e instructions for exceptions and filing requirements for Form TD F 90-22.1.	•			_	
C	At any	e instructions for exceptions and filing requirements for Form 10 F 90-22.1. time during the calendar year, did the organization maintain an office outside of the U.S.?			14	2c	X
•	if "Yes	." enter the name of the foreign country:				_	$\overline{}$
43	Section	on 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here					·
	and er	nter the amount of tax-exempt interest received or accrued during the tax year	d to the best o	43 tmy know	N N	/A	
Plea		Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowle	edge.	ı my know.	cago ana som	, , , , , , , , , , , , , , , , , , , ,	
Sigr				Date			
Here	e	Signature of officer					
		Type or print name and title.					
		Check if se		reparer's S	SSN		
Paid		, , , , , , , , , , , , , , , , , , , ,		or PTIN			
	arer's Only	Firm's name (or yours NUGENT & HAEUSSLER, P.C.		<u>N</u> ▶			
Vat	Ulliy	if self-employed), 101 BRACKEN ROAD	I Pi	none 🟲	845-45	7_11	00
		address, and ZIP+4 MONTGOMERY, NY 12549		, (
					10	rm 990-E	£ (2000)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or 4947(a)(1) Nonexempt Charltable Trust

Supplementary Information-(See separate instructions.) ▶ MUST be completed by the above organizations and attached to their Form 990 or 990-EZ 2006

OMB No. 1545-0047

Internal Revenue Service **Employer identification number** Name of the organization ALBERT WISNER PUBLIC LIBRARY FOUNDATION, INC. 20 3272640 Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees Part I (See page 2 of the instructions. List each one. If there are none, enter "None.") (d) Contributions to employee benefit plans & deferred compensation (e) Expense account and other allowances (b) Title and average hours (a) Name and address of each employee paid (c) Compensation per week devoted to position more than \$50,000 None Total number of other employees paid over \$50,000 Compensation of the Five Highest Paid Independent Contractors for Professional Services Part II-A (See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.") (a) Name and address of each independent contractor paid more than \$50,000 (b) Type of service (c) Compensation None Total number of others receiving over 0 \$50,000 for professional services Compensation of the Five Highest Paid Independent Contractors for Other Services Part II-B (List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.) (c) Compensation (b) Type of service (a) Name and address of each independent contractor paid more than \$50,000 None Total number of other contractors receiving over

0

\$50,000 for other services

ALBERT WISNER PUBLIC LIBRARY

f Enter the total number of separate funds or accounts owned at the end of the year (excluding donor advised funds included on

Schedule A (Form 990 or 990-EZ) 2006 FOUNDATION, INC. 20-3272640 Yes No Part III Statements About Activities (See page 2 of the instructions.) During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the (Must equal amounts on line 38, Part VI-A, or lobbying activities > \$ X line i of Part VI-B.) Organizations that made an election under section 501(h) by filling Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities. During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.) X 2a a Sale, exchange, or leasing of property? 2b b Lending of money or other extension of credit? 2c c Furnishing of goods, services, or facilities? d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? **2d** e Transfer of any part of its income or assets? 3 a Did the organization make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how 3a the organization determines that recipients qualify to receive payments.) 3b b Dd the organization have a section 403(b) annuity plan for its employees? c Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement d Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services? 3d 4 a Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f 4a and 4g b Did the organization make any taxable distributions under section 4966? c Did the organization make a distribution to a donor, donor advisor, or related person? 4c d Enter the total number of donor advised funds owned at the end of the tax year e Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year

Schedule A (Form 990 or 990-EZ) 2006

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ALBERT WISNER PUBLIC LIBRARY 20-3272640 Page 3 Schedule A (Form 990 or 990-EZ) 2006 FOUNDATION, INC. Reason for Non-Private Foundation Status (See pages 4 through 7 of the instructions.) Part IV I certify that the organization is not a private foundation because it is: (Please check only ONE applicable box.) A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i). A school. Section 170(b)(1)(A)(ii). (Also complete Part V.) 6 A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii). 7 A federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v). 8 A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). 10 (Also complete the Support Schedule in Part IV-A.) An organization that normally receives a substantial part of its support from a governmental unit or from the general public. 11a X Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.) A community trust. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.) 11b An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross 12 receipts from activities related to its charitable, etc., functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the Support Schedule in Part IV-A.) An organization that is not controlled by any disqualified persons (other than foundation managers) and otherwise meets the requirements of section 13 509(a)(3). Check the box that describes the type of supporting organization: Type III-Other Type III-Functionally integrated Provide the following information about the supported organizations. (See page 7 of the instructions.) (e) (a) Amount of Type of organization is the supported Employer Name(s) of supported organization(s) organization listed in support (described in lines identification 5 through 12 above the supporting number (EIN) organization's or IRC section) governing documents? Yes

An organization organized and operated to test for public safety. Section 509(a)(4). (See page 7 of the instructions.)

Schedule A (Form 990 or 990-EZ) 2006

Schedule A (Form 990 or 990-EZ) 2006 FOUNDATION, INC.

Note: You may use th	ne worksheet in the insti	uctions for converti	ng from the accrual to	the cash method of ac	counting.
ar year (or fiscal year ing in)	(a) 2005	(b) 2004	(c) 2003	(d) 2002	(e) Total
Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)					
Membership fees received					
Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose					
Gross income from interest, dividends, amounts received from payments on securities loans (sec- tion 512(a)(5)), rents, royalties, an	d				
Net income from unrelated busines	SS				
activities not included in line 18					
organization's benefit and either	f				
Do not include the value of service or facilities generally furnished to the public without charge					
Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets					
Total of lines 15 through 22	. 0.	, (0. (0.	0.
Line 23 minus line 17					
Enter 1% of line 23	.]				9-
Prepare a list for your records to sunit or publicly supported organiz Do not file this list with your retu Total support for section 509(a)(show the name of and amo ration) whose total gifts for Irn. Enter the total of all the 1) test: Enter line 24, colum	unt contributed by eac 2002 through 2005 ex ese excess amounts in (e)	h person (other than a gc ceeded the amount show	overnmental vn in line 26a.	6b O
Add: Amounts from column (e) fo					6d ·
B. Life and the Commission line	ZZ				
Public support (line 200 minus ili	280 (numerator) divided l	ov line 26c (denomina	tor))	▶ 2	6f :
organizations described on line records to show the name of, and such amounts for each year: (2005) For any amount included in line 1 and amount received for each ye described in lines 5 through 11b	12: a For amounts included total amounts received in N/A (2004)	d in lines 15, 16, and 1 each year from, each ' each person (other that larger of (1) the amount file this list with years differences (the each)	7 that were received from disqualified person." Do not be a comparable of the compar	n a "disqualified person," not file this list with your (2002) prepare a list for your rec r or (2) \$5,000. (Include i ing the difference betwee	return. Enter the sum of ords to show the name of, in the list organizations in the amount received and
(0005)	/2004)		(2003)	(2002)
Add: Amounts from column (e) 1	for lines: 15		16		
17	20		21	··· \	27c N/A 27d N/A
Add: Line 27a total		and line 27b total			276 N/A 278 N/A
. Dublic cupport /line 27c total mi	nus line 27d total)			🖊 🗀	21/11
Total support for section 509(a)	(2) test: Enter amount on li	ne 23, column (e)	denominator		27g N/A
Public support percentage	(line 27e (numerator)	aividea by line 2/f (uenominatorj) led by line 27f/denon	ninator))	27h N/A
n Investment income percen	tage (line 18, column (e) (numerator) divid	any unusual grants durin	ng 2002 through 2005 nr	
Unusual Grants: For an organiz show, for each year, the name of the return. Do not include these grant 131 01-18-07	ation described in line 10, he contributor, the date and s in line 15.				Do not file this list with your Schedule A (Form 990 or 990-EZ) 20
	ar year (or fiscal year ing in) Sifts, grants, and contributions eceived. (Do not include unusual yrants. See line 28.) Wembership fees received Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, an unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975 Net income from unrelated busines activities not included in line 18. Tax revenues levied for the organization's benefit and either paid to it or expended on its behalt the value of services or facilities furnished to the organization by a governmental unit without charge Do not include gain or (loss) from sale of capital assets The value of services or facilities furnished to the organization by a governmental unit without charge Do not include gain or (loss) from sale of capital assets Total of lines 15 through 22 Line 23 minus line 17 Enter 1% of line 23 Organizations described on lines are a list for your records to unit or publicly supported organization or publicly supported organization described in lines and amounts from column (e) for public support for section 509(a)(Add: Amounts from column (e) for any amount included in line and amount received for each year (2005) For any amount included in line and amount received for each year (2005) For any amount included in line and amount received for each year (2005) For any amount for section 509(a)(Add: Amounts from column (e) for support percentage (line organizations described in (2005) Add: Amounts from column (e) for support percentage (line organizations described in (2005) Public support percentage (line organizations described in (2005) Add: Amounts from column (e) for section 509(a) (2005)	ar year (or fiscal year ing in)	ar year (or fiscal year mg in)	arryar for filsal year ing in) (a) 2005 (b) 2004 (c) 2003 (c) 2003 (d) 2005 (d) 2004 (e) 2003 (e) 2003 (e) 2003 (f) 2004 (e) 2003 (f) 2003 (f) 2004 (f) 2004 (f) 2003 (f) 2004 (f) 2004 (f) 2005 (f) 2004 (f) 2005 (f) 2004 (f) 2005 (f) 2004 (f) 2005 (f) 2006 (f) 2006 (f) 2006 (f) 2006 (f) 2007 (f)	ing in in this grants, and contributions grants, and contributions grants, see line (28) the enursual variable in the seed of the contributions grants, see line (28) the enursual variables in the contributions grants are line (28) the enursual variables in any activity that is related to the organization's chaintable, etc. purposes. Gress income from Interest, the contribution of \$2(4)(5), rest, repailes, and unrelated business taxable income [essection 512(4)(5), rest, repailes, and unrelated business taxable income [essection 512(4)(5), rest, repailes, and unrelated business taxable income [essection 512(4)(5), rest, repailes, and unrelated business taxable income [essection 512(4)(5), rest, repailes, and unrelated business seativities on a 18 for section of the contribution of the contributio

Schedule A (Form 990 or 990-EZ) 2006 FOUNDATION, INC.

Private School Questionnaire (See page 9 of the instructions.)

(To be completed ONLY by schools that checked the box on line 6 in Part IV) Yes No Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, 30 and other written communications with the public dealing with student admissions, programs, and scholarships? 30 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of 31 solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known 31 to all parts of the general community it serves? If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.) Does the organization maintain the following: a Records indicating the racial composition of the student body, faculty, and administrative staff? 32a b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? 32b c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student 32c admissions, programs, and scholarships? 32d d Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.) Does the organization discriminate by race in any way with respect to: 33a a Students' rights or privileges? b Admissions policies? 33b c Employment of faculty or administrative staff? 33d d Scholarships or other financial assistance? Educational policies? 331 Use of facilities? 33g Athletic programs? 33h h Other extracurricular activities? If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.) 34 a Does the organization receive any financial aid or assistance from a governmental agency? 34a b Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement. Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation

	ONLY by an eligible organizant belongs to an affiliated gr		b ☐ if yo	u check	ed "a" and "limi	ed conti	ol" prov	
	its on Lobbying Ex			.	(a) Affiliated gr	oup		(b) To be completed for all electing organizations
(The term "	expenditures" means amou	nts paid or incurred.)			totals			electing organizations
				1	N/A			
Total lobbying expenditures to it	ofluence public opinion (gra	issroots lobbying)		36				
Total lobbying expenditures to it	nfluence a legislative body (direct lobbying)		37				
Total lobbying expenditures (ad				38			_	
Other exempt purpose expendit	ures		······ -	39			-	
Total exempt purpose expenditu	ires (add lines 38 and 39)		L	40				
Lobbying nontaxable amount. Enter the amount from the following table -								
If the amount on line 40 is -		nontaxable amount is -						
Not over \$500,000	20% of the amo	ount on line 40)					
Over \$500,000 but not over \$1,000,0	00 \$100,000 plus 1	15% of the excess over \$500,000	, [}	41	************	******		
Over \$1,000,000 but not over \$1,500 Over \$1,500,000 but not over \$17,00	,000 \$175,000 plus	10% of the excess over \$1,000,00	n (
Over \$1,500,000 but not over \$17,00 Over \$17,000,000	0,000 \$225,000 plus :	239 Of file excess over 41/200/000	` J					
a to the same of t	/enter 25% of line 41)	•••••		42				
	nter =0= if line 42 is more th	an line 36		43			\perp	
	nter -0- if line 41 is more th	ian line 38		44				
4 Subtract line 41 from line 38. E	into o mano mano mano m							
Caution: If there is an amou	int on either line 43 or lin	ne 44, you must file Form	4720.					
}}	Some organizations that ma	Averaging Period Under a section 501(h) election tructions for lines 45 throug	do not have to jh 50 on page 1	comple 13 of the	te all of the five instructions.)		s	27/2
(8	Some organizations that ma	de a section 501(h) election	do not have to jh 50 on page 1	comple 13 of the	te all of the five instructions.)	riod	s	N/A
Calendar year (or	Some organizations that ma	ide a section 501(h) election tructions for lines 45 throug	do not have to jh 50 on page 1	comple 13 of the	te all of the five instructions.) r Averaging Pe		s	N/A (e) Total
Calendar year (or iscal year beginning in)	Some organizations that ma below. See the ins (a)	ide a section 501(h) election tructions for lines 45 throug Lobbying Expe (b)	do not have to gh 50 on page 1 enditures Durin (c)	comple 13 of the	te all of the five instructions.) r Averaging Pe	riod (d)	S	(e)
calendar year (or iscal year beginning in) > 5 Lobbying nontaxable amount	Some organizations that ma below. See the ins (a)	ide a section 501(h) election tructions for lines 45 throug Lobbying Expe (b)	do not have to gh 50 on page 1 enditures Durin (c)	comple 13 of the	te all of the five instructions.) r Averaging Pe	riod (d)	S	(e)
salendar year (or iscal year beginning in) 5 Lobbying nontaxable amount	Some organizations that ma below. See the ins (a)	ide a section 501(h) election tructions for lines 45 throug Lobbying Expe (b)	do not have to gh 50 on page 1 enditures Durin (c)	comple 13 of the	te all of the five instructions.) r Averaging Pe	riod (d)	S	(e)
salendar year (or iscal year beginning in) 5 Lobbying nontaxable amount	Some organizations that ma below. See the ins (a)	ide a section 501(h) election tructions for lines 45 throug Lobbying Expe (b)	do not have to gh 50 on page 1 enditures Durin (c)	comple 13 of the	te all of the five instructions.) r Averaging Pe	riod (d)	s	(e)
Calendar year (or iscal year beginning in) 15 Lobbying nontaxable amount	Some organizations that ma below. See the ins (a)	ide a section 501(h) election tructions for lines 45 throug Lobbying Expe (b)	do not have to gh 50 on page 1 enditures Durin (c)	comple 13 of the	te all of the five instructions.) r Averaging Pe	riod (d)	s	(e)
Salendar year (or iscal year beginning in) 15 Lobbying nontaxable amount 16 Lobbying ceiling amount (150% of line 45(e))	Some organizations that ma below. See the ins (a)	ide a section 501(h) election tructions for lines 45 throug Lobbying Expe (b)	do not have to gh 50 on page 1 enditures Durin (c)	comple 13 of the	te all of the five instructions.) r Averaging Pe	riod (d)	S	(e)
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f Grants to other organizations for lobbying purposes g Direct contact with legislators, their staffs, government officials, or a legislative body h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means

1 Total lobbying expenditures (Add lines c through h.)

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.

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		ALBERT WISNER PU	DT.TC T.TRDADY	7			
chadula A	4 (Form 990 or 990-F7) 2006	FOUNDATION, INC.	DUIC HIDIAK		272640) [Page 7
Part V	I Information Reg	arding Transfers To and	Fransactions and	Relationships With Nonchar	itable		
	Exempt Organiz	ations (See page 13 of the instruct	tions.)				
1 Did	the reporting organization dis	rectly or indirectly engage in any of the	following with any other o	organization described in section			
		ection 501(c)(3) organizations) or in s		tical organizations?	Į.	Yes	No
		anization to a noncharitable exempt or			51a(i)		X
(i)	Cash				••••		X
	ner transactions:	e with a noncharitable exempt organiz	ation		b(i)		Х
(1) (11)	Durchages of agents from a	noncharitable exempt organization			b(ii)		X
(111)	Rental of facilities, equipmen	nt, or other assets		•••••	D(III)		X
					b(IV)		Х
(v) Loans or loan guarantees				D(V)		X
(vi) Performance of services or	membership or fundraising solicitation	ns		b(vi)		X
c Sh	aring of facilities, equipment,	mailing lists, other assets, or paid emp	ployees	t the fitting and the section of the	<u>C</u>		
d Ift	the answer to any of the above	e is "Yes," complete the following sche	dule. Column (b) should a	lways show the fair market value of the			
go	ods, other assets, or services	given by the reporting organization. It nent, show in column (d) the value of t	r the organization received	services received.		N/A	1
			ne goods, other assots, or	(d)			
(a) Line no.	(b) Amount involved	(c) Name of noncharitable exer	npt organization	Description of transfers, transactions, an	d sharing at	rangei	ments
52 a is	s the organization directly or i	ndirectly affiliated with, or related to, o	ne or more tax-exempt or	ganizations described in section 501(c) of	Yes	Г	X No
(Code (other than section 501(c)(3)) or in section 527? schedule: N/A			103	_	aal 140
<u>b</u> 1	f "Yes," complete the following	<u> </u>	(b)	(c)			
) Name of o	a) organization	Type of organization	Description of relati	onship		
				- 			

Schedule A (Form 990 or 990-EZ) 2006

Part III - Statement of Organization's Primary Exempt Purpose Form 990-EZ

Statement

Explanation

FUNDRAISING FOR THE ALBERT WISNER PUBLIC LIRARY

Form CHAR500

This form used for Article 7-A, EPTL, and dual filers (replaces forms CHAR 497, CHAR 010 and CHAR 006)

Annual Filing for Charitable Organizations

New York State Department of Law (Office of the Attorney General)
Charities Bureau - Registration Section
120 Broadway
New York, NY 10271

2006

Open to Public Inspection

CHAR 010 and CHAR 006)	www.oag.state.ny.us/cnarities/cnarities.ntmi	
1. General Information		206
a. For the fiscal year beginn	ing (mm/dd/yyyy) $01/01/2006$ and ending (mm/dd/yyyy) $12/31/2$	
b. Check if applicable for NYS: Address change	c. Name of organization ALBERT WISNER PUBLIC LIBRARY	d. Fed. employer ID no. (EIN) 20-3272640
Name change	FOUNDATION, INC.	e. NY State registration no. 21-56-81
Initial filing Final filing Amended filing	Number and street (or P.O. box if mail not delivered to street address) Room/suite 2 COLONIAL AVENUE	845 986 1047
NY registration pending	City or town, state or country and ZIP + 4 WARWICK, NY 10990	g. Email N/A
2. Certification - Two Sig	natures Required	
We certify under penalties	of perjury that we reviewed this report, including all attachments, and to the best	of our knowledge and belief, they are
true, correct and complete	in accordance with the laws of the state of New York applicable to the coper.	President 4/20/07
a. President or Authorized Of	Signature Printed Name	Hi Treasurer 4/19/07
b. Chief Financial Officer or T	teasurer Signature Printed Name	Title Date
3. Annual Report Exemp	ion Information	
N		
TTP	ort exemption (Article 7-A registrants and dual registrants) I contributions from NY State (including residents, foundations, corporations, gov	ernment agencies, etc.) did not exceed
\$25.0	il contributions from NY State (including residents, foorbatteris, objections) governors and the organization did not use the services of a professional fund raiser (PF ibutions during this fiscal year.	R) or fund raising counsel (FRC) to solicit
	e a la company de la constant de la	RC was used and either: 1) the
	The second on allocation from a federated fund. United Way of incorporated	Colling inty appear and commoditions
from	all other sources did not exceed \$25,000 <u>or</u> 2) it received all or substantially all of roment agency to which it submitted an annual financial report similar to that requ	rired by Article 7-A).
	counting (EDT), registrants and dual registrants)	
b. EPTL annual report ex Check ■ X if tot	al gross receipts for this fiscal year did not exceed \$25,000 and the assets (market	t value) of the organization did not
	ad \$25,000 at any time during this fiscal Year.	
	trants claiming the annual report exemption under the one law under which they are register both laws, simply complete part 1 (General Information), part 2 (Certification) and part 3 (Annual Information), part 2 (Certification) and part 3 (Annual Information).	
report exemptions under Do ni	both laws, simply complete part of defeating the following schedules and <u>to not submit any after</u> the following schedules and <u>to not submit any after</u>	chments to this form
4. Article 7-A Schedules	the state of the same and the following for this fiscal ve	ar:
If you did not check the	rticle 7-A annual report exemption above, complete the following for this fiscal ye a professional fund raiser, fund raising counsel or commercial co-venturer for fund raising a	activity in NY State? Yes* No
* If "Ves" complete Sc	edule 4a.	
b. Did the organization reco * If "Yes", complete Sc	ive government contributions (grants)?	
	st page for summary of fee requirements.	
Indicate the filing fee(s) y	ou are submitting along with this form:	Submit only one check or money order for the
a. Article 7.A filing fee	\$ \$	total fee, payable to "NYS Department of Law
c. Total fee	\$	
J		

6. Attachments: For organizations that are not claiming annual report exemptions under both laws, see last page for required attachments.

- Mail completed form with required schedules, fee and attachments to the address at the top of this page -