Public Disclosure Copy

Form 990

PLEASE SIGN THIS COPY AND RETAIN FOR YOUR RECORDS

Public Inspection Requirement

An exempt organization must make available for public inspection, upon request and without charge, a copy of its original and amended annual information returns. Each information return must be made available from the date it is required to be filed (determined without regard to any extensions), or is actually filed, whichever is later. An original return does not have to be made available if more than 3 years have passed from the date the return was required to be filed (including any extensions) or was filed, whichever is later. An amended return does not have to be made available if more than 3 years have passed from the date it was filed.

An annual information return includes an exact copy of the return (Form 990 or 990–EZ and amended return, if any) and all schedules, attachments, and supporting documents filed with the IRS. In the case of a tax-exempt organization other than a private foundation, the names and addresses of contributors to the organization need not be disclosed, and Schedule B has been redacted accordingly.

For returns filed by Section 501(c)(3) organizations after August 17, 2006, Form 990-T must also be made available for public inspection. However, only those schedules, statements, and attachments to Form 990-T that relate to the imposition of the unrelated business income tax must be made available for public inspection.

This copy of the return is provided only for Public Disclosure purposes. Any confidential information regarding donors, and schedules or attachments to Form 990-T that do not relate to the calculation of unrelated business income tax, have been removed.

			** PUBLIC DISCLOSURE COP Return of Organization Exempt Fi		ncome Tax	OMB No. 1545-0047	
Form 990 Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)						2022	
1 011	Do not enter social security numbers on this form as it may be made public.					Open to Public	
Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information.							
AF	or th	e 2022 calend	ar year, or tax year beginning $ m JUL1$, 2022 and e	nding J	<u>UN 30, 2023</u>		
B c a	heck if pplicab	ole: C Name or	organization		D Employer identification	ation number	
	Addre		WIN PUBLIC LIBRARY TRUST				
	Name Chang	ge Doing b	usiness as		38-240496	4	
	Initial return Final return	Number	and street (or P.O. box if mail is not delivered to street address) R WEST MERRILL	Room/suite	E Telephone number 248-647-7	339	
	termir	n_	own, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	449,478.	
	Amen return	nded DTDM	INGHAM, MI 48009-1483		H(a) Is this a group ret		
	Applic tion	^{ca-} F Name a	nd address of principal officer: JENNIFER WHEELER		for subordinates?	Yes X No	
	pendi	SAME	AS C ABOVE		H(b) Are all subordinates inc	luded? Yes No	
<u>I</u> T	ax-ex	empt status:		527	If "No," attach a li	st. See instructions	
JV	Vebsi	ite: WWW.	BALDWINLIB.ORG		H(c) Group exemption		
	_	f organization:	Corporation X Trust Association Other	L Year	of formation: 1981 M	State of legal domicile: MI	
Pa	art I	Summary					
e	1		e the organization's mission or most significant activities: FINAN	CIALL	Y ASSIST OPE	RATIONS OF	
anc			Y LIBRARY				
Governance		Check this bo			1.1	_	
Š						6 6	
			ependent voting members of the governing body (Part VI, line 1b)			0	
Activities &			of individuals employed in calendar year 2022 (Part V, line 2a)			9	
tivił	6	Total number	of volunteers (estimate if necessary)			0.	
Ac			d business revenue from Part VIII, column (C), line 12			0.	
	<u>a</u>	Net unrelated	business taxable income from Form 990-T, Part I, line 11	<u></u>	Prior Year	Current Year	
	8	Contributions	and grants (Part VIII, line 1h)		79,449.	82,328.	
Revenue	9				0.	0.	
ver		•	ce revenue (Part VIII, line 2g) come (Part VIII, column (A), lines 3, 4, and 7d)		155,491.	98,920.	
Re			(Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	0.	
			- add lines 8 through 11 (must equal Part VIII, column (A), line 12)		234,940.	181,248.	
			nilar amounts paid (Part IX, column (A), lines 1-3)		0.	0.	
			o or for members (Part IX, column (A), line 4)		0.	0.	
	46		compensation, employee benefits (Part IX, column (A), lines 5-10)		0.	0.	
Expenses	16a		undraising fees (Part IX, column (A), line 11e)		0.	0.	
per	b			0.			
ы	17		es (Part IX, column (A), lines 11a-11d, 11f-24e)		199,970.	127,412.	
			s. Add lines 13-17 (must equal Part IX, column (A), line 25)		199,970.	127,412.	
			expenses. Subtract line 18 from line 12		34,970.	53,836.	
or					ginning of Current Year	End of Year	
Assets or d Balances	20	Total assets (F	Part X, line 16)		2,030,373.	2,119,494.	
Ast	21	Total liabilities	(Part X, line 26)		0.	0.	
Fun			iund balances. Subtract line 21 from line 20		2,030,373.	2,119,494.	
	art II						
Und	er pena	alties of perjury,	declare that I have examined this return, including accompanying schedules a	and stateme	ents, and to the best of my l	nowledge and belief, it is	
true,	corre	ct, and complete	Declaration of preparer (other than officer) is based on all information of whic	ch preparer	has any knowledge.		

Sign	Signature of off	ficer				Date	
Here	JENNIFE	R WHEELER, PRESIDE	NT				
	Type or print na	ame and title					
	Print/Type prep	arer's name	Preparer's sign	ature	Date	Check	PTIN
Paid	TINA M.	PETERS	TINA M.	PETERS	03/13	/24 self-employed	P00904574
Preparer	Firm's name	PLANTE & MORAN, P	LLC			Firm's EIN 38-	1357951
Use Only	Firm's address	P.O. BOX 307					
		SOUTHFIELD, MI 48	037			Phone no. $248-$	352-2500
May the I	RS discuss this	return with the preparer shown abo	ove? See instruc	ctions			X Yes No
000001 10 1		or Department Reduction Act Noti	an ann tha ann	orata instructions			Earm 990 (2022)

232001 12-13-22 LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2022)

	BALDWIN PUBLIC LIBRARY TRUST 38-2404964 Page 2
Par	
1	Check if Schedule O contains a response or note to any line in this Part III
	BALDWIN PUBLIC LIBRARY ENRICHES BIRMINGHAM AND PARTICIPATING
	COMMUNITIES BY PROVIDING OPPORTUNITIES AND RESOURCES FOR INDIVIDUALS
	OF ALL AGES AND BACKGROUNDS TO LEARN, CONNECT, AND DISCOVER.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
3	If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services?
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No If "Yes," describe these changes on Schedule O.
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 \$15,088. including grants of \$) (Revenue \$)
	YOUTH SERVICES PROGRAMS PRESENTED TO ENCOURAGE YOUNG PEOPLE TO USE THE
	LIBRARY. FIRST GRADE/FIRST CARD, BOOK DISCUSSION GROUPS, SUMMER READING, HALLOWEEN PROGRAM, AUTHOR VISITS, AND MISCELLANEOUS PROGRAMS
	THROUGH THE YEAR
4b	(Code:) (Expenses \$23,957 • including grants of \$) (Revenue \$)
	ADULT SERVICES PROGRAMS SUMMER READING, AUTHOR VISITS, BOOK DISCUSSION
	GROUPS, MISCELLANEOUS PROGRAMS
	0.002
4c	(Code:) (Expenses \$8,803. including grants of \$) (Revenue \$) YOUNG ADUL'T SERVICES PROGRAMS PRESENTED TO ENCOURAGE TEENS TO USE THE
	LIBRARY. TEEN CONSULTANTS GROUP, SUMMER READING, BOOK DISCUSSION GROUPS
	FOR TEENS/YOUNG ADULTS, MISCELLANEOUS PROGRAMS OF INTEREST THROUGH THE
	YEAR.
_	
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ 421. including grants of \$) (Revenue \$)
4e	Total program service expenses 48,269.
00000	Form 990 (2022
232002	¹²⁻¹³⁻²² 3

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Part IV Checklist of Required Schedules

BALDWIN PUBLIC LIBRARY TRUST

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			1
	If "Yes," complete Schedule A	1	Х	<u> </u>
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	<u> </u>
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		<u> </u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X X
5	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? If "Yes," complete Schedule C, Part III	5		X X
6	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? If "Yes," complete Schedule D, Part I	6		X X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			37
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			77
_	Schedule D, Part III	8		<u>x</u>
9	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?			v
40	If "Yes," complete Schedule D, Part IV	9		X X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			x
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		
11	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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	110		x
h	Part VI	<u>11a</u>		
b		11b		x
~	assets reported in Part X, line 16? <i>If</i> "Yes," <i>complete Schedule D, Part VII</i> Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
U	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
Ь	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			<u> </u>
ŭ	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		x
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		x
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		x
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If</i> "Yes," <i>complete Schedule E</i>	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
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			1
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	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? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			-
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			1
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II	21	0000	X
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 BALDWIN PUBLIC LIBRARY TRUST

 Part IV
 Checklist of Required Schedules (continued)

	checkiet of frequined constance (continuea)		Yes	Ne
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		162	No
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		x
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	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%			x
07	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,	21		
20	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>			
-	"Yes," complete Schedule L, Part IV	28a		x
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If</i>			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and		37	
0 -	Part V, line 1	34	Х	x
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		
a	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	0.5%		
26	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36		36		x
37	If "Yes," complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization	30		- 23
37	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	х	
Par				
	Check if Schedule O contains a response or note to any line in this Part V	<u></u> .	<u></u>	
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
с	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		
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Form	990 (2022) BALDWIN PUBLIC LIBRARY TRUST		38-2404	964	P	age 5
Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)					
					Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,					
	filed for the calendar year ending with or within the year covered by this return	2a	0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ns?		2b		<u> </u>
				3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule	o		3b		<u> </u>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	uthorit	y over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial a	ccount)?	4a		X
b	If "Yes," enter the name of the foreign country					
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Ac	count	s (FBAR).			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		<u>X</u>
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transact			5b		<u> </u>
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	e orgar	ization solicit			
	any contributions that were not tax deductible as charitable contributions?			<u>6a</u>		<u> </u>
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	ons or	gifts			
	were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).					77
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser	/ices pr	ovided to the payor?	7a		_X_
				7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	s requ	red			37
	to file Form 8282?			7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	-			37
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit co		?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra			7f		<u> </u>
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo			7g		
-	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization			7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	by the				
				8		
9	Sponsoring organizations maintaining donor advised funds.					
a	Did the sponsoring organization make any taxable distributions under section 4966?			9a		
b				9b		
10	Section 501(c)(7) organizations. Enter:					
a	Initiation fees and capital contributions included on Part VIII, line 12	10a				
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter:					
	Gross income from members or shareholders	<u>11a</u>				
b	Gross income from other sources. (Do not net amounts due or paid to other sources against					
40-	amounts due or received from them.)	11b		10-		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	I		12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			13a		
a	Is the organization licensed to issue qualified health plans in more than one state?			ISa		
h	Enter the amount of reserves the organization is required to maintain by the states in which the					
D		126				
~	organization is licensed to issue qualified health plans	13b 13c				
	Enter the amount of reserves on hand			14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedul			14a 14b		
ы 15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuner					
15				15		х
	excess parachute payment(s) during the year?			15		~ ~
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	incom	e?	16		Х
10	If "Yes," complete Form 4720, Schedule O.	ncom	e?			~ ~
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any act	ivition				
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?			17		
	If "Yes," complete Form 6069.					
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X

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes 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	

4.		5	Yes	No
18	Enter the number of voting members of the governing body at the end of the tax year 1a	4		
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b		5		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	4		
2	affine disease the start of the second second	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
Ŭ	of officers, directors, trustees, or low employees to a management company or other percent?	3		х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
- 7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	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	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		37
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		X
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.	10-	x	
12a b	Did the organization have a written conflict of interest policy? <i>If</i> " <i>No</i> ," <i>go to line 13</i>	12a 12b	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	120		
Ŭ	on Schedule O how this was done	12c		х
13	Did the organization have a written whistleblower policy?	13		X
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		Х
b	Other officers or key employees of the organization	15b		Х
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		X
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			
0	exempt status with respect to such arrangements?	16b		
	tion 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	is only)	availat	ble
	for public inspection. Indicate how you made these available. Check all that apply.			
10	Own website Another's website I Upon request Other (explain on Schedule O)	dfiner	oiol	
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, ar	u inan	CIAI	
20	statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records			
20	PAUL GILLIN - 248-554-4683			
	300 WEST MERRILL, BIRMINGHAM, MI 48009-1483			
232006	5 12-13-22	Forr	1 990	(2022)
	7			、/

2022.05060 BALDWIN PUBLIC LIBRARY TR 26153-12

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

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest 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.

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

(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average hours per week	box	not cl , unles	ss pei	more rson i	than o is both pr/trus	n an	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(1) MELISSA MARK TRUSTEE	1.00	x						0.	0.	0.
(2) FRANK PISANO	1.00					\vdash			0.	0.
TRUSTEE	1.00	х						0.	0.	0.
(3) KAREN ROCK	1.00									
VICE PRESIDENT & TRUSTEE		х		x				0.	0.	0.
(4) JAMES SUHAY	1.00									
TRUSTEE		Х						0.	0.	0.
(5) JENNIFER WHEELER	1.00									
PRESIDENT & TRUSTEE		Х		Х				0.	0.	0.
(6) DANIELLE RUMPLE	1.00									
SECRETARY & TRUSTEE		Х		Х				0.	0.	0.
		-								
						$\left \right $				
						-				
						-				
		1								Farm 990 (0000)

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232007 12-13-22

Form 990 (2022)

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Form 990 (2022) BALDWIN	PUBLIC I	ΓIΕ	RA	RY	ΎΤ	'RU	SI	1	38-24	0496	54	Page 8
Part VII Section A. Officers, Directors, True	stees, Key Em	ploy	ees,	and	l Hig	ghes	t C	ompensated Employee	s (continued)			
(A) Name and title	(B) Average hours per week (list any hours for related organizations	tee or director of xo	not cl , unles cer an	Posi heck i ss per	more rson i irecto	than c s both r/trust	tee)	(D) Reportable compensation from the organization (W-2/1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MIS 1099-NEC)	s c C/	(F Estim amou oth comper from organiz and re	ated nt of er isation the zation
		Individual tr	In stitutional trustee	Officer	Key employee	Highest compensated employee	Former					
		-						0.		_		
1b Subtotal c Total from continuation sheets to Part V								0.		0.		0.
d Total (add lines 1b and 1c)								0.		0.		0.
2 Total number of individuals (including but i compensation from the organization								eceived more than \$100,	000 of reportable	.		0
										_	Ye	
3 Did the organization list any former officer line 1a? <i>If</i> "Yes," <i>complete Schedule J for</i> .			•	•	-		Ŭ				3	X
4 For any individual listed on line 1a, is the s	um of reportab	le co	mpe	ensa	tion	and	oth	ner compensation from the	ne organization			
and related organizations greater than \$15	0,000? If "Yes,	," <i>CO</i>	mple	ete S	Sche	edule	e J f	or such individual	lual for convicco	-	4	X
5 Did any person listed on line 1a receive or rendered to the organization? <i>If</i> "Yes." corr											5	x
Section B. Independent Contractors			51 30		5013	011 .					-	1
1 Complete this table for your five highest co the organization. Report compensation for										ensatior	n from	
(A)								(B)			(C)	
Name and busines	saddress	NC	ONE	5				Description of s	ervices	Con	npensa	tion
							_					
2 Total number of independent contractors (\$100,000 of compensation from the organ		ot lir	nitec	to t	thos C		ted	above) who received mo	ore than			
					-					Fo	orm 99) (2022)

232008 12-13-22

Pa	rt V	/111								_
			Check if Schedule O o	contains a respo	onse	or note to any line	<u>e in this Part VIII</u> (A)	(B)	(C)	D
							Total revenue	Related or exempt	Unrelated	Revenue excluded
								function revenue	business revenue	from tax under sections 512 - 514
nts	1		Federated campaigns							
Gra				<u>1b</u>						
Βu An			Fundraising events							
ilar İlar			Related organizations							
Sin's,			Government grants (contr							
ero		f	All other contributions, gifts,			00 000				
ĕ₹			similar amounts not included			82,328.				
Contributions, Gifts, Grants and Other Similar Amounts		-	Noncash contributions included in				01 200			
<u></u>		h	Total. Add lines 1a-1f				82,328.			
	_					Business Code				
ice	2	a								
er v		b								
n S /en		C								
grai Re		d								
Program Service Revenue		e	All - 41-							
ш.			All other program service							
			Total. Add lines 2a-2f							
	3		Investment income (includ	•			65,932.			65,932.
	4		other similar amounts) Income from investment of	of tax axampt be			05,552.			05,552.
	4 5					loceeus				
	5		Royalties	(i) Rea		(ii) Personal				
	6	а	Gross rents	6a						
	0	a b	Less: rental expenses	6b						
			Rental income or (loss)	6c						
			Net rental income or (loss)							
	7		Gross amount from sales of	(i) Securi	ies	(ii) Other				
	'	a	assets other than inventory	7a 301,21		() C				
		h	Less: cost or other basis	74501721						
Ð		~	and sales expenses	76268.23	30.					
Revenue		c	Gain or (loss)		38.					
Sev.			Net gain or (loss)				32,988.			32,988.
۲	8		Gross income from fundraisi							
Oŧ	Ŭ	u		of						
Ŭ			contributions reported on							
			Part IV, line 18	-	8a					
		b	Less: direct expenses		8b					
			Net income or (loss) from		nts					
			Gross income from gamin	•						
			Part IV, line 19	-	9a					
		b	Less: direct expenses		9b					
			Net income or (loss) from		s					
			Gross sales of inventory, I							
			and allowances		10a					
		b	Less: cost of goods sold							
			Net income or (loss) from		-					
<i>(</i> ^						Business Code				
suo e	11	а								
scellaneo Revenue		b								
ill: eve		с								
Miscellaneous Revenue		d	All other revenue							
<		е	Total. Add lines 11a-11d							
	12		Total revenue. See instruction	ons			181,248.	0.	0.	98,920.
23200	9 12-	-13-	22							Form 990 (2022

Form 990 (2022)

Page **9**

38-2404964

BALDWIN PUBLIC LIBRARY TRUST Part IX Statement of Functional Expenses

	Check if Schedule O contains a respons not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
7b,	8b, 9b, and 10b of Part VIII.	•	expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
0	Payroll taxes				
1	Fees for services (nonemployees):				
а	Management				
b	Legal				
С	Accounting	4,890.		4,890.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A), amount, list line 11g expenses on Sch 0.)				
2	Advertising and promotion	5,557.		5,557.	
3	Office expenses	5,152.		5,152.	
4	Information technology				
5	Royalties				
6	Occupancy				
7	Travel	1,100.		1,100.	
8	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
9	Conferences, conventions, and meetings	5,046.		5,046.	
0	Interest				
1	Payments to affiliates				
2	Depreciation, depletion, and amortization				
3	Insurance	981.		981.	
4	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 0.)				
а	ADMINISTRATION & OTHER	56,417.		56,417.	
b	PROGRAM EXPENSES	28,103.	28,103.		
с	BOOKS, VIDEOS, DVDS	20,166.	20,166.		
d	· · · ·	·	•		
	All other expenses				
5	Total functional expenses. Add lines 1 through 24e	127,412.	48,269.	79,143.	C
6	Joint costs. Complete this line only if the organization	,	.,		-
-	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

11 2022.05060 BALDWIN PUBLIC LIBRARY TR 26153-12

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33 Total liabilities and net assets/fund balances

Form **990** (2022)

BALDWIN	PUBLIC	LIBRARY	TRUST
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		Check if Schedule O contains a response or not	e to any line in this Part X			
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			1	
	2	Savings and temporary cash investments		474,462.	2	497,009.
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net			4	
	5	Loans and other receivables from any current or	former officer, director,			
		trustee, key employee, creator or founder, subst	antial contributor, or 35%			
		controlled entity or family member of any of thes	se persons		5	
	6	Loans and other receivables from other disqualit				
		under section 4958(f)(1)), and persons described	l in section 4958(c)(3)(B)		6	
ts	7	Notes and loans receivable, net			7	
Assets	8	Inventories for sale or use			8	
Ä	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment: cost or other				
		basis. Complete Part VI of Schedule D				
	b	Less: accumulated depreciation			10c	
	11	Investments - publicly traded securities		1,555,911.	11	1,622,485.
	12	Investments - other securities. See Part IV, line 1	1		12	
	13	Investments - program-related. See Part IV, line	11		13	
	14	Intangible assets			14	
	15	Other assets. See Part IV, line 11			15	
	16	Total assets. Add lines 1 through 15 (must equa	al line 33)	2,030,373.	16	2,119,494.
	17	Accounts payable and accrued expenses			17	
	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities		20		
	21	Escrow or custodial account liability. Complete I	Part IV of Schedule D		21	
Se	22	Loans and other payables to any current or form	ner officer, director,			
Liabilities		trustee, key employee, creator or founder, subst	antial contributor, or 35%			
iabi		controlled entity or family member of any of thes	se persons		22	
	23	Secured mortgages and notes payable to unrela	ted third parties		23	
	24	Unsecured notes and loans payable to unrelated			24	
	25	Other liabilities (including federal income tax, pa	-			
		parties, and other liabilities not included on lines	s 17-24). Complete Part X			
		of Schedule D			25	
	26	Total liabilities. Add lines 17 through 25		0.	26	0.
6		Organizations that follow FASB ASC 958, che	ck here X			
ice		and complete lines 27, 28, 32, and 33.		242 560		200 400
alan	27			343,568.	27	382,422.
Βŝ	28			1,686,805.	28	1,737,072.
oun		Organizations that do not follow FASB ASC 9	58, check here			
Ē		and complete lines 29 through 33.				
ts c	29	Capital stock or trust principal, or current funds			29	
Net Assets or Fund Balances	30	Paid-in or capital surplus, or land, building, or ec			30	
ťΑ	31	Retained earnings, endowment, accumulated in	ſ	0 0 0 0 0 0 0 0	31	0 110 404
Ne	32	Total net assets or fund balances		2,030,373.	32	2,119,494.
	33	Total liabilities and net assets/fund balances		2,030,373.	33	2,119,494.

Form 990 (2022)
Part X Balance Sheet

Form	1990 (2022) BALDWIN PUBLIC LIBRARY TRUST	38	-2404964	Pag	_{ge} 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	181		
2	Total expenses (must equal Part IX, column (A), line 25)	2	127	/,4:	12.
3	Revenue less expenses. Subtract line 2 from line 1	3	53	8,8	36.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	2,030),3'	<u>73.</u>
5	Net unrealized gains (losses) on investments	5	35	5,28	85.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	2,119),4	94.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	О.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	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:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	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:				
	Separate basis X Consolidated basis Both consolidated and separate basis				
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the				
	review, or compilation of its financial statements and selection of an independent accountant?			X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	edule C).		
3a	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?		<u>3a</u>		_X_
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			000	

Form **990** (2022)

SCHEDULE A	١
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Department of the Treasury Internal Revenue Service

(Form 990)

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 for instructions and the latest information.

OMB No. 1545-0047
2022
Open to Public Inspection

Т

Name	of t	he organization			~-				identification number
Devi				LIBRARY TRU					8-2404964
Part		Reason for Public (Sharity Status.	(All organizations must o	complete th	nis part.) S	see instruction	S.	
The or	gani	zation is not a private found	ation because it is: (F	For lines 1 through 12, c	heck only	one box.)			
1 [A church, convention of ch	urches, or associatio	n of churches described	l in sectio	on 170(b)([.]	1)(A)(i).		
2		A school described in sect	ion 170(b)(1)(A)(ii). (Attach Schedule E (Forr	n 990).)				
3 [A hospital or a cooperative	hospital service orga	anization described in s	ection 170	(b)(1)(A)(i	ii).		
4 [A medical research organiz	ation operated in cor	njunction with a hospital	described	in sectio	on 170(b)(1)(A)(iii). Enter	the hospital's name,
		city, and state:							
5 [An organization operated for	or the benefit of a col	lege or university owned	l or operat	ed by a go	overnmental u	nit describe	ed in
		section 170(b)(1)(A)(iv). (0	Complete Part II.)						
6		A federal, state, or local go		nental unit described in	section 17	70(b)(1)(A)	(v).		
7	7	An organization that norma	-					ne general r	oublic described in
• _		section 170(b)(1)(A)(vi). (C			onn a gove	Similar		ie general j	
8		A community trust describe			+ 11)				
9	=	An agricultural research org				ad in coniu	unction with a	land grant	collogo
5 L		or university or a non-land-	•			-		-	-
		, , ,	grant college of agrici	ulture (see instructions).		name, city	, and state of	the college	
10 [university:	II						
10 🗌		An organization that norma	•				-	•	•
		activities related to its exen		-					-
		income and unrelated busir		(less section 511 tax) fro	om busines	sses acqui	red by the org	anization a	ifter June 30, 1975.
	_	See section 509(a)(2). (Co							
11		An organization organized a	-	•	•				
12	X	An organization organized a	-	-	-			•	
		more publicly supported or	-						Check the box on
		lines 12a through 12d that	describes the type of	f supporting organization	n and com	plete lines	12e, 12f, and	12g.	
а		Type I. A supporting orga	anization operated, s	upervised, or controlled	by its supp	ported org	anization(s), ty	pically by	giving
		the supported organization	on(s) the power to req	gularly appoint or elect a	majority c	of the direc	ctors or truste	es of the su	Ipporting
		organization. You must o	complete Part IV, Se	ections A and B.					
b	X	Type II. A supporting org	anization supervised	or controlled in connect	tion with its	s supporte	ed organizatio	n(s), by hav	ving
		control or management o	of the supporting orga	anization vested in the s	ame perso	ns that co	ntrol or manag	ge the supp	oorted
		organization(s). You mus	t complete Part IV,	Sections A and C.					
с] Type III functionally inte	grated. A supporting	g organization operated	in connect	tion with, a	and functional	ly integrate	d with,
		its supported organization	n(s) (see instructions)	. You must complete	Part IV, Se	ections A,	D, and E.		
d		Type III non-functionally	/ integrated. A supp	orting organization oper	ated in co	nnection v	vith its suppor	ted organiz	zation(s)
		that is not functionally int						-	
		requirement (see instruct	•	• •	•		-		
е		Check this box if the orga	,	•				II. Type III	
-		functionally integrated, or						., . , pe	
f	Ente	r the number of supported of		, , , , , , , , , , , , , , , , , , , ,	0 0				1
		vide the following information		d organization(s)					
<u> </u>	(i	Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga	anization listed ing document?	(v) Amount of	monetary	(vi) Amount of other
		organization		(described on lines 1-10	Yes	No	support (see ir	structions)	support (see instructions)
BAT.	ישט.	IN PUBLIC		above (see instructions))	100				
LIB			38-6004664	6	x			0.	121,542.
			50 0004004	0				0.	121, 542.
Total								0.	121,542.

Schedule	A (Form 990)) 2022
Part II	Suppor	t Sc

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.)

Se	ction A. Public Support		-	-	-		
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
	Public support. Subtract line 5 from line 4.						
Se	ction B. Total Support	1	1		Т	1	1
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources \dots						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities,					12	
13	First 5 years. If the Form 990 is for the	ne organization's f	ïrst, second, third,	fourth, or fifth tax	year as a section s	501(c)(3)	
<u>.</u>	organization, check this box and stop						
	ction C. Computation of Publi						
	Public support percentage for 2022 (I		•	(1)		14	%
15						15	. %
168	33 1/3% support test - 2022. If the o						
	stop here. The organization qualifies		-				
Ľ	33 1/3% support test - 2021. If the c	-					
47.	and stop here. The organization qual						
1/8	10% -facts-and-circumstances test						
	and if the organization meets the fact			-		-	
	meets the facts-and-circumstances te	-				172 and line 15 is	
C	10% -facts-and-circumstances test more and if the organization meets the organization me	-	-				
	more, and if the organization meets the						
19	organization meets the facts-and-circu Private foundation. If the organization				• • • •		
18	The organization in the organization	T GIG HOL CHECK A		a, 100, 17a, 01 17	D, OHEGK LINS DUX a		
						Solicaule A	1. S SSOJ LOLL

Schedule A			for Organizatio		LIBRARY		
Partin	Support	Schequie	ior Organizatio	ons Descri	oea in Secu	on ougranzi	1

(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.)

See	ction A. Public Support			•	-		
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ- ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
t	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						
c	Add lines 7a and 7b						
8 See	Public support. (Subtract line 7c from line 6.) ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9	Amounts from line 6						
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses acquired after June 30, 1975						
c	Add lines 10a and 10b						
	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the	ne organization's fi	rst, second, third,	fourth, or fifth tax	year as a section 5	501(c)(3) organiz	zation,
	check this box and stop here						
See	ction C. Computation of Public	ic Support Per	centage				
15	Public support percentage for 2022 (ine 8, column (f), d	livided by line 13,	column (f))		15	%
	Public support percentage from 2021					16	%
See	ction D. Computation of Inves	stment Income	e Percentage				
17	Investment income percentage for 20)22 (line 10c, colur	mn (f), divided by	line 13, column (f))		17	%
18	Investment income percentage from					18	%
19 a	33 1/3% support tests - 2022. If the	organization did r	not check the box	on line 14, and lin	e 15 is more than 3	33 1/3%, and lir	e 17 is not
	more than 33 1/3%, check this box a	-	•		••••		
k	33 1/3% support tests - 2021. If the	organization did r	not check a box o	n line 14 or line 19	a, and line 16 is mo	ore than 33 1/39	%, and
	line 18 is not more than 33 1/3%, che	ck this box and st	op here. The org	anization qualifies	as a publicly suppo	orted organizati	on
20	Private foundation. If the organization	on did not check a	box on line 14, 19	9a, or 19b, check t	his box and see ins	structions	
2320	23 12-09-22			_		Schedu	le A (Form 990) 2022
			16)			

2022.05060 BALDWIN PUBLIC LIBRARY TR 26153-12

Part IV Supporting Organizations

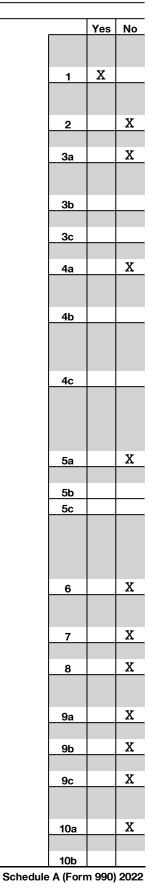
(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and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

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If* "Yes," *describe in* **Part VI** *how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.*
- **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If* "Yes," *explain in* **Part VI** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (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 Part VI.
- 7 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).
- 8 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).*
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI.**
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in* **Part VI.**
- c Did a disqualified person (as defined 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 Part VI.
- **10a** 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** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

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232024 12-09-22



BALDWIN PUBLIC LIBRARY TRUST Schedule A (Form 990) 2022

Pa	rt IV Supporting Organizations (continued)			
			Yes	N
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		X
b	A family member of a person described on line 11a above?	11b		X
с	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 Part VI.	11c		Х
Sec	tion B. Type I Supporting Organizations			
			Yes	N
1	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? <i>If</i> " <i>No</i> ," <i>describe in</i> Part VI <i>how the supported organization(s)</i> <i>effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported</i> <i>organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the</i>			
2	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. Did the organization operate for the benefit of any supported organization other than the supported	1		
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		1
Sec	tion C. Type II Supporting Organizations			
			Yes	N
1	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 Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1	X	1
sec	tion D. All Type III Supporting Organizations			
			Yes	N
4	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			

			100	110
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (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?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	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 Part VI the role the organization's			
	supported organizations played in this regard.	3		

Section E. Type III Functionally Integrated Supporting Organizations

1	Check the box next to the method that the org	anization used to satisfy	the Integral Part Test durin	a the year (see instructions).
-				

- The organization satisfied the Activities Test. Complete line 2 below. а
- The organization is the parent of each of its supported organizations. Complete line 3 below. b

с		The organization supported a governmental entity.	Describe in Part VI how	you supported a governmental entit	y (see instruction <u>s).</u>
---	--	---	-------------------------	------------------------------------	-------------------------------

- Activities Test. Answer lines 2a and 2b below. 2
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes." then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- 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 Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- 3 Parent of Supported Organizations. Answer lines 3a and 3b below.

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard. 232025 12-09-22

3b Schedule A (Form 990) 2022

2a

2b

3a

Yes No

17030313 147228 26153-1

2022.05060 BALDWIN PUBLIC LIBRARY TR 26153-12

18

1	Check here if the organization satisfied the Integral Part Test as a qualifyin	a trust on	Nov. 20. 1970 (explain in	Part VI). See instructions.
-	All other Type III non-functionally integrated supporting organizations must		•	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
C	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 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	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion 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	Distributable Amount. 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).

Schedule A (Form 990) 2022

232026 12-09-22

Part VI. See instructions.

and 4c. 8 Breakdown of line 7: a Excess from 2018 b Excess from 2019 c Excess from 2020 d Excess from 2021 e Excess from 2022

6 Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in

7 Excess distributions carryover to 2023. Add lines 3j

BALDWIN PUBLIC LIBRARY TRUST Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Sect	ion D - Distributions		Current Year		
_1	Amounts paid to supported organizations to accomplish exer	mpt purposes		1	
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported			
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	6	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	ne organization is responsive			
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2022 from Section C, line 6	9			
10	Line 8 amount divided by line 9 amount	10			
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2022	IS	(iii) Distributable Amount for 2022
1	Distributable amount for 2022 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2022 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2022				
a	From 2017				
b	From 2018				
C	From 2019				
d	From 2020				
e	From 2021				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2022 distributable amount				
<u> i</u>	Carryover from 2017 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2022 from Section D,				
	line 7: \$				
a	Applied to underdistributions of prior years				
b	Applied to 2022 distributable amount				
C	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2022, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				

Schedule A (Form 990) 2022

Schedule A (Form 990) 2022

Part V

Schedule A	(Form 990) 2022	BALDWIN					38-2404964	P <u>ag</u> e 8
Part VI	Supplemental Infor Part IV, Section A, lines line 1; Part IV, Section D, Section D, lines 5, 6, and (See instructions.)	r mation. Provid 1, 2, 3b, 3c, 4b, 4d , lines 2 and 3; Pa	le the explanati c, 5a, 6, 9a, 9b, rt IV, Section E.	ons required b 9c, 11a, 11b, a , lines 1c, 2a, 2	y Part II, line 10; I and 11c; Part IV, b, 3a, and 3b; Pa	Section B, lines 1 urt V, line 1; Part V	17b; Part III, line 12; and 2; Part IV, Sectior , Section B, line 1e; Pa	n C.
232028 12-09-2	2			21			Schedule A (Form 9	990) 2022

223451 11-15-22

Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Organization type (check one):

** PUBLIC DISCLOSURE COPY **

Schedule of Contributors

Attach to Form 990 or Form 990-PF. Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

2022

Employer identification number

3	8	_	2	4	0	4	9	6	4	
---	---	---	---	---	---	---	---	---	---	--

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**.

BALDWIN PUBLIC LIBRARY TRUST

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

X 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

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% 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 for an *exclusively* set in the set of the parts unless totaling the year for an *exclusively* for the parts unless totaling \$5,000 or more during the year for an *exclusively* set in the set of the parts unless totaling \$5,000 or more during the year for an *exclusively* set of the parts unless totaling \$5,000 or more during the year for an *exclusively* set of the parts unless totaling \$5,000 or more during the year for an *exclusively* set of the parts unless totaling \$5,000 or more during the year for an *exclusively* set of the parts unless totaling \$5,000 or more during the year for an *exclusively* set of the parts unless totaling \$5,000 or more during the year for an *exclusively* set of the parts unless totaling \$5,000 or more during the year for an *exclusively* set of the parts unless total set of the parts unless the set of the parts unless total set

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).

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990) (2022)

Schedule B (Form 990) (2022)

BALDWIN PUBLIC LIBRARY TRUST

TTA	LODDIC	DIDIVENT	TRODI	

Part I	Contributors (see instructions). Use duplicate copies of Part I if additiona	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$48,110.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$8,183.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$ <u>5,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

223452 11-15-22

17030313 147228 26153-1

Employer identification number

38-2404964

Page 2

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
.		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
·		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
.		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
.		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
:		\$	

Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

Schedule B (Form 990) (2022)

$17030313\ 147228\ 26153-1$

24 2022.05060 BALDWIN PUBLIC LIBRARY TR 26153-12

Employer identification number

Page 3

38-2404964

BALDWIN PUBLIC LIBRARY TRUST

Name of organization

Part II

Schedule I	B (Form 990) (2022)			Page 4			
Name of o	organization			Employer identification number			
BALDW	IN PUBLIC LIBRARY TRUST			38-2404964			
Part III	Exclusively religious, charitable, etc., contribution						
	from any one contributor. Complete columns (a) completing Part III, enter the total of exclusively religious, co	charitable, etc., contributions of \$1,000 or le	y. For organizations PSS for the year. (Enter this info. c	once.) \$			
(a) No.	Use duplicate copies of Part III if additional s	space is needed. I					
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held			
		(e) Transfer of gift					
	Transferee's name, address, a	nd ZIP + 4	Relationship of tra	nsferor to transferee			
(a) No. from							
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held			
	(e) Transfer of gift						
	Transferee's name, address, a	nd ZIP + 4	Relationship of tra	nsferor to transferee			
		[
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held			
	(e) Transfer of gift						
	Transferee's name, address, a	nd ZIP + 4	Relationship of tra	nsferor to transferee			
(a) No.			1				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held			
		(e) Transfer of gift					
			Deletionship of the	noferer to transfere			
	Transferee's name, address, a			nsferor to transferee			
		[
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25 2022.05060 BALDWIN PUBLIC LIBRARY TR 26153-12

Department of the Treasury

Internal Revenue Service

9 0)

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.



Employer identification number

38-2404964

Name of the organization

BALDWIN PUBLIC LIBRARY TRUST

		(a) Donor advised funds	(b) Funds and other accounts
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 w	iting that the assets held in donor advi	sed funds
	are the organization's property, subject to the organization's ex	clusive legal control?	Yes N
6	Did the organization inform all grantees, donors, and donor adv for charitable purposes and not for the benefit of the donor or impermissible private benefit?	donor advisor, or for any other purpose	e conferring
	rt II Conservation Easements. Complete if the orga		, Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (for example, recreation		of a historically important land area
	Protection of natural habitat	Preservation of	of a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualifie	d conservation contribution in the form	
	day of the tax year.		Held at the End of the Tax Yea
а	Total number of conservation easements		
b			
С	Number of conservation easements on a certified historic struc		
d	Number of conservation easements included in (c) acquired aft		
_	historic structure listed in the National Register		
3	Number of conservation easements modified, transferred, release year	ased, extinguished, or terminated by th	e organization during the tax
4	Number of states where property subject to conservation ease	ment is located	
5	Does the organization have a written policy regarding the perio	dic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it h	olds?	
6	Staff and volunteer hours devoted to monitoring, inspecting, ha		
7	Amount of expenses incurred in monitoring, inspecting, handlin	ng of violations, and enforcing conserv	ation easements during the year
8	Does each conservation easement reported on line 2(d) above	satisfy the requirements of section 170	D(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes 🛄 N
9	In Part XIII, describe how the organization reports conservation	easements in its revenue and expense	e statement and
	balance sheet, and include, if applicable, the text of the footno	te to the organization's financial staten	nents that describes the
D -	organization's accounting for conservation easements.		
Pai	rt III Organizations Maintaining Collections of A		ther Similar Assets.
	Complete if the organization answered "Yes" on Form 9		
1 a	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	, ,	1
	service, provide in Part XIII the text of the footnote to its finance		
b	If the organization elected, as permitted under FASB ASC 958,	-	
	art, historical treasures, or other similar assets held for public e	exhibition, education, or research in fur	therance of public service,
	provide the following amounts relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		
_	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of art, historical treas		al gain, provide
	the following amounts required to be reported under FASB AS	C 958 relating to these items:	
			¢
	Revenue included on Form 990, Part VIII, line 1		
b	Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X For Paperwork Reduction Act Notice, see the Instructions f		

Sche		PUBLIC LI							04964		age 2
Par	t III Organizations Maintaining C	ollections of A	rt, Hist	orical Tre	easures, o	r Other S	Similar	Assets	continu	ued)	
3	Using the organization's acquisition, accessi	on, and other recor	ds, check	any of the	following tha	t make sigr	nificant u	ise of its			
	collection items (check all that apply):										
а	Public exhibition		d 🗌	Loan or exc	hange progra	am					
b	Scholarly research		е 🗌	Other							
с	Preservation for future generations										
4	Provide a description of the organization's co	ollections and expla	ain how th	ney further th	ne organizatio	on's exemp	ot purpos	se in Part	XIII.		
5	During the year, did the organization solicit of	or receive donations	s of art, hi	storical trea	sures, or othe	er similar a	ssets				
	to be sold to raise funds rather than to be ma	aintained as part of	the organ	nization's co	llection?				Yes		No
Par	t IV Escrow and Custodial Arran	gements. Comp	olete if the	e organizatio	on answered	"Yes" on F	orm 990	, Part IV, I	line 9, or		
	reported an amount on Form 990, Pa	rt X, line 21.									
1a	Is the organization an agent, trustee, custodi	ian or other interme	ediary for	contribution	s or other as	sets not ind	cluded		_		_
	on Form 990, Part X?							L	Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the f	ollowing t	able:							
									Amount		
С	Beginning balance						1c				
d	Additions during the year						1d				
е	Distributions during the year						1e				
f	Ending balance						1f		_		
	Did the organization include an amount on F						/?		Yes		No
	If "Yes," explain the arrangement in Part XIII.						<u></u>				
Par	t V Endowment Funds. Complete							aana kaali	(-) [haali
		(a) Current year	+ (d)	Prior year	(c) Two yea	ITS DACK (C	a) Three y	ears back	(e) Four	years	раск
1a	Beginning of year balance		_								
b	Contributions										
С	Net investment earnings, gains, and losses										
d	Grants or scholarships										
е	Other expenditures for facilities										
	and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the curr		ce (line 1	g, column (a)) held as:						
а	Board designated or quasi-endowment		%								
b	Permanent endowment	%									
С		<u>%</u>									
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%.									
3a	Are there endowment funds not in the posse	ession of the organiz	zation tha	it are held a	nd administe	red for the					
	organization by:									Yes	No
	(i) Unrelated organizations								3a(i)		
	(ii) Related organizations								3a(ii)		
b	If "Yes" on line 3a(ii), are the related organization								3b		
4 Dar	Describe in Part XIII the intended uses of the tVI Land, Buildings, and Equipm		lowment f	unds.							
Fai	Complete if the organization answere		00 Part IV	/ lina 11a S	See Form 990) Dart X lir	no 10				
			,					al			
	Description of property	(a) Cost or basis (inves			t or other (other)		cumulate reciation	a	(d) Book	value	9
10	Land		anony	04313		depi	Solution				
-	Land										
b	Buildings										
	Leasehold improvements										
d	Equipment										
	Other		+V cel	рана (D) Инте 4		1					0.
Total	The most a through Te. (Column (a) must e	<u>qual FUIII 990, Par</u>		ш (р), Ш16 Т	<i>UC.J</i>				D (Form	990)	
								Sonedule		550)	-922

Complete if the organization answered "Yes" of	on Form 990, Part IV, line	11b. See Form 990, Part X, line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	l-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" of	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: Cost or end	l-of-vear market value
			or year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes" of		TId. See Form 990, Part X, line 15.	(h) Deeluuslus
	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.	15.)		
Complete if the organization answered "Yes" of	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)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990. Part X, col. (B) line	25.)		
 Liability for uncertain tax positions. In Part XIII, provide 	,	the organization's financial statements t	nat reports the
organization's liability for uncertain tax positions under			

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Schedule D (Form 990) 2022

Part VII Investments - Other Securities.

Schedule D (Form 990) 2022

Sche	dule D (Form 990) 2022 BALDWIN PUBLIC LIBRARY TRUS	т		38-2	404964	Page 4
Par	t XI Reconciliation of Revenue per Audited Financial Statemer	nts With F	Revenue per Re	turn.		
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.					
1	Total revenue, gains, and other support per audited financial statements			1	216	,533.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
а	Net unrealized gains (losses) on investments	2a	35,285.			
b	Donated services and use of facilities	2b				
с	Recoveries of prior year grants					
d	Other (Describe in Part XIII.)					
е	Add lines 2a through 2d			2e		<u>,285.</u>
3	Subtract line 2e from line 1			3	181,	,248.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIII.)	4b				
с	Add lines 4a and 4b			4c		0.
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.)				5		,248.
Pa	t XII Reconciliation of Expenses per Audited Financial Stateme	nts With	Expenses per H	Return.	,	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.					
1	Total expenses and losses per audited financial statements			1	127	,412.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:					
а	Donated services and use of facilities	2a		-		
b	Prior year adjustments			-		
С	Other losses			-		
d	Other (Describe in Part XIII.)					
е	Add lines 2a through 2d			2e		0.
3	Subtract line 2e from line 1			3	127	,412.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b			-		
b	Other (Describe in Part XIII.)	4b				
С	Add lines 4a and 4b			4c		0.
5	Total expenses. Add lines 3 and 4c . (<i>This must equal Form 990, Part I, line 18.</i>)			5	127	,412.
Pa	t XIII 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.

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SCHEDULE O (Form 990)

Department of the Treasury

Name of the organization

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for the latest information.



38-2404964

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

IDEA LAB EXPENSES

EXPENSES \$ 421. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

BALDWIN PUBLIC LIBRARY TRUST

FORM 990, PART VI, SECTION B, LINE 11B:

THE LIBRARY BOARD'S FINANCE COMMITTEE REVIEWS THE FORM 990 BEFORE IT IS

FILED.

FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY

30

AND FINANCIAL STATEMENTS AVAILABLE ON ITS WEBSITE AND COPIES OF POLICIES

ARE AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, PART XII, LINE 2C:

THERE HAVE BEEN NO CHANGES FROM PRIOR YEAR TO THE OVERSIGHT

RESPONSIBILITIES OF THE AUDIT COMMITTEE.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 232211 10-28-22

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SCH	IEDULE R
/	

(Form 990)

Department of the Treasury Internal Revenue Service

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Attach to Form 990.

OMB No. 1545-0047

2022 Open to Public Inspection

Employer identification number

38-2404964

Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization

BALDWIN PUBLIC LIBRARY TRUST

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity	cont	g) 512(b)(13) rolled ity?
				501(c)(3))		Yes	No
BALDWIN PUBLIC LIBRARY - 38-6004664							
300 WEST MERRILL STREET							
BIRMINGHAM, MI 48009	LIBRARY	MICHIGAN	115		N/A		х

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

Schedule R (Form 990) 2022

Schedule R (Form 990) 2022 BALDWIN PUBLIC LIBRARY TRUST

38-2404964 Page 2

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

(a)	(b)	(c)	(d)	(e)	(f)	(g)		1)	(i)	(j)			
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Predominant income (related, unrelated, excluded from tax under	Predominant income (related, unrelated, excluded from tax under	Share of total income	Share of end-of-year assets	Disprop alloca	ortionate tions?	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gener mana partn	^{Il or} Percentage ^{ing} ownership
		country)		sections 512-514)		455615	Yes	No	K-1 (Form 1065)	Yes	No		
										+			
										+			

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(C) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	Sec 512(I contr ent	(i) ction (b)(13) trolled tity?
		country)						Yes	No
									<u> </u>
									
									<u> </u>

BALDWIN PUBLIC LIBRARY TRUST Schedule R (Form 990) 2022

Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36. Part V

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.								
1	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?							
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		X				
	Gift, grant, or capital contribution to related organization(s)	1b		X				
	Gift, grant, or capital contribution from related organization(s)	1c		X				
	Loans or loan guarantees to or for related organization(s)	1d		X				
	Loans or loan guarantees by related organization(s)	1e		X				
f	Dividends from related organization(s)	1f		X				
g		1g		X				
h	Purchase of assets from related organization(s)	1h		X				
i	Exchange of assets with related organization(s)	1i		X				
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		X				
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		X				
	Performance of services or membership or fundraising solicitations for related organization(s)	11		X				
	Performance of services or membership or fundraising solicitations by related organization(s)	1m		X				
	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		X				
	Sharing of paid employees with related organization(s)	10		X				
р	Reimbursement paid to related organization(s) for expenses	1p		X				
	Reimbursement paid by related organization(s) for expenses	1q		X				
r	Other transfer of cash or property to related organization(s)	1r	X					
S	Other transfer of cash or property from related organization(s)	1s		X				
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.							

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
<u>(1)</u>			
(2)			
(3)			
(4)			
<u>(5)</u>			
(6)			

Schedule R (Form 990) 2022 BALDWIN PUBLIC LIBRARY TRUST

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(-)	(1-)	(-)	(-1)	1		(6)	()	0		(:)	(1)		(1.)
(a)	(b)	(c)	(d)	(€ Are	a ll	(f)	(g)	(ł	1)	(i)	(j)		(k)
Name, address, and EIN	Primary activity	Legal domicile	Predominant income	partnei 501(i org	rs sec.	Share of	Share of	Dispr tior allocat	opor- iate	Code V-UBI	Genera	al or P iina	Percentage
of entity		(state or foreign	excluded from tax under	org		total			ions?	of Schedule K-1	partne	er?	ownership
		country)	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Yes	No	income	assets	Yes	No	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Yes I	NO	
												+	

Schedule R (Form 990) 2022

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.

Schedule R (Form 990) 2022

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