

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

▶ Do not enter social security numbers on this form as it may be made public.
▶ Go to www.irs.gov/Form990PF for instructions and the latest information.

For calendar year 2020 or tax year beginning **JUL 1, 2020**, and ending **JUN 30, 2021**

Name of foundation JOHANN FUST LIBRARY FOUNDATION, INC.		A Employer identification number 59-0861994
Number and street (or P.O. box number if mail is not delivered to street address) PO BOX 309	Room/suite	B Telephone number 941-964-0211
City or town, state or province, country, and ZIP or foreign postal code BOCA GRANDE, FL 33921-0309		C If exemption application is pending, check here <input type="checkbox"/>
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶ \$ 7,903,128.	J Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>
(Part I, column (d), must be on cash basis.)		

Part I Analysis of Revenue and Expenses <small>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)</small>		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received	512,895.			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities	108,263.	108,263.	108,263.	STATEMENT 1
	5a Gross rents	94,000.		94,000.	STATEMENT 2
	b Net rental income or (loss) 74,675.				STATEMENT 3
	6a Net gain or (loss) from sale of assets not on line 10	244,699.			
	b Gross sales price for all assets on line 6a 1,133,476.				
	7 Capital gain net income (from Part IV, line 2)		244,699.		
	8 Net short-term capital gain			0.	
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less: Cost of goods sold					
c Gross profit or (loss)					
11 Other income	272.	0.	272.	STATEMENT 4	
12 Total. Add lines 1 through 11	960,129.	352,962.	202,535.		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc.	102,916.	0.	0.	102,916.
	14 Other employee salaries and wages	21,432.	0.	0.	21,432.
	15 Pension plans, employee benefits				
	16a Legal fees STMT 5	2,325.	0.	0.	2,325.
	b Accounting fees STMT 6	5,586.	0.	0.	5,586.
	c Other professional fees STMT 7	1,165.	0.	0.	1,165.
	17 Interest				
	18 Taxes STMT 8	12,171.	0.	0.	12,171.
	19 Depreciation and depletion	72,669.	0.	72,669.	
	20 Occupancy	17,491.	0.	3,494.	13,997.
	21 Travel, conferences, and meetings				
	22 Printing and publications	10,199.	0.	0.	10,199.
	23 Other expenses STMT 9	202,916.	22,573.	15,831.	164,512.
	24 Total operating and administrative expenses. Add lines 13 through 23	448,870.	22,573.	91,994.	334,303.
	25 Contributions, gifts, grants paid	0.			0.
26 Total expenses and disbursements. Add lines 24 and 25	448,870.	22,573.	91,994.	334,303.	
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements	511,259.				
b Net investment income (if negative, enter -0-)		330,389.			
c Adjusted net income (if negative, enter -0-)			110,541.		

Part II Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year amounts only.	Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash - non-interest-bearing	623,945.	842,441.	842,441.
	2 Savings and temporary cash investments	20,542.		
	3 Accounts receivable			
	Less: allowance for doubtful accounts			
	4 Pledges receivable	115,000.		
	Less: allowance for doubtful accounts		115,000.	115,000.
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons			
	7 Other notes and loans receivable			
	Less: allowance for doubtful accounts			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges	25,805.	25,805.	25,805.
	10a Investments - U.S. and state government obligations			
	b Investments - corporate stock	STMT 11 4,627,294.	5,418,922.	5,418,922.
	c Investments - corporate bonds			
	Liabilities	11 Investments - land, buildings, and equipment: basis		
Less: accumulated depreciation				
12 Investments - mortgage loans				
13 Investments - other				
14 Land, buildings, and equipment: basis		2,153,589.		
Less: accumulated depreciation		STMT 12 652,629.	1,492,735.	1,500,960.
15 Other assets (describe)				
16 Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I)		6,790,321.	7,903,128.	7,903,128.
17 Accounts payable and accrued expenses		5,995.	6,181.	
18 Grants payable				
19 Deferred revenue				
20 Loans from officers, directors, trustees, and other disqualified persons				
21 Mortgages and other notes payable				
22 Other liabilities (describe)	TENANT DEPOSITS 1,500.	1,500.		
23 Total liabilities (add lines 17 through 22)	7,495.	7,681.		
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here	<input checked="" type="checkbox"/>		
	and complete lines 24, 25, 29, and 30.			
	24 Net assets without donor restrictions	6,530,612.	7,539,233.	
	25 Net assets with donor restrictions	252,214.	356,214.	
	Foundations that do not follow FASB ASC 958, check here	<input type="checkbox"/>		
	and complete lines 26 through 30.			
	26 Capital stock, trust principal, or current funds			
27 Paid-in or capital surplus, or land, bldg., and equipment fund				
28 Retained earnings, accumulated income, endowment, or other funds				
29 Total net assets or fund balances	6,782,826.	7,895,447.		
30 Total liabilities and net assets/fund balances	6,790,321.	7,903,128.		

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return)	1	6,782,826.
2 Enter amount from Part I, line 27a	2	511,259.
3 Other increases not included in line 2 (itemize)	3	SEE STATEMENT 10 601,362.
4 Add lines 1, 2, and 3	4	7,895,447.
5 Decreases not included in line 2 (itemize)	5	0.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29	6	7,895,447.

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a NORTHERN TRUST PORTFOLIO	P	VARIOUS	VARIOUS
b			
c			
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) ((e) plus (f) minus (g))
a 1,133,476.		888,777.	244,699.
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69.			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
a			244,699.
b			
c			
d			
e			

2 Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	244,699.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). See instructions. If (loss), enter -0- in Part I, line 8		3	0.

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income
SECTION 4940(e) REPEALED ON DECEMBER 20, 2019 - DO NOT COMPLETE.

1 Reserved	(a) Reserved	(b) Reserved	(c) Reserved	(d) Reserved
	Reserved			
	Reserved			
	Reserved			
	Reserved			
	Reserved			
2 Reserved				2
3 Reserved				3
4 Reserved				4
5 Reserved				5
6 Reserved				6
7 Reserved				7
8 Reserved				8

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), or 4948 - see instructions)

1a Exempt operating foundations described in section 4940(d)(2), check here <input checked="" type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: <u>02/12/73</u> (attach copy of letter if necessary-see instructions)			
b Reserved		1	N/A
c All other domestic foundations enter 1.39% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b)			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		2	
3 Add lines 1 and 2		3	
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		4	
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5	0.
6 Credits/Payments:			
a 2020 estimated tax payments and 2019 overpayment credited to 2020	6a	0.	
b Exempt foreign organizations - tax withheld at source	6b	0.	
c Tax paid with application for extension of time to file (Form 8868)	6c	0.	
d Backup withholding erroneously withheld	6d	0.	
7 Total credits and payments. Add lines 6a through 6d	7		0.
8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8		0.
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9		0.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10		
11 Enter the amount of line 10 to be: Credited to 2021 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/>	11		

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.		X
c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. \$ <u>0.</u> (2) On foundation managers. \$ <u>0.</u>		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. \$ <u>0.</u>		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.		X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		N/A
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T.		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	X	
8a Enter the states to which the foundation reports or with which it is registered. See instructions. <u>FL</u>		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation <u>SEE STATEMENT 13</u>		X
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2020 or the tax year beginning in 2020? See the instructions for Part XIV. If "Yes," complete Part XIV	X	
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		X

Part VII-A Statements Regarding Activities (continued)

11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application?
14 The books are in care of TREASURER Telephone no. 941-964-0211
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here
16 At any time during calendar year 2020, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

1a During the year, did the foundation (either directly or indirectly):
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?
(6) Agree to pay money or property to a government official?
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance?
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2020?
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):
a At the end of tax year 2020, did the foundation have any undistributed income (Part XIII, lines 6d and 6e) for tax year(s) beginning before 2020?
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income?
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?
b If "Yes," did it have excess business holdings in 2020 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period?
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2020?

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a During the year, did the foundation pay or incur any amount to:		Yes	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
(3) Provide a grant to an individual for travel, study, or other similar purposes? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions <input type="checkbox"/> N/A	5b		
Organizations relying on a current notice regarding disaster assistance, check here <input type="checkbox"/>			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? <input type="checkbox"/> Yes <input type="checkbox"/> No N/A			
If "Yes," attach the statement required by Regulations section 53.4945-5(d).			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	6b		X
If "Yes" to 6b, file Form 8870.			
7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? <input type="checkbox"/> Yes <input type="checkbox"/> No N/A	7b		
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, and foundation managers and their compensation.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 14		102,916.	0.	0.

2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000 0

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 Five highest-paid independent contractors for professional services. If none, enter "NONE."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

Total number of others receiving over \$50,000 for professional services 0

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 SUPPORT AND MAINTENANCE OF THE PUBLIC LIBRARY FOR GASPARILLA ISLAND AND THE BOCA GRANDE COMMUNITY.	0.
2	
3	
4	

Part IX-B Summary of Program-Related Investments

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1 N/A	
2	
3 All other program-related investments. See instructions.	

Total. Add lines 1 through 3 0.

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:			
a	Average monthly fair market value of securities	1a	4,978,115.
b	Average of monthly cash balances	1b	44,994.
c	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	5,023,109.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	0.
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	5,023,109.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	75,347.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	4,947,762.
6	Minimum investment return. Enter 5% of line 5	6	247,388.

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations, check here and do not complete this part.)

1	Minimum investment return from Part X, line 6	1	
2a	Tax on investment income for 2020 from Part VI, line 5	2a	
b	Income tax for 2020. (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	

Part XII Qualifying Distributions (see instructions)

1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:			
a	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	1a	334,303.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	334,303.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	334,303.

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

N/A

	(a) Corpus	(b) Years prior to 2019	(c) 2019	(d) 2020
1 Distributable amount for 2020 from Part XI, line 7				
2 Undistributed income, if any, as of the end of 2020:				
a Enter amount for 2019 only				
b Total for prior years:				
3 Excess distributions carryover, if any, to 2020:				
a From 2015				
b From 2016				
c From 2017				
d From 2018				
e From 2019				
f Total of lines 3a through e				
4 Qualifying distributions for 2020 from Part XII, line 4: ▶ \$				
a Applied to 2019, but not more than line 2a ...				
b Applied to undistributed income of prior years (Election required - see instructions) ...				
c Treated as distributions out of corpus (Election required - see instructions)				
d Applied to 2020 distributable amount				
e Remaining amount distributed out of corpus				
5 Excess distributions carryover applied to 2020 (If an amount appears in column (d), the same amount must be shown in column (a).)				
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5				
b Prior years' undistributed income. Subtract line 4b from line 2b				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b. Taxable amount - see instructions				
e Undistributed income for 2019. Subtract line 4a from line 2a. Taxable amount - see instr. ...				
f Undistributed income for 2020. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2021				
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)				
8 Excess distributions carryover from 2015 not applied on line 5 or line 7				
9 Excess distributions carryover to 2021. Subtract lines 7 and 8 from line 6a				
10 Analysis of line 9:				
a Excess from 2016 ...				
b Excess from 2017 ...				
c Excess from 2018 ...				
d Excess from 2019 ...				
e Excess from 2020 ...				

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2020, enter the date of the ruling 02/12/73

b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

	Tax year				(e) Total
	(a) 2020	(b) 2019	(c) 2018	(d) 2017	
2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed	110,541.	177,670.	247,071.	202,264.	737,546.
b 85% of line 2a	93,960.	151,020.	210,010.	171,924.	626,914.
c Qualifying distributions from Part XII, line 4, for each year listed	334,303.	257,706.	344,348.	277,168.	1,213,525.
d Amounts included in line 2c not used directly for active conduct of exempt activities	0.	0.	0.	0.	0.
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c	334,303.	257,706.	344,348.	277,168.	1,213,525.
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets		6,790,321.	6,652,696.	6,491,008.	19,934,025.
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)		6,790,321.	6,652,696.	6,491,008.	19,934,025.
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6, for each year listed					0.
c "Support" alternative test - enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)		250,844.	414,103.	454,408.	1,119,355.
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)		250,844.	414,103.	454,408.	1,119,355.
(3) Largest amount of support from an exempt organization		25,000.	21,348.	26,690.	73,038.
(4) Gross investment income		111,072.	216,414.	277,366.	604,852.

Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.)

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

NONE

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

NONE

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d.

a The name, address, and telephone number or email address of the person to whom applications should be addressed:

b The form in which applications should be submitted and information and materials they should include:

c Any submission deadlines:

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

Part XV Supplementary Information *(continued)*

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year NONE				
Total			▶ 3a	0.
b Approved for future payment NONE				
Total			▶ 3b	0.

DRAFT

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income
	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	
1 Program service revenue:					
a BOOK SALES					272.
b _____					
c _____					
d _____					
e _____					
f _____					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities			14	108,263.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property			41	74,675.	
6 Net rental income or (loss) from personal property					
7 Other investment income			14		
8 Gain or (loss) from sales of assets other than inventory					244,699.
9 Net income or (loss) from special events					<3,932.>
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a _____					
b _____					
c _____					
d _____					
e _____					
12 Subtotal. Add columns (b), (d), and (e)		0.		182,938.	241,039.
13 Total. Add line 12, columns (b), (d), and (e)					<u>423,977.</u>

(See worksheet in line 13 instructions to verify calculations.)

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).
1-A	PROVIDE ADDITIONAL NEEDED FUNDS FOR OPERATIONS
9	PROVIDE ADDITIONAL NEEDED FUNDS FOR OPERATIONS

Part XVII Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations

Table with 3 columns: Question/Item, Yes, No. Includes items 1a(1) through 1c regarding transfers and transactions.

Table with 4 columns: (a) Line no., (b) Amount involved, (c) Name of noncharitable exempt organization, (d) Description of transfers, transactions, and sharing arrangements.

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? [] Yes [X] No

Table with 3 columns: (a) Name of organization, (b) Type of organization, (c) Description of relationship.

Sign Here Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Signature of officer or trustee Date Title

May the IRS discuss this return with the preparer shown below? See instr. [X] Yes [] No

Table with 5 columns: Print/Type preparer's name, Preparer's signature, Date, Check self-employed, PTIN. Includes firm information: SUPLEE SHEA CRAMER & ROCKLEIN, P.A.

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2020

Name of the organization

JOHANN FUST LIBRARY FOUNDATION, INC.

Employer identification number

59-0861994

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)() (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

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

General Rule

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

Special Rules

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 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), 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, 990-EZ, or 990-PF).

Name of organization

Employer identification number

JOHANN FUST LIBRARY FOUNDATION, INC.

59-0861994

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	WILLIAM AND LIZ GHRISKEY PO BOX 698 BOCA GRANDE, FL 33921	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	BUD AND JENNIFER GRUENBERG 14 BROOKLINE ROAD SCARSDALE, NY 10583	\$ 15,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	DORIS BISHOP FOUNDATION 50 SOUTH LASALLE STREET CHICAGO, IL 60603	\$ 21,539.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	LENOIR CHARITABLE TRUST 7701 FORSYTH BLVD, FLOOR TWELVE ST. LOUIS, MO 63105	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	JOHN AND PATTIE CLEGHORN PO BOX 366 BOCA GRANDE, FL 33921	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	DUDLEY AND HONORIA DIEBOLD 91 PAINTER HILL ROAD ROXBURY, CT 06783	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization JOHANN FUST LIBRARY FOUNDATION, INC.	Employer identification number 59-0861994
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	HUNTER FAMILY FOUNDATION 222 EAST WISCONSIN AVENUE, SUITE 300 LAKE FOREST, IL 60045	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	BUCHANAN FAMILY FOUNDATION 222 WISCONSON AVE. STE 308 LAKE FOREST, IL 60045	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9	HALL FAMILY FOUNDATION 222 MERRIMACK ST. LOWELL, MA 01852	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
10	CHRIS AND JIM COWPERTHWAIT PO BOX 1983 BOCA GRANDE, FL 33921	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
11	CINDY AND DAVID WILDS 165 TOWNSHIP LINE ROAD, SUITE 1200 JENKINTOWN, PA 19046	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
12	PETER POWELL FAMILY FOUNDATION 1055 BROADWAY BLVD, SUITE 130 KANSAS CITY, MO 64105	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization JOHANN FUST LIBRARY FOUNDATION, INC.	Employer identification number 59-0861994
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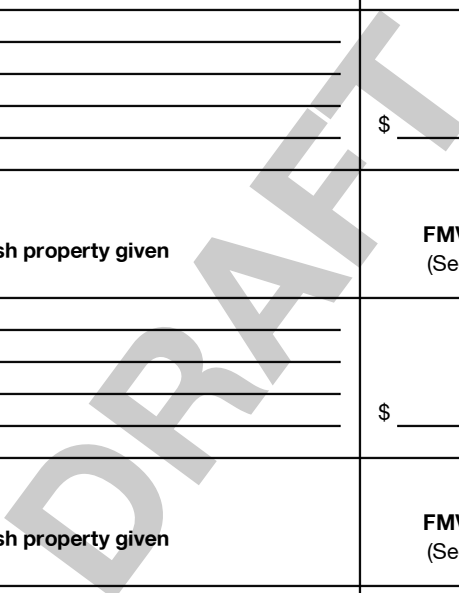
Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13	ELISE AYRES HANLEY CHARITABLE FUND PO BOX 1123 BOCA GRANDE, FL 33921	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
14	JOAN AND JACK HALL PO BOX 603 BOCA GRANDE, FL 33921	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
15	FRANNIE AND GORDON BURNS 281 OLD CHURCH RD GREENWICH, CT 06830	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
16	T. RANDOLPH POTTER JR CHARITABLE LEAD TRUST 505 N 7TH STREET ST. LOUIS, MO 63101	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization JOHANN FUST LIBRARY FOUNDATION, INC.	Employer identification number 59-0861994
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

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



Name of organization JOHANN FUST LIBRARY FOUNDATION, INC.	Employer identification number 59-0861994
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

FORM 990-PF	DIVIDENDS AND INTEREST FROM SECURITIES	STATEMENT	1
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SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
NORTHERN TRUST	108,263.	0.	108,263.	108,263.	108,263.
TO PART I, LINE 4	108,263.	0.	108,263.	108,263.	108,263.

FORM 990-PF	RENTAL INCOME	STATEMENT	2
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KIND AND LOCATION OF PROPERTY	ACTIVITY NUMBER	GROSS RENTAL INCOME
APARTMENT	1	44,000.
COTTAGE	2	
LIBRARY	3	50,000.
TOTAL TO FORM 990-PF, PART I, LINE 5A		94,000.

FORM 990-PF	RENTAL EXPENSES	STATEMENT	3
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DESCRIPTION	ACTIVITY NUMBER	AMOUNT	TOTAL
REPAIRS-RENTAL		3,726.	
UTILITIES-RENTAL		3,494.	
INSURANCE-RENTAL		12,105.	
- SUBTOTAL -	1		19,325.
TOTAL RENTAL EXPENSES			19,325.
NET RENTAL INCOME TO FORM 990-PF, PART I, LINE 5B			74,675.

FORM 990-PF	OTHER INCOME		STATEMENT	4
DESCRIPTION	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	
BOOK SALES	272.	0.	272.	
TOTAL TO FORM 990-PF, PART I, LINE 11	272.	0.	272.	

FORM 990-PF	LEGAL FEES		STATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
LEGAL FEES	2,325.	0.	0.	2,325.
TO FM 990-PF, PG 1, LN 16A	2,325.	0.	0.	2,325.

FORM 990-PF	ACCOUNTING FEES		STATEMENT	6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING FEES	5,586.	0.	0.	5,586.
TO FORM 990-PF, PG 1, LN 16B	5,586.	0.	0.	5,586.

FORM 990-PF	OTHER PROFESSIONAL FEES		STATEMENT	7
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
APPRAISALS AND SURVEYS	1,165.	0.	0.	1,165.
OTHER	0.	0.	0.	0.
TO FORM 990-PF, PG 1, LN 16C	1,165.	0.	0.	1,165.

FORM 990-PF	TAXES			STATEMENT	8
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
PAYROLL TAXES	9,513.	0.	0.	9,513.	
PROPERTY TAXES	2,658.	0.	0.	2,658.	
TO FORM 990-PF, PG 1, LN 18	12,171.	0.	0.	12,171.	

FORM 990-PF	OTHER EXPENSES			STATEMENT	9
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
INSURANCE	85,557.	0.	0.	85,557.	
INVESTMENT FEES	22,573.	22,573.	0.	0.	
OFFICE EQUIPMENT	3,081.	0.	0.	3,081.	
REPAIRS AND MAINTENANCE	58,996.	0.	0.	58,996.	
OFFICE SUPPLIES	2,197.	0.	0.	2,197.	
OTHER OPERATING EXPENSES	10,749.	0.	0.	10,749.	
EVENT EXPENSES	3,932.	0.	0.	3,932.	
REPAIRS-RENTAL	3,726.	0.	3,726.	0.	
INSURANCE-RENTAL	12,105.	0.	12,105.	0.	
TO FORM 990-PF, PG 1, LN 23	202,916.	22,573.	15,831.	164,512.	

FORM 990-PF	OTHER INCREASES IN NET ASSETS OR FUND BALANCES	STATEMENT	10
DESCRIPTION		AMOUNT	
UNREALIZED GAINS/(LOSSES) FOR FINANCIAL REPORTING RECONCILING ADJUSTMENT		601,362.	
TOTAL TO FORM 990-PF, PART III, LINE 3		601,362.	

FORM 990-PF	CORPORATE STOCK	STATEMENT 11
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
INVESTMENTS	5,418,922.	5,418,922.
TOTAL TO FORM 990-PF, PART II, LINE 10B	5,418,922.	5,418,922.

FORM 990-PF	DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT	STATEMENT 12	
DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
SIGN	2,764.	2,764.	0.
SIGN	1,700.	1,700.	0.
COMPUTER BATTERY BACKUP	60.	60.	0.
BATH ADDITION	11,631.	6,643.	4,988.
A/C SYSTEM	2,590.	1,450.	1,140.
SURVEY PROPERTY	3,600.	1,905.	1,695.
INSIDE PORCH WINDOWS	1,156.	616.	540.
TILE FLOOR	5,200.	2,644.	2,556.
ROOF HOUSE	5,985.	2,607.	3,378.
3 TON AIR CONDENSING	2,078.	2,078.	0.
CARPET	344.	344.	0.
CHILDREN'S ROOM ROOF	5,979.	2,620.	3,359.
FOUR NEW WELLS	2,145.	887.	1,258.
SLAT HOUSE ROOF	14,419.	5,689.	8,730.
BATHROOM COST HOUSE	4,225.	1,688.	2,537.
WINDOWS 2ND FLOOR	47,760.	46,350.	1,410.
APARTMENT FURNITURE	4,000.	4,000.	0.
LAND	180,989.	0.	180,989.
LIBRARY FURNISHINGS	2,557.	2,557.	0.
COST COTTAGE RENOVATION	32,673.	9,166.	23,507.
COST COTTAGE -BLINDS & HURRICANE COVERS	7,050.	3,957.	3,093.
FOUNTAINS	26,125.	13,935.	12,190.
LIBRARY RENOVATION	1,020,780.	263,703.	757,077.
SHELL PAVERS	15,728.	8,652.	7,076.
SHELVING	112,572.	58,164.	54,408.
AUDIO SYSTEM	3,795.	3,795.	0.
BOOK OF THE DEAD FRAMING	535.	288.	247.
CHILDRENS' LIBRARY BENCH	247.	136.	111.
CYPRESS LIBRARY TABLE	5,024.	5,024.	0.
EAMES SOFT PAD MGMT CHAIR	5,000.	4,939.	61.
FOUNTAIN FIXTURES	1,406.	1,406.	0.
JAPANESE DOOR RESTORATION	29,024.	14,673.	14,351.
JOSEF HOFFMAN BENTWOOD CHAIR	2,424.	2,424.	0.
LIBRARY HOURS SIGN	44.	44.	0.

LIBRARY FIXTURES	7,036.	7,036.	0.
PLANTERS CLUB PLAQUE	158.	84.	74.
READING ROOM PLAQUE	158.	86.	72.
EPISODE LOUNGE W/TABLET ARM	8,490.	8,490.	0.
SQUARE LIMESTONE TABLE	1,339.	1,241.	98.
WASHER/DRYER ADAPTER	39.	39.	0.
LANDSCAPE	86,526.	47,106.	39,420.
COST COTTAGE - HVAC SYSTEM	16,873.	9,188.	7,685.
HAND FIRE EXTINGUISHER	572.	572.	0.
NETWORK EQUIPMENT	28,652.	28,652.	0.
NEC DSX-40 TELEPHONE SYSTEM	1,575.	1,575.	0.
MICROPHONE AND ACCESSORIES	255.	255.	0.
VIDEO CAMERA	1,020.	1,020.	0.
COST COTTAGE FURNITURE	2,500.	2,500.	0.
4 STAFF OFFICE CHAIRS	975.	975.	0.
GARDEN MARKERS	680.	680.	0.
2 TB HARD DRIVE BACK UP	80.	80.	0.
2 CHILDREN'S LOUNGE CHAIRS	165.	165.	0.
CATERER'S STATION-REFRIGERATOR	1,449.	1,449.	0.
CATERER'S STATION-WORK BENCH	96.	96.	0.
SHED-SHELVING UNIT	90.	90.	0.
METAL STORAGE CABINET	413.	413.	0.
MIC STAND	6.	6.	0.
SHED-AC/DEHUMIDIFIER	5,244.	2,508.	2,736.
SHED-RENOVATION	7,066.	1,691.	5,375.
WOMEN'S CLUB PLAQUE	158.	80.	78.
COWPETHWAIT PLAQUE	238.	115.	123.
BRONZE-DONOR PLAQUE	6,823.	3,109.	3,714.
DELL 23" MONITOR	223.	223.	0.
SECURITY SYSTEM	19,721.	7,780.	11,941.
SOUND SYSTEM	11,978.	11,978.	0.
SHELVING UNITS	803.	651.	152.
3 TON, 14 SHEER COST COTTAGE AC SYSTEM	4,560.	843.	3,717.
SIDEWALK COMPLETION PROJECT	82,161.	11,939.	70,222.
LIBRARY LOGGIA FURNITURE	14,152.	10,093.	4,059.
LIBRARY APARTMENT WOOD FLOORING	2,938.	561.	2,377.
UNDERBUILDING PIPE INSTALLATION	2,765.	798.	1,967.
WINDOW COVERINGS	1,498.	803.	695.
GENERATOR	799.	600.	199.
DEHUMIDIFIER	747.	559.	188.
DEHUMIDIFIER - CHILDREN'S LIBRARY	2,436.	1,339.	1,097.
DEHUMIDIFIER - ATTIC	2,436.	1,339.	1,097.
HP COLOR LASER JET	460.	337.	123.
AUDIO SYSTEM ADDITIONS	1,279.	704.	575.
LOGGIA BOOK CARTS	1,371.	800.	571.
SIGNS	640.	221.	419.
APPLE COMPUTER - ED	2,332.	971.	1,361.
2 TON AC MINI-SPLIT - MEDIA ROOM	7,504.	792.	6,712.
PRO AUDIO SYSTEM	1,616.	485.	1,131.

TELEPHONE INSTALLATION	540.	153.	387.
UV INSTALLS & MINI SPLITS	2,136.	249.	1,887.
UV INSTALLS & MINI SPLITS	1,785.	179.	1,606.
COMPUTER ADMIN	1,799.	300.	1,499.
COMPUTER FOR SANDRA	1,670.	28.	1,642.
HAND SANITIZER STANDS	450.	59.	391.
HAND SANITIZER STANDS	200.	21.	179.
DESK	277.	3.	274.
DESK CHAIR	120.	1.	119.
OFFICE FURNISHINGS	2,544.	212.	2,332.
VIRTUAL ROOM	1,440.	96.	1,344.
TOTAL TO FM 990-PF, PART II, LN 14	1,915,665.	651,326.	1,264,339.

FORM 990-PF	EXPLANATION CONCERNING PART VII-A, LINE 8B	STATEMENT	13
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EXPLANATION

FILED WITH FLORIDA DEPARTMENT OF AGRICULTURE PURSUANT TO STATE REGULATION

FORM 990-PF	PART VIII - LIST OF OFFICERS, DIRECTORS TRUSTEES AND FOUNDATION MANAGERS	STATEMENT	14
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NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
JACQUE HOYT PO BOX 309 BOCA GRANDE, FL 33921	PRESIDENT 5.00	0.	0.	0.
CAPPY POWELL PO BOX 309 BOCA GRANDE, FL 33921	VICE PRESIDENT 2.00	0.	0.	0.
DEB NASH PO BOX 309 BOCA GRANDE, FL 33921	SECRETARY 2.00	0.	0.	0.
DOD FRASER PO BOX 309 BOCA GRANDE, FL 33921	TREASURER 2.00	0.	0.	0.
JOHN H. CARLEY PO BOX 309 BOCA GRANDE, FL 33921	DIRECTOR 1.00	0.	0.	0.

JOHN CLEGHORN PO BOX 309 BOCA GRANDE, FL 33921	DIRECTOR 1.00	0.	0.	0.
BARBARA MARQUIS PO BOX 309 BOCA GRANDE, FL 33921	EXECUTIVE DIRECTOR 34.00	102,916.	0.	0.
CHRIS COWPERTHWAIT PO BOX 309 BOCA GRANDE, FL 33921	DIRECTOR EMERITUS 1.00	0.	0.	0.
ALICE GORMAN PO BOX 309 BOCA GRANDE, FL 33921	DIRECTOR EMERITUS 1.00	0.	0.	0.
STEPHANIE FIRMAN PO BOX 309 BOCA GRANDE, FL 33921	DIRECTOR 1.00	0.	0.	0.
SUSAN HATCH PO BOX 309 BOCA GRANDE, FL 33921	DIRECTOR 1.00	0.	0.	0.
STEPHANIE FIRMAN PO BOX 309 BOCA GRANDE, FL 33921	DIRECTOR 1.00	0.	0.	0.
JEFF MOORE PO BOX 309 BOCA GRANDE, FL 33921	DIRECTOR 1.00	0.	0.	0.
STEPHANIE KUGELMAN VICK PO BOX 309 BOCA GRANDE, FL 33921	DIRECTOR 1.00	0.	0.	0.
KAREN ZARSE PO BOX 309 BOCA GRANDE, FL 33921	DIRECTOR 1.00	0.	0.	0.
HENRY BECTON PO BOX 309 BOCA GRANDE, FL 33921	DIRECTOR 1.00	0.	0.	0.
RANDY BELL PO BOX 309 BOCA GRANDE, FL 33921	DIRECTOR 1.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6, PART VIII		<u>102,916.</u>	<u>0.</u>	<u>0.</u>

2020 DEPRECIATION AND AMORTIZATION REPORT

FORM 990-PF PAGE 1

990-PF

Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
5	SIGN	03/02/01	200DB	7.00		HY17	2,764.				2,764.	2,764.		0.	2,764.
9	SIGN	05/24/01	200DB	7.00		HY17	1,700.				1,700.	1,700.		0.	1,700.
20	COMPUTER BATTERY BACKUP	10/31/06	200DB	5.00		HY17	60.				60.	60.		0.	60.
24	(D)AIR CONDITIONER	08/03/99	200DB	7.00		HY17	4,474.				4,474.	4,474.		0.	4,474.
25	BATH ADDITION	09/02/09	SL	39.00		MM17	11,631.				11,631.	6,345.		298.	6,643.
26	A/C SYSTEM	01/17/00	SL	39.00		MM17	2,590.				2,590.	1,384.		66.	1,450.
28	SURVEY PROPERTY	04/27/01	SL	39.00		MM17	3,600.				3,600.	1,813.		92.	1,905.
29	INSIDE PORCH WINDOWS	06/12/01	SL	39.00		MM17	1,156.				1,156.	586.		30.	616.
30	TILE FLOOR	02/22/02	SL	39.00		MM17	5,200.				5,200.	2,511.		133.	2,644.
32	ROOF HOUSE	12/06/04	SL	39.00		MM17	5,985.				5,985.	2,454.		153.	2,607.
33	3 TON AIR CONDENSING	12/06/04	200DB	7.00		HY17	2,078.				2,078.	2,078.		0.	2,078.
34	CARPET	12/06/04	200DB	7.00		HY17	344.				344.	344.		0.	344.
36	CHILDREN'S ROOM ROOF	11/24/04	SL	39.00		MM17	5,979.				5,979.	2,467.		153.	2,620.
37	FOUR NEW WELLS	11/29/05	SL	39.00		MM17	2,145.				2,145.	832.		55.	887.
38	SLAT HOUSE ROOF	08/21/06	SL	39.00		MM17	14,419.				14,419.	5,319.		370.	5,689.
40	BATHROOM COST HOUSE	05/11/06	SL	39.00		MM17	4,225.				4,225.	1,580.		108.	1,688.
42	WINDOWS 2ND FLOOR	06/15/07	150DB	15.00		HY17	47,760.				47,760.	43,530.		2,820.	46,350.
43	APARTMENT FURNITURE	12/01/10	200DB	7.00		HY17	4,000.				4,000.	4,000.		0.	4,000.

2020 DEPRECIATION AND AMORTIZATION REPORT

FORM 990-PF PAGE 1

990-PF

Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
46	LAND	01/30/56	L				180,989.				180,989.			0.	
49	LIBRARY FURNISHINGS	05/15/12	200DB	7.00		HY17	2,557.			1,279.	1,278.	1,278.		0.	1,278.
50	COST COTTAGE RENOVATION	01/31/13	SL	30.00		16	32,673.				32,673.	8,077.		1,089.	9,166.
51	COST COTTAGE -BLINDS & HURRICANE COVERS	01/31/13	SL	15.00		16	7,050.				7,050.	3,487.		470.	3,957.
52	FOUNTAINS	06/24/13	SL	15.00		16	26,125.				26,125.	12,193.		1,742.	13,935.
53	LIBRARY RENOVATION	10/07/13	SL	30.00		16	1,020,780.				1,020,780.	229,677.		34,026.	263,703.
54	SHELL PAVERS	03/18/13	SL	15.00		16	15,728.				15,728.	7,603.		1,049.	8,652.
55	SHELVING	10/07/13	SL	15.00		16	112,572.				112,572.	50,659.		7,505.	58,164.
56	AUDIO SYSTEM	07/31/13	SL	5.00		16	3,795.				3,795.	3,795.		0.	3,795.
57	BOOK OF THE DEAD FRAMING	07/10/13	SL	15.00		16	535.				535.	252.		36.	288.
58	CHILDRENS' LIBRARY BENCH	11/30/12	SL	15.00		16	247.				247.	120.		16.	136.
59	CYPRESS LIBRARY TABLE	04/15/13	SL	7.00		16	5,024.				5,024.	5,024.		0.	5,024.
60	EAMES SOFT PAD MGMT CHAIR	11/16/12	SL	7.00		16	5,000.				5,000.	4,939.		0.	4,939.
61	FOUNTAIN FIXTURES	04/25/13	SL	7.00		16	1,406.				1,406.	1,406.		0.	1,406.
63	JAPANESE DOOR RESTORATION	12/02/13	SL	15.00		16	29,024.				29,024.	12,738.		1,935.	14,673.
64	JOSEF HOFFMAN BENTWOOD CHAIR	02/20/13	SL	7.00		16	2,424.				2,424.	2,424.		0.	2,424.
65	LIBRARY HOURS SIGN	08/19/13	SL	5.00		16	44.				44.	44.		0.	44.
66	LIBRARY FIXTURES	10/07/13	SL	7.00		16	7,036.				7,036.	6,784.		252.	7,036.

2020 DEPRECIATION AND AMORTIZATION REPORT

FORM 990-PF PAGE 1

990-PF

Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
67	PLANTERS CLUB PLAQUE	11/05/13	SL	15.00		16	158.				158.	73.		11.	84.
68	READING ROOM PLAQUE	07/16/13	SL	15.00		16	158.				158.	75.		11.	86.
69	EPISODE LOUNGE W/TABLET ARM	05/01/13	SL	7.00		16	8,490.				8,490.	8,490.		0.	8,490.
70	SQUARE LIMESTONE TABLE	06/26/12	SL	7.00		16	1,339.				1,339.	1,241.		0.	1,241.
71	WASHER/DRYER ADAPTER	09/25/12	SL	5.00		16	39.				39.	39.		0.	39.
72	LANDSCAPE	04/25/13	SL	15.00		16	86,526.				86,526.	41,338.		5,768.	47,106.
73	COST COTTAGE - HVAC SYSTEM	04/25/13	SL	15.00		16	16,873.				16,873.	8,063.		1,125.	9,188.
74	HAND FIRE EXTINGUISHER	05/07/13	SL	7.00		16	572.				572.	572.		0.	572.
75	NETWORK EQUIPMENT	06/13/13	SL	5.00		16	28,652.				28,652.	28,652.		0.	28,652.
76	NEC DSX-40 TELEPHONE SYSTEM	05/02/13	SL	5.00		16	1,575.				1,575.	1,575.		0.	1,575.
77	MICROPHONE AND ACCESSORIES	12/31/13	SL	5.00		16	255.				255.	255.		0.	255.
78	VIDEO CAMERA	12/31/13	SL	5.00		16	1,020.				1,020.	1,020.		0.	1,020.
79	COST COTTAGE FURNITURE	02/11/13	SL	5.00		16	2,500.				2,500.	2,500.		0.	2,500.
80	4 STAFF OFFICE CHAIRS	05/31/13	SL	7.00		16	975.				975.	975.		0.	975.
81	GARDEN MARKERS	05/01/14	SL	5.00		16	680.				680.	680.		0.	680.
82	2 TB HARD DRIVE BACK UP	07/21/14	SL	5.00		16	80.				80.	80.		0.	80.
83	2 CHILDREN'S LOUNGE CHAIRS	05/01/14	SL	5.00		16	165.				165.	165.		0.	165.
84	CATERER'S STATION-REFRIGERATOR	06/06/14	SL	5.00		16	1,449.				1,449.	1,449.		0.	1,449.

2020 DEPRECIATION AND AMORTIZATION REPORT

FORM 990-PF PAGE 1

990-PF

Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
85	CATERER'S STATION-WORK BENCH	07/21/14	SL	5.00		16	96.				96.	96.		0.	96.
86	SHED-SHELVING UNIT	07/21/14	SL	5.00		16	90.				90.	90.		0.	90.
87	METAL STORAGE CABINET	07/21/14	SL	5.00		16	413.				413.	413.		0.	413.
88	MIC STAND	07/21/14	SL	5.00		16	6.				6.	6.		0.	6.
89	SHED-AC/DEHUMIDIFIER	05/02/14	SL	15.00		16	5,244.				5,244.	2,158.		350.	2,508.
90	SHED-RENOVATION	05/14/14	SL	30.00		16	7,066.				7,066.	1,455.		236.	1,691.
91	WOMEN'S CLUB PLAQUE	02/18/14	SL	15.00		16	158.				158.	69.		11.	80.
92	COWPETHWAIT PLAQUE	04/23/14	SL	15.00		16	238.				238.	99.		16.	115.
93	BRONZE-DONOR PLAQUE	09/09/14	SL	15.00		16	6,823.				6,823.	2,654.		455.	3,109.
94	(D)DELL LAPTOP	06/01/15	SL	5.00		16	1,585.				1,585.	1,585.		0.	1,585.
95	(D)DELL LAPTOP	06/01/15	SL	5.00		16	1,585.				1,585.	1,585.		0.	1,585.
96	(D)DELL 23" MONITOR	06/01/15	SL	5.00		16	223.				223.	223.		0.	223.
97	DELL 23" MONITOR	06/01/15	SL	5.00		16	223.				223.	223.		0.	223.
98	SECURITY SYSTEM	08/10/15	SL	15.00		16	19,721.				19,721.	6,465.		1,315.	7,780.
99	SOUND SYSTEM	09/21/15	SL	5.00		16	11,978.				11,978.	11,381.		597.	11,978.
100	SHELVING UNITS	10/30/15	SL	7.00		16	803.				803.	536.		115.	651.
101	3 TON, 14 SHEER COST COTTAGE AC SYSTEM	06/15/16	SL	27.50	MM	16	4,560.				4,560.	677.		166.	843.
102	SIDEWALK COMPLETION PROJECT	11/02/15	SL	39.00	MM	16	82,161.				82,161.	9,832.		2,107.	11,939.

2020 DEPRECIATION AND AMORTIZATION REPORT

FORM 990-PF PAGE 1

990-PF

Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
103	LIBRARY LOGGIA FURNITURE	06/30/16	SL	7.00		16	14,152.				14,152.	8,071.		2,022.	10,093.
104	LIBRARY APARTMENT WOOD FLOORING	04/04/16	SL	27.50	MM	16	2,938.				2,938.	454.		107.	561.
105	UNDERBUILDING PIPE INSTALLATION	02/24/17	SL	15.00		16	2,765.				2,765.	614.		184.	798.
106	WINDOW COVERINGS	09/28/17	SL	7.00		16	1,498.				1,498.	589.		214.	803.
107	GENERATOR	09/30/17	SL	5.00		16	799.				799.	440.		160.	600.
108	DEHUMIDIFIER	09/30/17	SL	5.00		16	747.				747.	410.		149.	559.
109	DEHUMIDIFIER - CHILDREN'S LIBRARY	09/24/18	SL	5.00		16	2,436.				2,436.	852.		487.	1,339.
110	DEHUMIDIFIER - ATTIC	09/27/18	SL	5.00		16	2,436.				2,436.	852.		487.	1,339.
111	HP COLOR LASER JET	11/14/17	SL	5.00		16	460.				460.	245.		92.	337.
112	AUDIO SYSTEM ADDITIONS	09/27/18	SL	5.00		16	1,279.				1,279.	448.		256.	704.
113	LOGGIA BOOK CARTS	08/01/18	SL	5.00		16	1,371.				1,371.	526.		274.	800.
114	SIGNS	01/18/19	SL	7.00		16	640.				640.	130.		91.	221.
115	APPLE COMPUTER - ED	05/21/19	SL	5.00		16	2,332.				2,332.	505.		466.	971.
116	2 TON AC MINI-SPLIT - MEDIA ROOM	11/25/19	SL	15.00		16	7,504.				7,504.	292.		500.	792.
117	PRO AUDIO SYSTEM	12/27/19	SL	5.00		16	1,616.				1,616.	162.		323.	485.
118	TELEPHONE INSTALLATION	01/21/20	SL	5.00		16	540.				540.	45.		108.	153.
119	UV INSTALLS & MINI SPLITS	12/11/20	SL	5.00		16	2,136.				2,136.			249.	249.
120	UV INSTALLS & MINI SPLITS	01/14/21	SL	5.00		16	1,785.				1,785.			179.	179.

2020 DEPRECIATION AND AMORTIZATION REPORT

FORM 990-PF PAGE 1

990-PF

Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
121	COMPUTER ADMIN	08/17/20	SL	5.00		16	1,799.				1,799.			300.	300.
122	COMPUTER FOR SANDRA	06/14/21	SL	5.00		16	1,670.				1,670.			28.	28.
123	HAND SANITIZER STANDS	07/22/20	SL	7.00		16	450.				450.			59.	59.
124	HAND SANITIZER STANDS	10/06/20	SL	7.00		16	200.				200.			21.	21.
125	DESK	06/14/21	SL	7.00		16	277.				277.			3.	3.
126	DESK CHAIR	06/14/21	SL	7.00		16	120.				120.			1.	1.
127	OFFICE FURNISHINGS	11/23/20	SL	7.00		16	2,544.				2,544.			212.	212.
128	VIRTUAL ROOM	02/18/21	SL	5.00		16	1,440.				1,440.			96.	96.
	* TOTAL 990-PF PG 1 DEPR						1,923,532.			1,279.	1,922,253.	586,165.		71,749.	657,914.
	CURRENT YEAR ACTIVITY														
	BEGINNING BALANCE						1,911,111.			1,279.	1,909,832.	586,165.			656,766.
	ACQUISITIONS						12,421.			0.	12,421.	0.			1,148.
	DISPOSITIONS/RETIRED						7,867.			0.	7,867.	7,867.			7,867.
	ENDING BALANCE						1,915,665.			1,279.	1,914,386.	578,298.			650,047.
	ENDING ACCUM DEPR LESS DISPOSITIONS											651,326.			
	ENDING BOOK VALUE											1,264,339.			

Department of the Treasury
Internal Revenue Service (99)

▶ Attach to your tax return.

▶ Go to www.irs.gov/Form4562 for instructions and the latest information.

Attachment
Sequence No. 179

Name(s) shown on return JOHANN FUST LIBRARY FOUNDATION, INC.	Business or activity to which this form relates FORM 990-PF PAGE 1	Identifying number 59-0861994
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Part I Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I.

1 Maximum amount (see instructions)	1	1,040,000.
2 Total cost of section 179 property placed in service (see instructions)	2	
3 Threshold cost of section 179 property before reduction in limitation	3	2,590,000.
4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6 (a) Description of property (b) Cost (business use only) (c) Elected cost		
7 Listed property. Enter the amount from line 29	7	
8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9 Tentative deduction. Enter the smaller of line 5 or line 8	9	
10 Carryover of disallowed deduction from line 13 of your 2019 Form 4562	10	
11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5	11	
12 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	
13 Carryover of disallowed deduction to 2021. Add lines 9 and 10, less line 12	13	

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property.)

14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year	14	
15 Property subject to section 168(f)(1) election	15	
16 Other depreciation (including ACRS)	16	67,471.

Part III MACRS Depreciation (Don't include listed property. See instructions.)

Section A

17 MACRS deductions for assets placed in service in tax years beginning before 2020	17	4,278.
18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here <input type="checkbox"/>		

Section B - Assets Placed in Service During 2020 Tax Year Using the General Depreciation System

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

Section C - Assets Placed in Service During 2020 Tax Year Using the Alternative Depreciation System

20a Class life					S/L
b 12-year			12 yrs.		S/L
c 30-year	/		30 yrs.	MM	S/L
d 40-year	/		40 yrs.	MM	S/L

Part IV Summary (See instructions.)

21 Listed property. Enter amount from line 28	21	
22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr.	22	71,749.
23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

Part V Listed Property (Include automobiles, certain other vehicles, certain aircraft, and property used for entertainment, recreation, or amusement.)
Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

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

24a Do you have evidence to support the business/investment use claimed? Yes No 24b If "Yes," is the evidence written? Yes No
(a) Type of property (list vehicles first) (b) Date placed in service (c) Business/investment use percentage (d) Cost or other basis (e) Basis for depreciation (business/investment use only) (f) Recovery period (g) Method/Convention (h) Depreciation deduction (i) Elected section 179 cost
25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use 25
26 Property used more than 50% in a qualified business use:
27 Property used 50% or less in a qualified business use:
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 28
29 Add amounts in column (i), line 26. Enter here and on line 7, page 1 29

Section B - Information on Use of Vehicles

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

30 Total business/investment miles driven during the year (don't include commuting miles)
31 Total commuting miles driven during the year
32 Total other personal (noncommuting) miles driven
33 Total miles driven during the year. Add lines 30 through 32
34 Was the vehicle available for personal use during off-duty hours? Yes No
35 Was the vehicle used primarily by a more than 5% owner or related person?
36 Is another vehicle available for personal use?

Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who aren't more than 5% owners or related persons.

37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? Yes No
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners
39 Do you treat all use of vehicles by employees as personal use?
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?
41 Do you meet the requirements concerning qualified automobile demonstration use?
Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," don't complete Section B for the covered vehicles.

Part VI Amortization

(a) Description of costs (b) Date amortization begins (c) Amortizable amount (d) Code section (e) Amortization period or percentage (f) Amortization for this year
42 Amortization of costs that begins during your 2020 tax year:
43 Amortization of costs that began before your 2020 tax year 43
44 Total. Add amounts in column (f). See the instructions for where to report 44