

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.**2020****Open to Public Inspection**

A For the 2020 calendar year, or tax year beginning 07/01/2020 and ending 06/30/2021																									
B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td colspan="2">C Name of organization TRUSTEES OF THE PUBLIC LIBRARY OF THE CITY OF BOSTON</td> <td>D Employer identification number 04-6151731</td> </tr> <tr> <td colspan="2">Doing business as</td> <td>E Telephone number 617-536-5400</td> </tr> <tr> <td colspan="2">Number and street (or P.O. box if mail is not delivered to street address) Room/suite 700 BOYLSTON STREET</td> <td></td> </tr> <tr> <td colspan="2">City or town, state or province, country, and ZIP or foreign postal code BOSTON, MA 02116</td> <td></td> </tr> <tr> <td colspan="2">F Name and address of principal officer: ELLEN DONAGHEY 700 BOYLSTON STREET, BOSTON, MA 02116</td> <td>G Gross receipts \$ 47,840,484</td> </tr> <tr> <td colspan="2">I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527</td> <td>H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions H(c) Group exemption number ▶</td> </tr> <tr> <td colspan="2">J Website: ▶ WWW.BPL.ORG</td> <td></td> </tr> <tr> <td colspan="2">K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶</td> <td>L Year of formation: 1848 M State of legal domicile: MA</td> </tr> </table>	C Name of organization TRUSTEES OF THE PUBLIC LIBRARY OF THE CITY OF BOSTON		D Employer identification number 04-6151731	Doing business as		E Telephone number 617-536-5400	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 700 BOYLSTON STREET			City or town, state or province, country, and ZIP or foreign postal code BOSTON, MA 02116			F Name and address of principal officer: ELLEN DONAGHEY 700 BOYLSTON STREET, BOSTON, MA 02116		G Gross receipts \$ 47,840,484	I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions H(c) Group exemption number ▶	J Website: ▶ WWW.BPL.ORG			K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: 1848 M State of legal domicile: MA
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Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: The Boston Public Library provides educational and cultural enrichment free to all by engaging the public through programming and active spaces, restoring and preserving our (Continued on Schedule O, Statement 1)		
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	16
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	16
	5	Total number of individuals employed in calendar year 2020 (Part V, line 2a)	5	498
	6	Total number of volunteers (estimate if necessary)	6	173
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b	Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0	
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9	Program service revenue (Part VIII, line 2g)	6,181,640	8,614,888
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	121,151	122,454
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	2,757,848	7,254,368
	12	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,892,775	258,149
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	10,953,414	16,249,859
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	0	0
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	3,296,966	3,375,807
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶	0	0
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	7,044,987	6,441,673
18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	10,341,953	9,817,480	
19	Revenue less expenses. Subtract line 18 from line 12	611,461	6,432,379	
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21	Total liabilities (Part X, line 26)	79,863,386	99,754,907
	22	Net assets or fund balances. Subtract line 21 from line 20	1,257,198	1,350,473
22	Net assets or fund balances. Subtract line 21 from line 20	78,606,188	98,404,434	

Part II Signature Block

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 officer) is based on all information of which preparer has any knowledge.

Sign Here		Date	5/13/22
	Signature of officer		
	Ellen Donaghey, Chief Financial Officer		
	Type or print name and title		

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	Firm's name ▶	Firm's EIN ▶			
	Firm's address ▶	Phone no.			

May the IRS discuss this return with the preparer shown above? See instructions ☐ Yes ☐ No

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1 ✓	
2 Is the organization required to complete Schedule B, Schedule of Contributors See instructions?	2 ✓	
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	✓
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	✓
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 Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	✓
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	✓
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	✓
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8 ✓	
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? If "Yes," complete Schedule D, Part IV	9	✓
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments 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.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a ✓	
b Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	✓
c Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	✓
d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	✓
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e ✓	
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	✓
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a ✓	
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	✓
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	✓
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	✓
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	✓
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	✓
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	✓
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I See instructions	17	✓
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	✓
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	✓
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	✓
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	✓

Part 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	498		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b		✓	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a			✓
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			
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a			✓
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 Accounts (FBAR).				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a			✓
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b			✓
c	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 organization solicit any contributions that were not tax deductible as charitable contributions?	6a			✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b			
7	Organizations that may receive deductible contributions under section 170(c).				
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a			
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b			
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c			
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e			
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f			
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g			
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h			
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8			
9	Sponsoring organizations maintaining donor advised funds.				
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a			
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b			
10	Section 501(c)(7) organizations. Enter:				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	Section 501(c)(12) organizations. Enter:				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a			
b	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.				
a	Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.	13a			
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
c	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a			✓
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b			
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.	15			✓
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16			✓

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck 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 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 and/or Box 7 of Form 1099-MISC) 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 instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
DAVID J LEONARD President	35.00 0.00			<input checked="" type="checkbox"/>				0	198,404	27,357
EAMON SHELTON Director Of Operations	35.00 0.00					<input checked="" type="checkbox"/>		0	139,150	36,799
MICHAEL R COLFORD Director Of Library Services	35.00 0.00					<input checked="" type="checkbox"/>		0	151,898	23,979
LAURA S IRMSCHER Chief Of Collections	35.00 0.00					<input checked="" type="checkbox"/>		13,662	122,961	36,548
PRISCILLA FOLEY Director Of Neighborhood Services	35.00 0.00					<input checked="" type="checkbox"/>		0	130,042	41,052
KURT MANSPERGER Chief Technology Officer	35.00 0.00					<input checked="" type="checkbox"/>		0	136,622	30,612
ELLEN DONAGHEY Chief Financial Officer (CFO)	35.00 0.00			<input checked="" type="checkbox"/>				0	139,200	22,685
PAMELA CARVER Clerk & Executive Assistant To The President	35.00 0.00			<input checked="" type="checkbox"/>				0	103,922	10,705
ROBERT E GALLERY Chair(Resigned effective 1-25 2021)	1.00 0.00	<input checked="" type="checkbox"/>						0	0	0
PRISCILLA H DOUGLAS Chair effective 5/18/2021, Trustee prior	1.00 0.00	<input checked="" type="checkbox"/>						0	0	0
EVELYN ARANA-ORTIZ Vice Chair, Interim Chair Jan-May 2021, Trustee prior	1.00 0.00	<input checked="" type="checkbox"/>						0	0	0
ZAMAWA ARENAS Trustee	1.00 0.00	<input checked="" type="checkbox"/>						0	0	0
JABARI ASIM Trustee	1.00 0.00	<input checked="" type="checkbox"/>						0	0	0
BEN BRADLEE JR Trustee	1.00 0.00	<input checked="" type="checkbox"/>						0	0	0

Part VIII Statement of RevenueCheck if Schedule O contains a response or note to any line in this Part VIII ☒

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns	1a 0				
	b	Membership dues	1b 0				
	c	Fundraising events	1c 10,610				
	d	Related organizations	1d 3,092,871				
	e	Government grants (contributions)	1e 4,037,997				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f 1,473,410				
	g	Noncash contributions included in lines 1a-1f	1g \$ 0				
	h	Total. Add lines 1a-1f		8,614,888			
Program Service Revenue				Business Code			
	2a	NETWORK MEMBERSHIP DUES	611710	122,454	122,454	0	0
	b						
	c						
	d						
	e						
	f	All other program service revenue		0	0	0	0
	g	Total. Add lines 2a-2f		122,454			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		1,364,926	0	0	1,364,926
	4	Income from investment of tax-exempt bond proceeds		0	0	0	0
	5	Royalties		15,863	0	0	15,863
	6a	Gross rents	(i) Real	90,500	0		
			(ii) Personal	0			
	b	Less: rental expenses	0	0			
	c	Rental income or (loss)	90,500	0			
	d	Net rental income or (loss)		90,500	0	0	90,500
	7a	Gross amount from sales of assets other than inventory	(i) Securities	37,480,067	0		
			(ii) Other	0			
	b	Less: cost or other basis and sales expenses	31,590,625	0			
	c	Gain or (loss)	5,889,442	0			
	d	Net gain or (loss)		5,889,442	0	0	5,889,442
	8a	Gross income from fundraising events (not including \$ 0 of contributions reported on line 1c). See Part IV, line 18	8a				
	b	Less: direct expenses	8b				
	c	Net income or (loss) from fundraising events					
9a	Gross income from gaming activities. See Part IV, line 19	9a					
b	Less: direct expenses	9b					
c	Net income or (loss) from gaming activities						
10a	Gross sales of inventory, less returns and allowances	10a					
b	Less: cost of goods sold	10b					
c	Net income or (loss) from sales of inventory						
Miscellaneous Revenue				Business Code			
	11a	McGovern Trust Fund Distribution	611710	93,346	0	0	93,346
	b	Recovered Fire Alarm/Security Expenses	611710	54,280	0	0	54,280
	c	Commissions(event \$1,861,other \$1748)	611710	3,609	0	0	3,609
	d	All other revenue		551	0	0	551
	e	Total. Add lines 11a-11d		151,786			
12	Total revenue. See instructions		16,249,859	122,454	0	7,512,517	

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

		(A) Beginning of year		(B) End of year
	1 Cash—non-interest-bearing	982,531	1	927,478
	2 Savings and temporary cash investments	20,240,296	2	22,497,514
	3 Pledges and grants receivable, net		3	0
	4 Accounts receivable, net	986,318	4	1,681,179
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	0
Assets	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	0
	7 Notes and loans receivable, net		7	0
	8 Inventories for sale or use		8	0
	9 Prepaid expenses and deferred charges	149,827	9	441,350
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 1,451,776		
	b Less: accumulated depreciation	10b 1,085,940		
	11 Investments—publicly traded securities	57,420,395	11	73,841,550
	12 Investments—other securities. See Part IV, line 11		12	0
	13 Investments—program-related. See Part IV, line 11		13	0
	14 Intangible assets		14	0
15 Other assets. See Part IV, line 11		15	0	
16 Total assets. Add lines 1 through 15 (must equal line 33)	79,863,386	16	99,754,907	
Liabilities	17 Accounts payable and accrued expenses	683,087	17	666,619
	18 Grants payable		18	
	19 Deferred revenue	441,384	19	451,084
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X of Schedule D	132,727	25	232,770
	26 Total liabilities. Add lines 17 through 25	1,257,198	26	1,350,473
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	4,793,775	27	5,151,552
	28 Net assets with donor restrictions	73,812,413	28	93,252,882
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances.	78,606,188	32	98,404,434
33 Total liabilities and net assets/fund balances.	79,863,386	33	99,754,907	

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2020

**Open to Public
Inspection**

Name of the organization

TRUSTEES OF THE PUBLIC LIBRARY OF THE CITY OF BOSTON

Employer identification number

04-6151731

Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ).)
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6 ☒ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 ☐ An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
- 10 ☐ An organization that normally receives (1) more than 33 $\frac{1}{3}$ % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 $\frac{1}{3}$ % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
- a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
- b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
- c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
- d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
- e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
- f Enter the number of supported organizations
- g Provide the following information about the supported organization(s).

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

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II.
If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(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 performed, 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 business under section 513						
4 Tax revenues levied for the organization'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						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in 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 organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/> ►						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2020 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2019 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2020 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2019 Schedule A, Part III, line 17	18	%

19a 33¹/₃% support tests—2020. If the organization did not check the box on line 14, and line 15 is more than 33¹/₃%, and line 17 is not more than 33¹/₃%, check this box and **stop here**. The organization qualifies as a publicly supported organization ☐ ►

b 33¹/₃% support tests—2019. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33¹/₃%, and line 18 is not more than 33¹/₃%, check this box and **stop here**. The organization qualifies as a publicly supported organization ☐ ►

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ☐ ►

Part IV Supporting Organizations (continued)

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

Section B. Type I Supporting Organizations

	Yes	No
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? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		
1		
2		

Section C. Type II Supporting Organizations

	Yes	No
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		

Section D. All Type III Supporting Organizations

	Yes	No
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?		
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).		
3 By reason of the relationship described in 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.		
1		
2		
3		

Section E. Type III Functionally Integrated Supporting Organizations

	Yes	No
1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).		
2 Activities Test. Answer lines 2a and 2b below.		
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 in 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.		
2a		
2b		
3a		
3b		

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

Section D—Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required—provide 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 organization is responsive (provide details in Part VI). See instructions.	8
9	Distributable amount for 2020 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E—Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2020	(iii) Distributable Amount for 2020
1 Distributable amount for 2020 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2020 (reasonable cause required—explain in Part VI). See instructions.			
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 3e			
g Applied to underdistributions of prior years			
h Applied to 2020 distributable amount			
i Carryover from 2015 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2020 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2020 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2020, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI . See instructions.			
6 Remaining underdistributions for 2020. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI . See instructions.			
7 Excess distributions carryover to 2021. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2016 . . .			
b Excess from 2017 . . .			
c Excess from 2018 . . .			
d Excess from 2019 . . .			
e Excess from 2020 . . .			

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

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.

OMB No. 1545-0047

2020

Open to Public
Inspection

Name of the organization

TRUSTEES OF THE PUBLIC LIBRARY OF THE CITY OF BOSTON

Employer identification number

04-6151731

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(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 writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Part II Conservation Easements.

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

1 Purpose(s) of conservation easements held by the organization (check all that apply). <input type="checkbox"/> Preservation of land for public use (for example, recreation or education) <input type="checkbox"/> Preservation of a historically important land area <input type="checkbox"/> Protection of natural habitat <input type="checkbox"/> Preservation of a certified historic structure <input type="checkbox"/> Preservation of open space	
2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d
3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶	
4 Number of states where property subject to conservation easement is located ▶	
5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?	<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶	
7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$	
8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.	

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.	
b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:	
(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 treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:	
a Revenue included on Form 990, Part VIII, line 1	▶ \$ 0
b Assets included in Form 990, Part X	▶ \$ 0

Part VII Investments—Other Securities.

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

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

Part VIII Investments—Program Related.

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

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

Part IX Other Assets.

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

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

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	0
(2) DUE TO THE CITY OF BOSTON	232,770
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	232,770

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

Part XIII - Supplemental Information (Continued)

Schedule D, Part V, Line 1e - ITEM '1E' LABELED OTHER EXPENDITURES FOR FACILITIES AND PROGRAMS SHOWS DISTRIBUTION TO TRINITY CHURCH IN THE CITY OF BOSTON FOR CURRENT AND ALL PRIOR YEARS LISTED HERE.

Schedule D, Part V, Line 1f - ITEM '1F' LABELED ADMINISTRATIVE EXPENSES SHOWS ACTUAL EXPENSES FOR CURRENT AND ALL PRIOR YEARS LISTED HERE.

Schedule D, Part V, Line 4 - ENDOWMENT FUNDS ARE USED TO SUPPORT THE ACTIVITIES AND PROGRAMS OF THE PUBLIC LIBRARY OF THE CITY OF BOSTON.

Schedule D, Part XI, Line 2b - DONATED SERVICES AND USE OF FACILITIES (\$222,815) IS THE FAIR MARKET VALUE OF FREE RENTAL SPACE PROVIDED TO THE BOSTON PUBLIC LIBRARY FUND INC. (\$48,046) AND TO THE ASSOCIATES OF THE BOSTON PUBLIC LIBRARY INC. (\$11,139) AND THE NORMAN B. LEVENTHAL MAP & EDUCATION CENTER INC. (\$163,630) ALL OPERATING WITHIN THE COPLEY LOCATION.

Schedule D, Part XI, Line 2d - OTHER IS \$692,332 IN EXPENSES PAID OUT DIRECTLY TO THE LIBRARY'S VENDORS BY THE UNIVERSAL SERVICE ADMINISTRATIVE COMPANY (USAC). THIS IS TO SUPPORT THE LIBRARY'S INFORMATION TECHNOLOGY INFRASTRUCTURE.

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (C) and (E) amounts for that individual.

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation				(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation					
1 DAVID J LEONARD, President	(i) 0 (ii) 193,654	0 4,750	0 27,357	0 0	0 0	0 0	0 225,761	0 0
2 EAMON SHELTON, Director Of Operations	(i) 0 (ii) 139,150	0 0	0 36,799	0 0	0 0	0 0	0 175,949	0 0
3 MICHAEL R COLFORD, Director Of Library Services	(i) 0 (ii) 151,898	0 0	0 23,979	0 0	0 0	0 0	0 175,877	0 0
4 LAURA S IRMSCHER, Chief Of Collections	(i) 13,662 (ii) 122,961	0 0	0 36,548	0 0	0 0	0 0	13,662 159,509	0 0
5 PRISCILLA FOLEY, Director Of Neighborhood Services	(i) 0 (ii) 130,042	0 0	0 41,052	0 0	0 0	0 0	0 171,094	0 0
6 KURT MANSPERGER, Chief Technology Officer	(i) 0 (ii) 136,623	0 0	0 30,612	0 0	0 0	0 0	0 167,235	0 0
7 ELLEN DONAGHEY, Chief Financial Officer (CFO)	(i) 0 (ii) 139,200	0 0	0 22,685	0 0	0 0	0 0	0 161,885	0 0
8	(i) (ii)							
9	(i) (ii)							
10	(i) (ii)							
11	(i) (ii)							
12	(i) (ii)							
13	(i) (ii)							
14	(i) (ii)							
15	(i) (ii)							
16	(i) (ii)							

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
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 990-EZ.

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

OMB No. 1545-0047

2020

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Inspection**

Name of the organization

TRUSTEES OF THE PUBLIC LIBRARY OF THE CITY OF BOSTON

Employer identification number

04-6151731

Form 990, Part III, Line 2 - COVID-19, WHICH BEGAN IN 2020, CONTINUES TO CAUSE THE INTERRUPTION OF SERVICES.

Form 990, Part III, Line 3 - DUE TO THE COVID-19 OUTBREAK IN THE UNITED STATES IN 2020 AND 2021, THE LIBRARY HAD TO KEEP AS OF MARCH 2020 ALL ITS LOCATIONS CLOSED AND HAVE MOST OF THE STAFF WORK REMOTELY FROM HOME WHEN POSSIBLE TO DO SO. THIS MEANT THAT IN ORDER TO CONTINUE TO PROVIDE SERVICES TO THE PUBLIC, SERVICES HAD TO SHIFT ONLINE AND BE DELIVERED VIA OTHER CREATIVE MEANS. AS OF JUNE 2021 THE LIBRARY HAD BEGUN SLOWLY TO OPEN BY ALLOWING SOME STAFF BACK IN THE BUILDINGS.

Form 990, Part V, Line 2a - THE 498 LISTED HERE IS THE TOTAL # OF EMPLOYEES PAID UNDER THE LIBRARY DEPARTMENT FOR CALENDAR YEAR 2020. THE CITY OF BOSTON PROCESSES THE PAYROLL FOR THE LIBRARY AND FILES THE W-3 TRANSMITTAL OF WAGE AND TAX STATEMENTS.

Form 990, Part V, Line 2b - THE CITY OF BOSTON PROCESSES THE LIBRARY'S ENTIRE PAYROLL. THEY ALSO FILE ALL THE REQUIRED FEDERAL EMPLOYMENT TAX RETURNS FOR THE LIBRARY UNDER THE CITY OF BOSTON FEDERAL ID.

Form 990, Part VI, Section A, Line 8a - THE CLERK TAKES THE MINUTES OF ALL THE TRUSTEE MEETINGS AND COMMITTEE MEETINGS AND ONCE THE MINUTES ARE APPROVED THEY ARE POSTED ON THE LIBRARY'S WEBSITE: BPL.ORG.

Form 990, Part VI, Section A, Line 8b - THE CLERK TAKES THE MINUTES OF ALL THE TRUSTEE MEETINGS AND COMMITTEE MEETINGS AND ONCE THE MINUTES ARE APPROVED THEY ARE POSTED ON THE LIBRARY'S WEBSITE: BPL.ORG.

Form 990, Part VI, Section B, Line 11b - A DRAFT OF FORM 990 WAS PROVIDED TO THE GOVERNING BODY FOR REVIEW AND APPROVAL BEFORE IT WAS FILED. THIS FORM 990 IS PREPARED/REVIEWED/FILED BY THE ASSISTANT PRINCIPAL ACCOUNTANT. IT IS ALSO REVIEWED AND APPROVED BY THE SUPERVISOR OF ACCOUNTING AND THE CHIEF FINANCIAL OFFICER. ALL THE FINANCIAL NUMBERS LISTED ON THEM CORRESPONDS TO THE AUDITED FINANCIAL STATEMENT TOTALS. ACCOUNTING SCHEDULES HAVE BEEN CREATED TO BACK UP ALL THE DATA ENTERED.

Form 990, Part VI, Section B, Line 12c - ALL EMPLOYEES ARE PROVIDED A SUMMARY OF THE CONFLICT OF INTEREST LAW AND MUST SIGN AND COMPLETE AN ACKNOWLEDGEMENT OF ITS RECEIPT AT TIME OF HIRE AND ANNUALLY THEREAFTER. ALSO, WITHIN THE FIRST 30 DAYS OF HIRE AND EVERY 2 YEARS THEREAFTER THEY ARE REQUIRED TO COMPLETE AN ONLINE TRAINING PROGRAM AT [HTTP://WWW.MUNIPROG.ETH.STATE.MA.US/](http://www.muniprogram.state.ma.us/).

Form 990, Part VI, Section B, Line 14 - ALL PUBLIC ENTITIES ARE COVERED BY STATE LAW.

Form 990, Part VI, Section B, Line 15 - THE COMPENSATION FOR OFFICERS AND KEY EMPLOYEES ARE SET BY THE CITY OF BOSTON'S HUMAN RESOURCES DEPARTMENT.

Form 990, Part VI, Section C, Line 19 - ALL GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS ARE AVAILABLE ON THE LIBRARY'S WEBSITE: BPL.ORG. ALL POLICIES INCLUDING THE CONFLICT OF INTEREST POLICY ARE AVAILABLE ON THE CITY'S HUB WHICH ALL EMPLOYEES HAVE ACCESS TO AND THEY ARE ALSO INCLUDED ON THE CITY OF BOSTON EMPLOYEE HANDBOOK.

Form 990, Part VII, Section B, Line 1(C) - \$ AMOUNTS LISTED FOR INDEPENDENT CONTRACTORS IS FOR CALENDAR YEAR 2020.

Form 990, Part VIII, Line 1c - MARATHON TEAM DONATIONS RECEIVED TOTALED \$10,610. DUE TO COVID-19 THE BOSTON MARATHON DID NOT TAKEN PLACE.

Form 990, Part VIII, Line 1d - IN FY21 LISTED HERE AMOUNTS RECEIVED DIRECTLY FROM THE BOSTON PUBLIC LIBRARY FUND INC. \$2,150,339 WHICH \$226,193 IS FOR THE NORMAN B. LEVENTHAL MAP & EDUCATION CENTER INC. AND FROM THE ASSOCIATES OF THE BOSTON PUBLIC LIBRARY INC. \$942,532, GRAND TOTAL \$3,092,871. PRIOR TO FY18 THESE WERE INCLUDED ON FORM 990 PART VIII STATEMENT OF REVENUE ITEM LINE 1F "ALL OTHER CONTRIBUTIONS..."

Activity Or Mission Description

Description

history, providing access to borrow from our vast collection of books and electronic databases and other materials and caring for the Public's Special Collections.

SCHEDULE 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.

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

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization

TRUSTEES OF THE PUBLIC LIBRARY OF THE CITY OF BOSTON

Employer identification number

04-6151731

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
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						

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 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?
							Yes No
(1)	BOSTON PUBLIC LIBRARY FUND INC (04-3150560) 700 BOYLSTON STREET, BOSTON, MA 02116	FUNDRAISING FOR BPL	MA	501(c)(3)	7	N/A	✓
(2)	ASSOCIATES OF THE BOSTON PUBLIC LIBRARY INC (04-290082) 700 BOYLSTON STREET, BOSTON, MA 02116	FUNDRAISING FOR BPL	MA	501(c)(3)	7	N/A	✓
(3)	THE CITY OF BOSTON (04-6011380) ONE CITY HALL SQUARE, BOSTON, MA 02116	CITY GOVERNMENT	MA	501(c)(3)	6	N/A	✓
(4)							
(5)							
(6)							
(7)							

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

Cat. No. 50135Y

Schedule R (Form 990) 2020

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.**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?		Yes No	
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		1a	✓
b Gift, grant, or capital contribution to related organization(s)		1b	✓
c Gift, grant, or capital contribution from related organization(s)		1c	✓
d Loans or loan guarantees to or for related organization(s)		1d	✓
e Loans or loan guarantees by related organization(s)		1e	✓
f Dividends from related organization(s)		1f	✓
g Sale of assets to related organization(s)		1g	✓
h Purchase of assets from related organization(s)		1h	✓
i Exchange of assets with related organization(s)		1i	✓
j Lease of facilities, equipment, or other assets to related organization(s)		1j	✓
k Lease of facilities, equipment, or other assets from related organization(s)		1k	✓
l Performance of services or membership or fundraising solicitations for related organization(s)		1l	✓
m Performance of services or membership or fundraising solicitations by related organization(s)		1m	✓
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		1n	✓
o Sharing of paid employees with related organization(s)		1o	✓
p Reimbursement paid to related organization(s) for expenses		1p	✓
q Reimbursement paid by related organization(s) for expenses		1q	✓
r Other transfer of cash or property to related organization(s)		1r	✓
s Other transfer of cash or property from related organization(s)		1s	✓

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.		(b) Transaction type (a–s)	(c) Amount involved	(d) Method of determining amount involved
BOSTON PUBLIC LIBRARY FUND INC		c	2,150,339	ACTUAL \$
(1) BOSTON PUBLIC LIBRARY FUND INC		n	48,046	FAIR MARKET VALUE
(2) ASSOCIATES OF THE BOSTON PUBLIC LIBRARY INC		c	942,532	ACTUAL \$
(3) ASSOCIATES OF THE BOSTON PUBLIC LIBRARY INC		n	11,139	FAIR MARKET VALUE
(4)				
(5)				
(6)				

Part VII**Supplemental Information**

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

Schedule R, Part V, Line 1c - Gift, Grant, or capital contribution to related organization(s)-The Boston Public Library received \$ 2,150,339 from The Boston Public Library Fund Inc. and \$ 942,532 from The Associates Of The Boston Public Library to support library operations. The Library operates as a separate department within the City Of Boston operations, with the City paying most of its costs. In fiscal year 2021 the Library's expenses it paid on its own totaled about 10 million and as a department of the City general fund about 39 million.

Schedule R, Part V, Line 1n - Sharing of facilities, equipment, mailing lists, or other assets related with related organization(s)-The Boston Public Library provided at the Copley location free rent space to The Boston Public Library Fund Inc. with an estimated fair market value of \$48,045.75 and to the Associates Of The Boston Public Library Inc. with an estimated fair market value of \$11,139.00. Although not considered a related organization to the Library, The Norman B. Leventhal Map & Education Center Inc. was also provided free rent space at the Copley location with an estimated fair market value of \$163,630.50.