990 **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2023

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.

Open to Public Inspection

A	For the 2	2023 calend	dar year, or tax	. year beginn	ing 0//0	11/2023	and ending		06/30/2	2024			
В	Check if a	pplicable:	C Name of organ	nization TRUS	STEES OF THE	PUBLIC LIBRAR	Y OF THE C	ITY OF	BOSTON	D Empl	loyer identification number		
	Address o	hange	Doing business	s as						04-6151731			
	Name cha	ınge	Number and st	treet (or P.O. b	ox if mail is not de	elivered to street add	lress)	Room	/suite	E Telep	hone number		
	Initial retu	rn	700 BOYLSTO	ON STREET							617-536-5400		
	Final return	n/terminated	City or town, state or province, country, and ZIP or foreign postal code										
	Amended	return	BOSTON, MA 02116								s receipts \$ 37,631,903		
	Applicatio	n pending '	F Name and addr	ress of principa	al officer: EMILY	TOKARCZYK			H(a) Is this a gro	up return f	for subordinates? 🗌 Yes 🔽 No		
			700 BOYLSTO	ON STREET,	BOSTON, MA	02116			H(b) Are all su	Are all subordinates included? Yes No			
ī	Tax-exem	pt status:	✓ 501(c)(3)	501(c) () (in	nsert no.))(1) or 527	7	If "No," attach	a list. S	See instructions.		
J	Website:	WWW.BF	PL.ORG						H(c) Group ex	emption	n number		
K	Form of or	ganization: 🗸	Corporation	Trust Ass	ociation Othe	er	L Year of for	mation	1848	M State	e of legal domicile: MA		
P	art I	Summa	ry				•						
	1 [Briefly des	cribe the organ	nization's n	nission or mos	t significant acti	vities: The	Bosto	n Public Lib	rary pr	ovides educational and		
ě													
au	_		d on Schedule (.	January		
ern						d its operations	or disposed	of m	ore than 25	% of it	ts net assets.		
ò				-		(Part VI, line 1a				3	15		
જ	1		_	_		verning body (F		1b)		4	15		
es			•	•	-	year 2023 (Part		, .		5	568		
ξ			per of voluntee			-	, iii o Zuj			6	257		
Activities & Governance	1					olumn (C), line 1	2			7a	237		
•						990-T, Part I, li				7b			
		vet uniteral	lea basilless to	axable inco	ine ironi i oni	1330-1,1 arti, ii			Prior Year		Current Year		
	Ω (8 Contributions and grants (Part VIII, line 1h)								01,520			
ine			gram service revenue (Part VIII, line 2g)										
Revenue		_		-						09,540			
Be	1		t income (Part							81,860			
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)								94,599			
									15,5	87,519	17,793,385		
			nts and similar amounts paid (Part IX, column (A), lines 1–3)							0			
		-								0			
es	15 3			A		art IX, column (A)	-		4,3	30,834	4,434,068		
Expenses	16a F		al fundraising			·				0	(
ă	b 1		raising expens			′	0						
ш	17		enses (Part IX,			•			11,4	62,803	11,823,845		
	1				-	IX, column (A),			15,7	93,637	16,257,913		
	19 F	Revenue le	ess expenses.	Subtract lin	e 18 from line	12			-2	06,118	1,535,472		
Net Assets or Fund Balances								Beg	inning of Curre		End of Year		
set	20		ts (Part X, line						93,0	56,961	97,910,572		
t As	21	Total liabili	ities (Part X, lin	ne 26)					4,6	60,316	4,955,405		
			or fund balan	ces. Subtra	ct line 21 from	n line 20			88,3	96,645	92,955,167		
P	art II	Signatu	re Block										
											my knowledge and belief, it i		
tru	ie, correct,	and complete	e. Declaration of p	reparer (otner	triari officer) is bas	sed on all information	i or which prep	arer na	s any knowied	ge.			
٥.													
Si	_	Signature	of officer						Date	Э			
He	ere	Emily To	karczyk, Chief	Financial Of	ficer								
		Type or pr	rint name and title										
Pa	nid	Print/Type preparer's name Preparer's signature Date							\neg	Check	if PTIN		
	eparer								self-em	ployed			
	eparer se Only		ne						Firm's	n's EIN			
_	o c Only	Firm's add	dress						Phone	none no.			
Ma	v the IR	S discuss t	this return with	the prepar	er shown abo	ve? See instruc	tions .				Yes No		

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Part	
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	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 history, providing access to borrow from our vast collection of books and other
	material and caring for the Public's Special Collections.
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 12,884,202 including grants of \$ 0) (Revenue \$ 129,365)
	The Boston Public Library (BPL) is an extraordinary institution that has served the citizens of Boston since 1848. Founded as the
	first municipal library and the first public library to lend books, the Boston Public Library is dedicated to the advancement of
	learning and is "Free to All," as is carved in the facade of the historic McKim building in Copley Square. The BPL encompasses a
	Central Library, twenty-five vibrant neighborhood libraries, a robust website, and classes and programs for all ages. The Library's
	collection of more than 23 million items includes circulating books, eBooks, DVDs, and music, as well as research and special
	collections that encompass rare manuscripts, prints, photographs, drawings, maps, posters, and more. The Boston Public Library's
	Kirstein Business Library and Innovation Center, Norman B. Leventhal Map Center, and Collections of Distinction such as the
	personal library of John Adams, the Anti-Slavery collection, the Thomas Pennant Barton Collection of Shakespeare, and the
	Boston Pictorial Archive attract researchers and scholars from across the city and around the world. In fiscal year 2024, Boston
	Public Library hosted 14,337 public programs reaching 202,344 people, had 1.3 million in person visitors, and loaned 6.5 million
	items. Of those 6.5 million lends, more than 4.3 million were digital downloads of e-books and audiobooks. In the same fiscal year,
	(Continued on Schedule O, Statement 2)
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
	<u> </u>
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)
4e	Total program service expenses 12,884,202

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Form 99	0 (2023)			Page (
Part			-	rage
	<u> </u>		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 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If</i> "Yes," <i>complete Schedule C, Part I</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? <i>If</i> "Yes," <i>complete Schedule C, Part II</i>	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 Rev. Proc. 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? <i>If "Yes," complete Schedule D, Part II</i>	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? <i>If "Yes," complete Schedule D, Part IV</i>	9		,
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? <i>If</i> "Yes," <i>complete Schedule D, Part V</i>	10	,	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, 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		~
С	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII </i>	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		~
е	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			

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.

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on

Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?

Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H

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

If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

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Part	Checklist of Required Schedules (continued)			
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		Yes	No
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		~
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	V	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		,
b c	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	24d 25a		·
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		,
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	26		,
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		,
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions).			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i> "Yes," <i>complete Schedule L, Part IV</i>	28a		,
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		~
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		,
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29	~	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> "Yes," <i>complete Schedule M</i>	30		,
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		~
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		,
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		,
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	>	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		~
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "Yes," <i>complete Schedule R, Part V, line</i> 2	36		,
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		,
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O	38	~	
Part	V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			V No.
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 131		Yes	No
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	~	

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 568			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	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).			
а	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		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7с		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	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 8	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	7h		
0	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.			
а	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:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
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:			
а	Gross income from members or shareholders			
b	Gross income from other sources. (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	10-		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which			
D	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		~
	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?	15		~
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		~
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person, engage in any activities			
	that would result in the imposition of an excise tax under section 4951, 4952, or 4953?	17		
	If "Yes," complete Form 6069.			

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Part VI

Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a

response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year . . . 1a 15 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. Enter the number of voting members included on line 1a, above, who are independent . 1b 15 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 1 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?. 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? . 5 6 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No **10a** Did the organization have local chapters, branches, or affiliates? 10a 1 If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a **b** Describe on Schedule O the process, if any, used by the organization to review this Form 990. **12a** Did the organization have a written conflict of interest policy? If "No," go to line 13 12a ~ Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c 13 13 Did the organization have a written document retention and destruction policy? 14 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official 15a 15b If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement 16a J b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed MA 17 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c) 18 (3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Other (explain on Schedule O) Own website Another's website ✓ Upon request Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, 19 and financial statements available to the public during the tax year. 20 State the name, address, and telephone number of the person who possesses the organization's books and records. Emily Tokarczyk, (617)859-2345

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See the instructions for the order in which to list the persons above.

☐ Check this box if neither the organization nor	any relate	d org	aniz	atic	n c	ompe	nsa	ted any current	officer, director,	or trustee.
			(C)							
(A)	(B)	١,,			ition			(D)	(E)	(F)
Name and title	Average					e than o is both		Reportable	Reportable	Estimated amount
	hours					or/trust		compensation from the	compensation from related	of other
	per week (list any	or o	Ins	Officer	E G	em Hig	For	organization (W-2/	organizations (W-2/	compensation from the
	hours for	Individual trustee or director	Institutional trustee	icer	Key employee	Highest compensated employee	Former	1099-MISC/	1099-MISC/	organization and
	related organizations	all t	ona	. (blo	ee Cor	-	1099-NEC)	1099-NEC)	related organizations
	below	rust	l tru	×	/ee	npei				
	dotted line)	ee	stee			nsat				
			7			ed				
DAVID J LEONARD	35.00									
President	0.00			~				0	226,188	30,903
KEITH ALLEN GILLETTE	35.00									
Chief Technology Officer	0.00					~		0	146,670	40,791
MICHAEL R COLFORD	35.00									
Director Of Library Services	0.00					~		0	159,241	26,219
JOELLE LONG	35.00									
Supervisor Of Circulation And Shelving	0.00					~		2,930	143,588	24,941
EMILY TOKARCZYK	35.00									
Chief Financial Officer (CFO) (effective July 2023)	0.00			~				0	126,971	38,713
SARAH ZAPHIRIS	35.00									
Chief Of Staff & Strategy (effective November 2021	0.00					~		0	146,942	16,828
ELIZABETH PRINDLE	35.00									
Director Of Research & Special Collections (effecti	0.00					~		19,102	127,840	15,172
ELLEN DONAGHEY	35.00									
Chief Financial Officer (CFO) (retired July 2023)	0.00			~				0	124,967	18,217
PAMELA CARVER	35.00									
Clerk & Executive Assistant To The President	0.00			~				0	109,295	11,295
PRISCILLA H DOUGLAS	1.00									
Chair (term ended May 2024)	0.00	~		~				0	0	0
DOCTOR RAYMOND LIU	1.00									
Chair(effective May 2024), (prior Trustee September	0.00	~		~				0	0	0
EVELYN ARANA-ORTIZ	1.00									
Vice Chair(Interim Chair Jan-May2021,Trustee prio	0.00	~		~				0	0	0
CHERYL CRONIN	1.00									
Trustee	0.00	~						0	0	0
JOHN T HAILER	1.00									
Trustee	0.00	~						0	0	0

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

		(C)								
		(C) Position								
(A)	(B)	(do n	(do not check more t				one	(D)	(E)	(F)
Name and title	Average hours	box, unless person is both an officer and a director/trustee)						Reportable compensation	Reportable compensation	Estimated amount of other
	per week		_		_			from the	from related	compensation
	(list any hours for	Individual trustee or director	Institutional trustee	Officer	Key employee	mg digh	Former	organization (W-2/	organizations (W-2/	from the organization and
	related	idua	utio	욕	emp	est o	let.	1099-NEC)	1099-MISC/	related organizations
	organizations	or tr	na		loye	e om			,	
	below dotted line)	ıste	trus		ď	pen				
		Ф	tee			Highest compensated employee				
JEFFREY B HAWKINS	1.00									
Trustee	0.00	~				. 4		0	0	0
NAVJEET K BAL	1.00									
Trustee (effective January 2021)	0.00	1						0	0	0
JOSEPH S BERMAN	1.00			K						
Trustee (effective January 2021)	0.00	~						0	0	0
MICHAEL RUSH	1.00	. (7							
Trustee (effective January 2021)	0.00	V						0	0	0
CHRISTIAN J WESTRA	1.00									
Trustee (effective January 2021)	0.00	~						0	0	0
JOSE C MASSO III	1.00									
Trustee (effective May 2022)	0.00	1						0	0	0
DOCTOR LYNN PERRY WOOTEN	1.00									
Trustee (effective May 2022)	0.00	~						0	0	0
PORSHA OLAYIWOLA	1.00									
Trustee (effective September 2023)	0.00	~						0	0	0
JAMES CANALES	1.00									
Trusteee (effective September 2023)	0.00	~						0	0	0
JULIE KIM	1.00									
Trusteee (effective May 2024)	0.00	~						0	0	0
JONATHAN S LAVINE	1.00									
Trusteee (effective May 2024)	0.00	~						0	0	0
CHYNAH TYLER	1.00									
Trustee (term ended May 2024)	0.00	~						0	0	0
		1								

Part	VII Section A. Officers, Directors, 7	Γrustees,	Key I	Em	plo	yee	s, an	ıd F	lighest Compe	nsated Emplo	yees (cont	inued)
					(0	C)						
	(A)	(B)	Position				(D)	(E)	(F)			
	Name and title	Average	١,				e than		Reportable	Reportable	Estimated a	mount
	Name and title	hours					is both or/trus		compensation	compensation	of othe	
		per week		_		1			from the	from related	compensa	
		(list any	Individual trustee or director	lt:	Officer	Key employee	ng digh	Former	organization (W-2/	organizations (W-2/	from the	
		hours for related	rec	T.	ě	em	est	l er	1099-MISC/ 1099-NEC)	1099-MISC/ 1099-NEC)	organization related organi	
		organizations	of all t	ona		Ploy	# co		1000 1420)	1000 1420)	related organi	Zations
		below	rust	 		/ee	npe					
		dotted line)	ee	nstitutional trustee			Highest compensated employee					
				0			ted					
			1									
			1									
			1						•			
			-									
			-						2			
			1									
]	١,								
					X							
			1									
					4							
				K								
		+										
1b	Subtotal								22,032	1,311,702	2	23,079
С	Total from continuation sheets to Part	VII, Section	n A									
d	Total (add lines 1b and 1c)								22,032	1,311,702		23,079
2	Total number of individuals (including		limite	ed t	to t	thos	se lis	ted	above) who re	eceived more t	han \$100,0)00 o
	reportable compensation from the organi	ization							91			
											Yes	No
3	Did the organization list any former of	officer, dire	ector,	tru	iste	e, k	кеу е	mpl	loyee, or highes	st compensated		
	employee on line 1a? If "Yes," complete	Schedule J	for s	uch	ind	ivid	ual				3	V
4	For any individual listed on line 1a, is the	sum of re	porta	ble	con	npe	nsatio	n a	nd other compe	nsation from the		
	organization and related organizations											
									•		4 1	
5	Did any person listed on line 1a receive of									tion or individual		
3	for services rendered to the organization											
Coot:			John	J.U	JUI	.001	U I	J, 3		· · · · ·	5 1	
	on B. Independent Contractors		00001	o el	ا د ما	00.5	ndc:=1		water at a state of	received	han #100 (200 ==
1	Complete this table for your five high											
	compensation from the organization. Rep	ort comper	ısatıdı	101	rtne	e ca	ienda	r ye	ar ending with or	within the organ	ıı∠atıon`s ta>	k year.

	_	= -
(A) Name and business address	(B) Description of services	(C) Compensation
EMCOR Service-Northeast dba Comm Air Balco, P O Box 845286, Boston, MA 02284	HVAC	537,195
Securitas Security Services USA Inc, P O Box 403412, Atlanta, GA 30384-3412	Security	425,894
Internet Archive, 300 Funson Avenue, San Francisco, CA 94118	Digitization	383,570
Massachusetts Library System, 33 Boston Post Road WEST, Suite 400, Marlborough	Cataloging	324,058
Boston Library Consortium, 31 Hayward St, Suite 2F, Franklin, MA 02038	Cataloging, Membership and F	259,968
2 Total number of independent contractors (including but not limited to	those listed above) who	
received more than \$100,000 of compensation from the organization	11	

Part VIII Statement of Revenue

1		VIII	Check if Schedule	Осо	ntains a re	spon	se or note to an	y line in this Pa	ırt VIII		<u>v</u>
Bo								(A) Total revenue	(B) Related or exempt function revenue		(D) Revenue excluded from tax under sections 512–514
20 20 20 20 20 20 20 20	ts, ts	1a	Federated campaig	ns .		1a	0				
Second S	ran	b	Membership dues			1b	0				
Section Sect	عَ جَ	С	_				0				
Section Sect	ifts ar /	d									
Section Sect	מ ≝	e				1e	5,427,430				
Section Sect	Sign Sign	T									
Second S	ig et	_				11	1,006,765				
Section Sect	불티	y				4	.				
Second S	and	h						10 772 544			
Page	0 %	- 11	Total. Add lines 1a-	-11 .				10,772,544			
Total. Add lines 2a-2f	ě.	22	NETWORK MEMBER	СПІВ	DUES			120 265	120 365	0	
Total. Add lines 2a-2f	اہ ج						011710	127,303	127,303	0	
Total. Add lines 2a-2f	Se I								7		
Total. Add lines 2a-2f	E S	_									
Total, Add lines 2a-2f	20 20	е									
1,535,875	Pro	f						0	0	0	C
1,535,875	_	g	Total. Add lines 2a-	-2f .				129,365			
Note Page		3	Investment income	(incl	uding divi	dends	, interest, and				
Second S				-				1,535,875	0	0	1,535,875
Part		4				-		0	0	0	0
Company Comp		5	Royalties					16,750	0	0	16,750
B Less: rental expenses C Rental income or (loss) GC 2,423,750 O O O O O O O O O			_				(ii) Personal				
Total Rental income or (loss) Gc 2,423,750 0 0 0 2,423,750 0		_			2,42	-					
Net rental income or (loss)			-								
Ta Gross amount from sales of assets other than inventory Less: cost or other basis and sales expenses Tb 19,838,518 0 0 0 0 0 0 0 0 0		_	` '		`						
Sales of assets other than inventory Ta 22,139,342 0		-		r (loss				2,423,750	0	0	2,423,750
Section Sec		/a			(i) Securit	.165	(ii) Other				
December December				72	22,13	9,342	0				
Total Add lines 11a - 11d	a	b	-	74			-				
Net gain or (loss) 10 2,300,824 0 0 0 0 0 0 0 0 0	Ž	_		7b	19.83	8.518	0				
Net gain or (loss) 10 2,300,824 0 0 0 0 0 0 0 0 0	e e	С	Gain or (loss)								
Secontributions reported on line Secontributions Secontributio		d	, ,					2,300,824	0	0	2,300,824
Secontributions reported on line Secontributions Secontributio	je	8a									
See Part IV, line 18	გ ∣										
STOPPING September Septe				porte	d on line						
C Net income or (loss) from fundraising events			1c). See Part IV, line	18		8a					
9a Gross income from gaming activities. See Part IV, line 19 9a		b		7							
activities. See Part IV, line 19 9a 9b		_				g eve	nts				
b Less: direct expenses		9a									
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 11a Commissions(event\$467,407,0ther \$255) 611710 467,662 0 0 467,66 b McGovern Trust Fund Distribution 611710 100,241 0 0 0 100,2 c PayForPrint 611710 43,282 0 0 43,2 d All other revenue 3,092 0 0 3,0 e Total. Add lines 11a-11d 614,277			· · · · · · · · · · · · · · · · · · ·				_				
Teturns and allowances 10a 10b 10b 10b 10b 10b 10b 10b 10b 10b 10b 10b 10b 10b			, ,			STIVITIE	S				
b Less: cost of goods sold		ıva			-	100					
C Net income or (loss) from sales of inventory		h									
State						$\overline{}$	irv				
11a Commissions(event\$467,407,Other \$255) 611710 467,662 0 0 467,664 b McGovern Trust Fund Distribution 611710 100,241 0 0 100,24 c PayForPrint 611710 43,282 0 0 43,24 d All other revenue 3,092 0 0 3,04 e Total. Add lines 11a-11d	"	U	1401 111001116 01 (1055)	, 11011	i Juica UI II	i v Gi ILU	-				
e Total. Add lines 11a-11d	ous	112	Commissions(avent	\$467	107 Other ¢	255)		A67 662	0	0	467,662
e Total. Add lines 11a-11d	ine Tue					_JJ)					100,241
e Total. Add lines 11a-11d	ella Ver		DovEorDrint					-			43,282
e Total. Add lines 11a-11d	Sce	Ч					311710	-			3,092
	Ξ	A						•			3,072
16 TOTALI CACITORI OCC I IOTALI OCIONO		12						17,793,385	129,365	0	6,891,476

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Part IX Statement of Functional Expenses

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

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

	Check it Schedule O contains a response	or note to any line	; III IIIIS Fait IA .	<u></u>	<u>.</u>
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	0	0		
2	Grants and other assistance to domestic	0	0		
	individuals. See Part IV, line 22	0	0		
3	Grants and other assistance to foreign organizations, foreign governments, and				
	foreign individuals. See Part IV, lines 15 and 16	0	0		
4	Benefits paid to or for members	0	0		
5	Compensation of current officers, directors, trustees, and key employees	0	0	0	0
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0		0	0
7	Other salaries and wages	3,870,497	2,864,168	1,006,329	0
8	Pension plan accruals and contributions (include		0)		
0	section 401(k) and 403(b) employer contributions) Other employee benefits	232,035	171,706	60,329	0
9 10	Payroll taxes	331,536	245,337	86,199	0
11	Fees for services (nonemployees):				<u> </u>
а	Management	0			0
b	Legal	0			0
C	Accounting	36,000	0	36,000	0
d e	Lobbying	0			0
f	Investment management fees	235,065	0	235,065	0
g	Other. (If line 11g amount exceeds 10% of line 25, column		-		-
	(A), amount, list line 11g expenses on Schedule O.) .	1,585,881	1,173,552	412,329	0
12	Advertising and promotion	8,407	6,221	2,186	0
13 14	Office expenses	940,724 1,415,631	696,136 1,047,567	244,588 368,064	0
15	Royalties	0	1,047,307	300,004	0
16	Occupancy	0			0
17	Travel	103,832	76,836	26,996	0
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .	0 158,546	0 117,324	0 41,222	0
20	Interest	0	0	0	0
21	Payments to affiliates	846,523	626,427	220,096	0
22	Depreciation, depletion, and amortization	116,502	86,211	30,291	0
23	Insurance	18,917	0	18,917	0
24	above. (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A), amount, list line 24e expenses on Schedule O.)				
а	Books and related materials	2,751,701	2,751,701	0	0
b	Equipment rental/Maintenance/Facilities Program/Admin	1,569,549 1,355,732	1,161,466 1,355,732	408,083	0
d	Security Security	623,986	461,750	162,236	0
е	All other expenses	56,849	42,068	14,781	0
25	Total functional expenses. Add lines 1 through 24e	16,257,913	12,884,202	3,373,711	0
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

		Check 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	153,195	1	221,958
	2	Savings and temporary cash investments	22,982,418	2	25,905,192
	3	Pledges and grants receivable, net	0	3	0
	4	Accounts receivable, net	2,499,311	4	2,671,162
	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	0	5	0
	6	Loans and other receivables from other disqualified persons (as define under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)			
"	7	Notes and loans receivable, net	0	6 7	0
Assets	8	Inventories for sale or use	0	8	0
Ass	9	Prepaid expenses and deferred charges	624,517	9	025.727
'	10a	Land, buildings, and equipment: cost or other	024,517	9	835,727
	.00	basis. Complete Part VI of Schedule D 10a 4,521,5	502		
	b	Less: accumulated depreciation 10b 2,490,5		10c	2,030,948
	11	Investments—publicly traded securities			66,245,585
	12	Investments—other securities. See Part IV, line 11			0
	13	Investments—program-related. See Part IV, line 11	0	13	0
	14	Intangible assets	0	14	0
	15	Other assets. See Part IV, line 11	0	15	0
	16	Total assets. Add lines 1 through 15 (must equal line 33)	93,056,961	16	97,910,572
	17	Accounts payable and accrued expenses	1,231,113	17	1,382,181
	18	Grants payable		18	
	19	Deferred revenue	2,637,834	19	3,007,507
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.		21	
es	22	Loans and other payables to any current or former officer, director			
Ħ		trustee, key employee, creator or founder, substantial contributor, or 35	%		
Liabilities		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 thin parties, and other liabilities not included on lines 17–24). Complete Part			
		of Schedule D	791,369	25	565,717
	26	Total liabilities. Add lines 17 through 25	4,660,316		4,955,405
S		Organizations that follow FASB ASC 958, check here			
nce		and complete lines 27, 28, 32, and 33.			
ala	27	Net assets without donor restrictions	5,867,835	27	5,903,802
d B	28	Net assets with donor restrictions	82,528,810	28	87,051,365
Net Assets or Fund Balances		Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.			
0 0	29	Capital stock or trust principal, or current funds		29	
ets	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
4ss	31	Retained earnings, endowment, accumulated income, or other funds .		31	
et/	32	Total net assets or fund balances	88,396,645	32	92,955,167
Ź	33	Total liabilities and net assets/fund balances	93,056,961	33	97,910,572

Form 990 (2023) Page **12**

Part	XI Reconciliation of Net Assets							
	Check if Schedule O contains a response or note to any line in this Part XI					~		
1								
2	2 Total expenses (must equal Part IX, column (A), line 25)							
3	3 Revenue less expenses. Subtract line 2 from line 1							
4	4 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 4							
5	Net unrealized gains (losses) on investments	5		2,645,273				
6 Donated services and use of facilities								
7 Investment expenses								
8 Prior period adjustments								
9	Other changes in net assets or fund balances (explain on Schedule O)	9			37	7,777		
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line							
	32, column (B))	10			92,95	5,167		
Part	XII Financial Statements and Reporting							
	Check if Schedule O contains a response or note to any line in this Part XII							
					Yes	No		
1	Accounting method used to prepare the Form 990: Cash Accrual Other							
	If the organization changed its method of accounting from a prior year or checked "Other," e	xplain	on					
	Schedule O.							
2a								
	If "Yes," check a box below to indicate whether the financial statements for the year were co	mpiled	d or					
	reviewed on a separate basis, consolidated basis, or both.							
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis							
b	Were the organization's financial statements audited by an independent accountant?		.	2b	~			
	If "Yes," check a box below to indicate whether the financial statements for the year were aud	lited o	n a					
	separate basis, consolidated basis, or both.							
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis							
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for or							
	the audit, review, or compilation of its financial statements and selection of an independent accoun		L	2c	~			
	If the organization changed either its oversight process or selection process during the tax year, Schedule O.	explain	i on					
•								
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set f Uniform Guidance, 2 C.F.R. Part 200, Subpart F?			_				
L.	If "Yes," did the organization undergo the required audit or audits? If the organization did not ur		L	3a				
b	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such			3b				
		audits	· _		000			
				Forn	1 990	(2023)		

SCHEDULE A (Form 990)

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

Attach to Form 990 or Form 990-EZ.

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

Inspection

Name of the organization					Employer identification	number		
RUSTEES OF THE PUBLIC LIBRARY OF THE CITY OF BOSTON 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 church					0(b)(1)(A)(i).			
2 A school described in section		•	-					
3 A hospital or a cooperative ho						,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
4 A medical research organization hospital's name, city, and state	e:				40)			
5 An organization operated for section 170(b)(1)(A)(iv). (Com		college or university	owned o	r operate	ed by a government	al unit described in		
 6 A federal, state, or local gover 7 An organization that normally described in section 170(b)(1 	receives a subs	tantial part of its sup				n the general public		
8 A community trust described	in section 170(b)	(1)(A)(vi). (Complete I	Part II.)	9)				
9 An agricultural research organ or university or a non-land-gra university:	ant college of agr	iculture (see instruction	ons). Ente	r the nan	ne, city, and state of	the college or		
10 An organization that normally receipts from activities related support from gross investmen acquired by the organization a	I to its exempt fu it income and uni	nctions, subject to ce related business taxal	rtain exce ble incom	eptions; a ne (less se	and (2) no more than ection 511 tax) from	33 ¹ / ₃ % of its		
11 An organization organized and	•		-					
12 An organization organized and								
one or more publicly supporte the box on lines 12a through 1								
 Type I. A supporting organization supporting organization. 	n(s) the power to	regularly appoint or e	lect a ma	jority of t				
b Type II. A supporting orga control or management of organization(s). You must	the supporting o	rganization vested in	the same					
c Type III functionally integ	grated. A suppor	ting organization oper	ated in c			ally integrated with,		
d Type III non-functionally	`	•		-		orted organization(s)		
that is not functionally inte requirement (see instruction	grated. The orga	nization generally mus	st satisfy	a distribu	ıtion requirement an			
e Check this box if the organ functionally integrated, or	nization received Type III non-func	a written determination	on from th	ne IRS tha organizati	at it is a Type I, Type ion.	e II, Type III		
f Enter the number of supported								
g Provide the following information	n about the supp	orted organization(s).						
(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	listed in you	organization ur governing ment?				
			Yes	No				
(A)								
(B)								
(C)								
(D)								
(E)								
Total								

Schedule A (Form 990) 2023 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

Part II

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2019 **(b)** 2020 (d) 2022 (c) 2021 (e) 2023 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge **Total.** Add lines 1 through 3 4 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) **Public support.** Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2019 (b) 2020 (c) 2021 (d) 2022 (e) 2023 (f) Total 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Net income from unrelated business 9 activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) **Total support.** Add lines 7 through 10 11 12 13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) Section C. Computation of Public Support Percentage 14 Public support percentage for 2023 (line 6, column (f), divided by line 11, column (f)) % Public support percentage from 2022 Schedule A, Part II, line 14 15 331/3% support test - 2023. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this 331/3% support test - 2022. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check 17a 10%-facts-and-circumstances test - 2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported b 10%-facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see 18

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.)

	if the organization falls to quality	under the te	sis listed beit	ow, please co	ompiete Part	11.)	
	on A. Public Support				1		_
	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(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				2.		
6 7a	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons .			5			
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		. 6				
с 8	Add lines 7a and 7b		X				
Secti	on B. Total Support						
	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(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	700					
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	2,					
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the organization, check this box and stop he	•			or fifth tax ye		
Secti	on C. Computation of Public Suppor	t Percentag	е				
15	Public support percentage for 2023 (line 8	3, column (f), c	livided by line	13, column (f))		15	%
16	Public support percentage from 2022 Sch					16	%
Secti	on D. Computation of Investment In					•	
17	Investment income percentage for 2023 (line 10c, colun	nn (f), divided b	y line 13, colu	ımn (f))	17	%
18	Investment income percentage from 2022	Schedule A,	Part III, line 17			18	%
19a	331/3% support tests—2023. If the organ						
b	17 is not more than 33 ¹ / ₃ %, check this box 33 ¹ / ₃ % support tests – 2022. If the organize line 18 is not more than 33 ¹ / ₃ %, check this line 18 is not more than 33 ¹ / ₃ %, check this line 18	ation did not c	heck a box on	line 14 or line	19a, and line 16	is more than 3	33 ¹ /3%, and
20	Private foundation If the organization di	_	=	•		-	

Schedule A (Form 990) 2023 Page 4

Part IV **Supporting Organizations**

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

Se

.	on A. All Supporting Organizations		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1	103	Ito
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		
5а	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If</i> "Yes," <i>provide detail in Part VI</i> .	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		
b	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI</i> .	9b		
С	Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit			
10a	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI . Was the organization subject to the excess business holdings rules of section 4943 because of section	9c		
	4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.	10a		

b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to

determine whether the organization had excess business holdings.)

10b

Schedule A (Form 990) 2023 Page 5 Part IV **Supporting Organizations** (continued) Yes No 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 on lines 11b and 11c below, the governing body of a supported organization? 11a **b** A family member of a person described on line 11a above? 11b c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI. 11c 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. 1 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. 2 Section C. Type II Supporting Organizations Yes No 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? 1 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s), or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). 2 By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard. 3 Section E. Type III Functionally Integrated Supporting Organizations Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). The organization satisfied the Activities Test. Complete line 2 below. The organization is the parent of each of its supported organizations. Complete line 3 below. С 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. Yes No 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. 2a b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement. 2b 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. 3a

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.

3b

Scheau	e A (Form 990) 2023			Page C
Part	V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	jani	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying			
	instructions. All other Type III non-functionally integrated supporting organ	nizat	ions must complete Section	
Sect	on A-Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	Ó	
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	on B—Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	on C—Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	☐ Check here if the current year is the organization's first as a non-function	ally i	integrated Type III support	ting organization
	(see instructions).			

Schedule A (Form 990) 2023 Page 7

Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Part V Section D-Distributions **Current Year** 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 4 Amounts paid to acquire exempt-use assets 4 Qualified set-aside amounts (prior IRS approval required - provide details in Part VI) 5 5 Other distributions (describe in Part VI). See instructions. 6 6 7 Total annual distributions. Add lines 1 through 6. 7 Distributions to attentive supported organizations to which the organization is responsive 8 (provide details in Part VI). See instructions. 8 Distributable amount for 2023 from Section C, line 6 9 9 10 10 Line 8 amount divided by line 9 amount (ii) (iii) **Underdistributions** Section E—Distribution Allocations (see instructions) **Distributable Excess Distributions** Pre-2023 Amount for 2023 Distributable amount for 2023 from Section C, line 6 2 Underdistributions, if any, for years prior to 2023 (reasonable cause required - explain in Part VI). See instructions. Excess distributions carryover, if any, to 2023 a From 2018 From 2019 **c** From 2020 **d** From 2021 From 2022 Total of lines 3a through 3e Applied to underdistributions of prior years Applied to 2023 distributable amount Carryover from 2018 not applied (see instructions) i j Remainder. Subtract lines 3g, 3h, and 3i from line 3f. Distributions for 2023 from Section D, line 7: Applied to underdistributions of prior years Applied to 2023 distributable amount Remainder. Subtract lines 4a and 4b from line 4. Remaining underdistributions for years prior to 2023, if any. Subtract lines 3g and 4a from line 2. For result 5 greater than zero, explain in Part VI. See instructions. Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. Excess distributions carryover to 2024. Add lines 3j and 4c. Breakdown of line 7: Excess from 2019 . . . Excess from 2020 . . . Excess from 2021 . . . Excess from 2022 Excess from 2023 . . .

Schedule A (Form 990) 2023 Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

SCHEDULE D (Form 990)

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.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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

Name o	f the organization		Employer identification number
TRUS	TEES OF THE PUBLIC LIBRARY OF THE CITY OF BOST	ON	04-6151731
Par	Organizations Maintaining Donor Advisor Complete if the organization answered "		s or Accounts
		(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 a	g .	
_	funds are the organization's property, subject to the		
6	Did the organization inform all grantees, donors, an only for charitable purposes and not for the benefit conferring impermissible private benefit?		any other purpose
Par	Conservation Easements		
	Complete if the organization answered "\	Yes" on Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the o	rganization (check all that apply).	
	☐ Preservation of land for public use (for example, recrea	ation or education) 🔲 Preservation o	f a historically important land area
	Protection of natural habitat	Preservation of	f a certified historic structure
•	Preservation of open space		
2	Complete lines 2a through 2d if the organization heleasement on the last day of the tax year.	d a qualified conservation contribution	
			Held at the End of the Tax Year
a	Total number of conservation easements		. 2a
b	Total acreage restricted by conservation easements Number of conservation easements on a certified hi		
c d	Number of conservation easements included on line		
-	on a historic structure listed in the National Register	· · · · · · · · · · · · · · · · · · ·	· 2d
3	Number of conservation easements modified, trans	ferred, released, extinguished, or tern	
	tax year		
4	Number of states where property subject to conserv		
5	Does the organization have a written policy regard		
	violations, and enforcement of the conservation eas		
6	Staff and volunteer hours devoted to monitoring, inspec	ting, handling of violations, and enforcing	conservation easements during the year
_			
7	Amount of expenses incurred in monitoring, inspecting	g, handling of violations, and enforcing of	conservation easements during the year
8	Does each conservation easement reported on line	2d above satisfy the requirements of s	section 170(h)(4)(R)(i)
Ü	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports of		
	sheet, and include, if applicable, the text of the footi		
	organization's accounting for conservation easemer	nts.	
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 FASI		
	of art, historical treasures, or other similar assets	•	·
	service, provide in Part XIII the text of the footnote to		
b	If the organization elected, as permitted under FAS		
	art, historical treasures, or other similar assets held provide the following amounts relating to these item	c	
	(i) Povenue included on Form 000 Port VIII line 1	.	¢
	(i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X		Φ
2	(ii) Assets included in Form 990, Part X If the organization received or held works of art,	historical treasures or other similar	Φassets for financial gain, provide the
	following amounts required to be reported under FA	SB ASC 958 relating to these items.	
a	Revenue included on Form 990, Part VIII, line 1 .		
b	Assets included in Form 990, Part X		\$

chedul	e D (Form 990) 2023							Page 2
Part	Organizations Maintaining	Collections of	Art, Histori	cal Treasures	, or Ot	her Similar Ass	ets (cont	
3	Using the organization's acquisition, a collection items (check all that apply).							
а	✓ Public exhibition		d□l	oan or exchang	e progr	am		
b	Scholarly research							
c	✓ Preservation for future generations							
4	Provide a description of the organizati	on's collections a	nd explain h	ow they further	the ora	anization's exem	ot purpose	e in Part
-	XIII.					aa	, pa., pao.	
5	During the year, did the organization s	solicit or receive	donations of	art, historical ti	reasures	s, or other similar		
	assets to be sold to raise funds rather		ined as part	of the organizati	ion's co	llection?	☐ Yes	✓ No
Part	Escrow and Custodial Arrai Complete if the organization	•	on Form 9	90 Part IV line	≙9 or	reported an amo	ount on F	orm
	990, Part X, line 21.	answered res	0111 01111 0	50, r art iv, iii k	0,01	roported an ame	Julii Oli I	OIIII
1a	Is the organization an agent, trustee,	custodian or oth	er intermedi	ary for contribut	tions or	other assets not		
ıu	included on Form 990, Part X?				tions of	Other assets flot	☐ Yes	□ No
							□ res	□ МО
b	If "Yes," explain the arrangement in Pa	irt XIII and comple	te the follow	ing table.		Δ		
	5						ount	
С	Beginning balance				1c			
d	Additions during the year				1d			
е	Distributions during the year				1e			
f	Ending balance				1f			
2a	Did the organization include an amoun					-		∐ No
b	If "Yes," explain the arrangement in Pa	rt XIII. Check here	if the expla	nation has been	provide	ed in Part XIII .		
Par								
	Complete if the organization	answered "Yes'	on Form 9	90, Part IV, line	e 10.			
		(a) Current year	(b) Prior yea	ar (c) Two year	rs back	(d) Three years back	(e) Four ye	ars back
1a	Beginning of year balance	65,587,890	64,375	5,841 77,9	42,460	61,526,120	62	,960,155
b	Contributions	38,389	5	1,669	6,934	284,321		14,100
С	Net investment earnings, gains, and							
	losses	5,805,037	5.01!	5,952 -10,0	69,873	19,536,257	1	,812,784
d	Grants or scholarships	3,287,727			75,628	2,936,666		,835,684
e	Other expenditures for facilities and		5/5	3707.	7.07020	2//00/000	_	1000100.
_	programs	182,882	10/	1,653 1	69,822	162,901		158,297
f	Administrative expenses	271,065			258,230	304,671		266,938
	End of year balance	67,689,642		•			41	
g 2	Provide the estimated percentage of the		65,587		375,841	77,942,460	01	,526,120
	Board designated or quasi-endowmen			ie rg, coluinii (a	ijj Heid a	13.		
a	-		0					
b	Permanent endowment 100	70						
С	Term endowment0 %		2007					
0-	The percentages on lines 2a, 2b, and 2			414 11-1		!!		
за	Are there endowment funds not in the	possession of th	e organizatio	on that are held	and adi	ministered for the		
	organization by:							es No
	17						3a(i)	
	,						3a(ii)	/
b	If "Yes" on line 3a(ii), are the related or	ganizations listed	as required	on Schedule R?			3b •	/
4	Describe in Part XIII the intended uses	of the organization	n's endowm	ent funds.				
Part	VI Land, Buildings, and Equip	ment						
	Complete if the organization	answered "Yes'	on Form 9	90, Part IV, line	e 11a. S	See Form 990, F	Part X, lin	e 10.
	Description of property	(a) Cost or ot	ner basis (b)	Cost or other basis		Accumulated	(d) Book v	alue
		(investme	ent)	(other)	de	preciation		
1a	Land		0	0				0
b	Buildings		0	0		0		0
С	Leasehold improvements		0	0		0		0

1,253,921

3,267,581

0

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))

d Equipment

e Other .

297,241

1,733,707

2,030,948

956,680

1,533,874

Part VII	Investments – Other Securities		
	Complete if the organization answered "Yes" on Form 990, Part I	IV, line 11b. See F	orm 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 h	eld equity interests		
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)	man (h) must asual Farm 000 Part V line 12 and (D))		
	mn (b) must equal Form 990, Part X, line 12, col. (B)) Investments—Program Related		
Part VIII	Complete if the organization answered "Yes" on Form 990, Part	V line 11e See E	orm 000 Part V line 12
	(a) Description of investment		
	(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)	mn (b) must equal Form 990, Part X, line 13, col. (B))		
Part IX	Other Assets		
raitix	Complete if the organization answered "Yes" on Form 990, Part I	IV line 11d See F	orm 990 Part X line 15
	(a) Description	17, 1110 114. 0001	(b) Book value
(1)	N. And B. C.		(1)
(2)			
(3)	10		
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
	mn (b) must equal Form 990, Part X, line 15, col. (B))		
Part X	Other Liabilities Complete if the organization answered "Yes" on Form 990, Part I	N/ line 11e er 11f	Soo Form 000 Dort V
	line 25.	iv, iiile i le Oi i i i.	See Form 990, Fart A,
1.	(a) Description of liability		(b) Book value
(1) Federal in			(b) Book value
	THE CITY OF BOSTON FOR FINES COLLECTED		5,149
	THE CITY OF BOSTON FOR FINES COLLECTED THE CITY OF BOSTON FOR SALARY & BENEFITS REIMBURSEMENTS		560,568
(3) DUE TO (4)	THE CITT OF BOSTONT ON SALART & BENEFITS REINBORSEMENTS		300,300
(5)			
(6)			
(7)			
(8)			
(9)			
	mn (b) must equal Form 990, Part X, line 25, col. (B))		. 565,717
	uncertain tax positions. In Part XIII, provide the text of the footnote to the organ		
	s liability for uncertain tax positions under FASB ASC 740. Check here if the text		

Schedule D (Form 990) 2023 Page 4 Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Part XI Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total revenue, gains, and other support per audited financial statements . . . 21,112,700 2 Amounts included on line 1 but not on Form 990. Part VIII. line 12: 2,645,273 Donated services and use of facilities h 296,265 0 377,777 Add lines **2a** through **2d** 2e 3,319,315 3 3 Subtract line **2e** from line **1** 17,793,385 Amounts included on Form 990. Part VIII. line 12, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b **4**a Add lines **4a** and **4b** . . . 4c 0 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) 5 17,793,385 Reconciliation of Expenses per Audited Financial Statements With Expenses per Return Part XII Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements . . . 1 16.554.178 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: 296,265 Prior year adjustments 2b b 0 2c 0 C Other (Describe in Part XIII.) 0 Add lines 2a through 2d 2е 296,265 3 3 Subtract line **2e** from line **1** 16,257,913 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b 4a 0 Other (Describe in Part XIII.) 4h 0 Add lines **4a** and **4b** 4c 0 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) 5 16,257,913 **Supplemental Information** Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information. Schedule D, Part III, Line 1 - EXPLANATION: TERMS FOR NOT REPORTING ASSETS PER SFAS 116 -THE LIBRARY MAINTAINS COLLECTIONS INCLUDING ARTWORK, RARE BOOKS COLLECTIONS AND HISTORICAL TREASURES THAT HAVE BEEN PURCHASED OR DONATED. THESE ITEMS ARE PRESERVED AND CARED FOR AND MANY ARE DISPLAYED IN PUBLIC EXHIBITIONS. THE LIBRARY DOES NOT HAVE A FORMAL POLICY THAT REQUIRES PROCEEDS FROM THE SALE OF THESE ITEMS TO BE USED TO EXPAND THE COLLECTIONS THROUGH ADDITIONAL ACQUISITIONS. HOWEVER, HISTORICALLY, THE LIBRARY HAS NOT SOLD WORKS OF ARTS AND HISTORICAL TREASURES. AS OF JUNE 30, 2024, THE LIBRARY HAD NO INTENTION TO SELL COLLECTIONS OR USE PROCEEDS TO RESTORE CURRENT HOLDINGS OR EXPAND THE COLLECTION THROUGH ADDITIONAL ACQUISITIONS----IN ADDITION-FORM 990 SCHEDULE D, PART XIII-EXPLANATION: PART XIII SUPPLEMENTAL FINANCIAL INFORMATION THE LIBRARY IS A PUBLIC ENTITY AND THEREFORE DOES NOT FOLLOW FASB PRONOUNCEMENTS **ISSUED AFTER NOVEMBER 30, 1989.** Schedule D, Part III, Line 4 - DESCRIPTION OF COLLECTIONS AND HOW THEY FURTHER EXEMPT STATUS---LIBRARY BOASTS OVER ONE MILLION RARE BOOKS AND MANUSCRIPTS, A WEALTH OF MUSICAL SCORES AND PRINTS. AMONG ITS LARGE COLLECTIONS, THE LIBRARY HOLDS SEVERAL FIRST EDITION FOLIOS BY WILLIAM SHAKESPEARE, ORIGINAL MUSIC FROM MOZART TO PROKOFIEV'S "PETER AND THE WOLF", AND IN ITS RARE BOOK COLLECTIONS, THE PERSONAL LIBRARY OF JOHN ADAMS. DUE TO THE EXTENT OF THE COLLECTIONS, MANY ITEMS ARE DISPLAYED ON A ROTATING BASIS. THESE UNIQUE

SPECIAL EXHIBITS ARE SHOWN IN THE RESEARCH LIBRARY AND OFFER THE PUBLIC AN OPPORTUNITY TO VIEW BOOKS AND SPECIAL DOCUMENTS WHICH ARE USUALLY ONLY ACCESSIBLE TO REGISTERED READERS IN THE RARE BOOKS READING

Schedule D, Part V, Line 1b - ENDOWMENT FUNDS-ITEM '1B' LABELED CONTRIBUTIONS ARE AMOUNTS ADDED TO THE ENDOWMENT FUNDS FOR CURRENT AND ALL PRIOR YEARS LISTED HERE.

Schedule D, Part V, Line 1c - ENDOWMENT FUNDS-ITEM '1C' LABELED NET INVESTMENTS EARNINGS, GAINS, AND LOSSES SHOWS ACTUAL INCREASE OR DECREASE IN INVESTMENTS FOR CURRENT AND ALL PRIOR YEARS LISTED HERE

Part XIII - Supplemental Information (Continued)

Schedule D, Part V, Line 1d - ENDOWMENT FUNDS-ITEM '1D' LABELED GRANTS OR SCHOLARSHIPS SHOWS 5% DISTRIBUTION
WITHDRAWN FROM THE ENDOWMENT FUNDS FOR CURRENT AND ALL PRIOR YEARS LISTED HERE.
Schedule D, Part V, Line 1e - ENDOWMENT FUNDS-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 - ENDOWMENT FUNDS-ITEM '1F' LABELED ADMINISTRATIVE EXPENSES SHOWS ACTUAL INVESTMENT
MANAGEMENT AND ADMINISTRATIVE EXPENSES FOR CURRENT AND ALL PRIOR YEARS LISTED HERE.
MANAGEMENT AND ADMINISTRATIVE EXPENSES FOR CORRENT AND ALL PRIOR TEARS LISTED HERE.
Schedule D, Part V, Line 4 - INTENDED USES FOR ENDOWMENT FUNDS- THEY 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 (\$296,265) 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 TO THE NORMAN B. LEVENTHAL MAP & EDUCATION CENTER INC. (\$163,630). ALL
OPERATING WITHIN THE COPLEY LOCATION. IT ALSO INCLUDES BOSTON RED SOX TICKETS DONATED TO THE LIBRARY WITH
AN ESTIMATED VALUE OF (\$73,450).
CALADA D. DANIEL DE LE CONTROL DE LE DELL'ANTIC DE LA CONTROL DE LA CONT
Schedule D, Part XI, Line 2d - OTHER REVENUE INCLUDES \$371,520 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. IT ALSO INCLUDES \$6,257 IN LEASE INTEREST.

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990.

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

Open to Public

Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

	TEES OF THE PUBLIC LIBRARY OF THE CITY OF BOSTON 04-61517	31		
Part	Questions Regarding Compensation			ı
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	☐ First-class or charter travel ☐ Housing allowance or residence for personal use			
	☐ Travel for companions ☐ Payments for business use of personal residence			
	☐ Tax indemnification and gross-up payments ☐ Health or social club dues or initiation fees			
	☐ Discretionary spending account ☐ Personal services (such as maid, chauffeur, chef)			
h	If any of the haves an line to are checked, did the argenization follows written notice regarding normant			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to			
	explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all			
	directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line			
	1a?	2		
3	Indicate which, if any, of the following the organization used to establish the compensation of the			
	organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a			
	related organization to establish compensation of the CEO/Executive Director, but explain in Part III.			
	☐ Compensation committee ☐ Written employment contract			
	☐ Independent compensation consultant ☐ Compensation survey or study			
	☐ Form 990 of other organizations ☐ Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
-	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		~
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		~
C	Participate in or receive payment from an equity-based compensation arrangement?	4c		~
C	If "Yes" to any of lines 4a–c, list the persons and provide the applicable amounts for each item in Part III.	70		
	The second and on lines 4a-c, list the persons and provide the applicable amounts for each item in Fart III.			
	Only costion 501/c)/2) 501/c)/4) and 501/c)/20) organizations must complete lines 5.0			
_	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5–9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
5	compensation contingent on the revenues of:			
		_		
a	The organization?	5a		<i>'</i>
b	Any related organization?	5b		~
	If "Yes" on line 5a or 5b, describe in Part III.			
_	For page 18 14 1 Form 2000 Port VIII O. 11 A. II. 4 II. 11 II. 11			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the net earnings of:			
а	The organization?	6a		~
b	Any related organization?	6b		~
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed			
	payments not described on lines 5 and 6? If "Yes," describe in Part III	7		~
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject			
	to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe			
	in Part III	8		~
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			

Regulations section 53.4958-6(c)?

9

Schedule J (Form 990) 2023

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 (D) and (E) amounts for that individual.

A) Name and Title Base Compensation Compens	THE SUIT OF COLUMN S (B)(I) (III) FOR		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
1					reportable	other deferred			in column (B) reported as deferred on prior
MICHAEL R COLFORD, Director 0	DAVID J LEONARD, President		0	0	0	0	0	0	0
2 Of Library Services (ii) 158,984 0 257 14,332 11,887 185,660 0 0 19,102 0 3 18,748 0 354 0 0 0 19,102 0 3 19,702 0 3 18,748 0 354 0 0 0 19,102 0 3 19,702 0 3 19,702 0 3 19,702 0 3 19,702 0 3 19,702 0 3 19,702 0 3 19,702 0 3 19,702 0 3 19,702 0 3 19,702 1 3 19,702 0 3 19,702 1 3 19,70		(ii)	195,000	27,438	3,750	20,357	10,546	257,091	0
ELIZABETH PRINDLE, 0	MICHAEL R COLFORD, Director	(i)	0	0	0	0	0	0	0
DIRECTOR OF RESEARCH & (i) 125,472		(ii)	158,984	0	257	14,332	11,887	185,460	0
125,472 0 2,368 15,225 1,947 143,012 0 0 0 0 0 0 0 0 0			18,748	0	354	0	0	19,102	0
### STAFF & ST	3 SPECIAL COLLECTIONS	(ii)	125,472	0	2,368	13,225	1,947	143,012	0
TECHNOLOGY OFFICER (ii)	SARAH ZAPHIRIS, CHIEF OF	(i)	0	0	0	0	0	0	0
TECHNOLOGY OFFICER (ii)	4 FEEECTIVE NOVEMBED 2021	(ii)	144,220	0	2,722	13,225	3,603	163,770	0
10 10 10 10 10 10 10 10	KEITH ALLEN GILLETTE, CHIEF	(i)	0	0	0	0	0	0	0
OF CIRCULATION AND OF CHECKULATION AND		(ii)	144,220	0	2,450	13,200	27,591	187,461	
Company Comp		(i)	2,867	20	43	0	0	2,930	0
EMILY 10 RACZYK, CHIEF (1) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	6 CHELVING	(ii)	140,507	980	2,100	13,187	11,755	168,529	0
Total Control Lists 2022)	EMILY TOKARCZYK, Chief	(i)	0	0		0	0	0	0
8 (i) (ii) 9 (ii) 9 (ii) 10 (ii) 11 (ii) 11 (ii) 12 (ii) 12 (ii) 13 (ii) 14 (ii) 14 (ii) 15 (ii) 15 (ii) 17 (ii) 18 (iii) 19 (iii) 19 (iii) 19 (iii) 19 (iii) 19 (iii) 19 (iiii) 19 (iiiiii) 19 (iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii	7 (official Officer (CFO)	(ii)	124,731	0	2,241	11,427	27,285	165,684	0
9 (i) (i) (ii) (ii) (iii) (iiii) (iiii) (iiii) (iiii) (iiii) (iiii) (iiii) (iiii) (iiii) (iiiii) (iiiii) (iiiii) (iiiii) (iiiiii) (iiiiii) (iiiiii) (iiiiiii) (iiiiiii) (iiiiiiii		(i)							
9 (i) (i) (ii) (ii) (iii) (iiii) (iiii) (iiii) (iiii) (iiii) (iiii) (iiii) (iiii) (iiii) (iiiii) (iiii) (iiiii) (iiiii) (iiiiii) (iiiiii) (iiiiiii) (iiiiiiii	8	(ii)							
10 (i) (ii) (ii) (iii) (iiii) (iiii) (iiii) (iiii) (iiii) (iiiii) (iiiii) (iiiiii) (iiiiiii) (iiiiiiii		(i)							
10 (ii) (ii) (iii) (iiii) (iiii) (iiii) (iiiii) (iiiiii) (iiiiiiii	9	(ii)							
(i) (ii) (ii) (iii) (iiii) (iii) (ii		(i)							
11 (ii) (ii) (iii) (iiii) (iiii) (iiii) (iiiii) (iiiiii) (iiiiiiii	10	(ii)							
12 (i) (ii) (ii) (iii) (iiii) (iiii) (iiii) (iiiii) (iiiiiii) (iiiiiiii		(i)							
12 (ii) (ii) (iii) (iiii) (iiii) (iiii) (iiiii) (iiiii) (iiiiii) (iiiiiiii	11	(ii)							
13 (i) (ii) 14 (ii) 15 (ii) 15 (ii) 17 (iii) 18 (iii) 19 (iii) 19 (iii) 19 (iii) 19 (iii) 19 (iiii) 19 (iiiiii) 19 (iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii		(i)							
13 (ii) (i) (ii) (ii) (iii) (iiii) (iiii) (iiii) (iiiii) (iiiiii) (iiiiiiii	12	(ii)	(2.1						
14 (ii) (i) (i) (ii) (ii) (ii) (ii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iiii) (iiii) (iiiii) (iiiiii) (iiiiiiii		(i)							
14 (ii) (ii) (iii) (iiii) (iiii) (iiii) (iiiii) (iiiiii) (iiiiiiii	13	(ii)	•						
(i) (ii) (ii)		(i)							
(i) (ii) (ii)	14	(ii)							
		(i)							
0	15	(ii)							
16 (ii)	-	(i)							
	16	(ii)							

Schedule J (Form 990) 2023

Page 3

Page 3

Part III Supplemental information
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part
or any additional information.
Schedule J, Part I, Line 3 - THE COMPENSATION FOR CEO/EXECUTIVE DIRECTORS IS SET BY THE CITY OF BOSTON'S HUMAN RESOURCES DEPARTMENT.
7 V
(2 V
<u> </u>

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

TRUSTEES OF THE PUBLIC LIBRARY OF THE CITY OF BOSTON 04-6151731 **Types of Property** (c) (a) (b) (d) Noncash contribution Check if Number of contributions or Method of determining amounts reported on noncash contribution amounts applicable items contributed Form 990, Part VIII, line 1g 1 Art-Works of art 2 Art-Historical treasures . . . 3 Art—Fractional interests . . 4 Books and publications . . 5 Clothing and household goods 6 Cars and other vehicles . . . 7 Boats and planes 8 Intellectual property 9 Securities-Publicly traded . . Securities-Closely held stock . 10 Securities—Partnership, LLC, 11 or trust interests 12 Securities-Miscellaneous . . 13 Qualified conservation contribution—Historic structures 14 Qualified conservation contribution—Other 15 Real estate - Residential . 16 Real estate—Commercial . Real estate-Other 17 18 Collectibles 19 Food inventory 20 Drugs and medical supplies . 21 Taxidermy 22 Historical artifacts . . 23 Scientific specimens . . 24 Archeological artifacts . 25 Other (Boston Red Sox Tickets 1600 73,450 Fair Market Value (See note) 26 Other (_____ 27 28 Other (Number of Forms 8283 received by the organization during the tax year for contributions for 29 which the organization completed Form 8283, Part V, Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be 30a **b** If "Yes," describe the arrangement in Part II. Does the organization have a gift acceptance policy that requires the review of any nonstandard 31

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash

If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked,

If "Yes," describe in Part II.

describe in Part II.

33

31

32a

/

Schedule M (Form 990) 2023 Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information. Schedule M, Part I, Line 32b - The Library receives during the year donations of used books which are sent to a third party that sells them and sends the proceeds to the Library. The revenue received for these are very small.

SCHEDULE O (Form 990)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization **Employer identification number** TRUSTEES OF THE PUBLIC LIBRARY OF THE CITY OF BOSTON 04-6151731 Form 990, Part IV, Line 29 - RECEIVED MORE THAN \$25,000 IN NON-CASH CONTRIBUTION-THE BOSTON RED SOX ORGANIZATION DONATED GAME TICKETS WITH AN ESTIMATED FAIR MARKET VALUE OF \$73,450 TO THE BOSTON PUBLIC LIBRARY. THE LIBRARY ALSO RECEIVED USED BOOK DONATIONS DURING THE YEAR WHICH ARE SENT TO A THIRD-PARTY VENDOR TO SELL AND SEND THE PROCEEDS TO THE LIBRARY FOR WHICH \$129.57 WAS RECEIVED AND POSTED AS REVENUE. PLEASE NOTE ALSO THAT THE FEDERAL COMMUNICATIONS COMMISSION (FCC) "ERATE" PROGRAM HAS BEEN SUPPORTING THE OPERATING COSTS RELATED TO THE BOSTON PUBLIC LIBRARY'S INFORMATION TECHNOLOGY INFRASTRUCTURE. THIS MONEY IS PAID BY THE FCC DIRECTLY TO BPL VENDORS AND IS INCLUDED IN THE BPL'S AUDITED FINANCIAL STATEMENTS. FOR BPL'S FISCAL YEAR 2024 \$371,520 HAS BEEN PAID OUT TO BPL VENDORS. Form 990, Part V, Line 2a - # OF EMPLOYEES REPORTED ON FORM W-3-THE 568 LISTED HERE IS THE TOTAL # OF EMPLOYEES PAID UNDER THE LIBRARY DEPARTMENT FOR CALENDAR YEAR 2023. THE CITY OF BOSTON PROCESSES THE ENTIRE PAYROLL FOR THE LIBRARY AND FILES THE W-3 TRANSMITTAL OF WAGE AND TAX STATEMENTS. Form 990, Part V, Line 2b - FILINGS OF ALL REQUIRED FEDERAL EMPLOYMENT TAX RETURNS-THE CITY OF BOSTON PROCESSES THE LIBRARY'S ENTIRE PAYROLL. THEY ALSO FILE ALL THE REQUIRED UNEMPLOYMENT TAX RETURNS FOR THE LIBRARY UNDER THE CITY OF BOSTON FEDERAL ID. Form 990, Part VI, Section A, Line 8a - CONTEMPORANEOUSLY DOCUMENT THE MEETINGS HELD OR WRITTEN ACTIONS UNDERTAKEN DURING THE YEAR BY THE GOVERNING BODY-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 - CONTEMPORANEOUSLY DOCUMENT THE MEETINGS HELD OR WRITTEN ACTIONS UNDERTAKEN DURING THE YEAR BY EACH COMMITTEE WITH AUTHORITY TO ACT ON BEHALF OF THE LIBRARY -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 - PROCESS TO REVIEW FORM 990-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 - REGULARLY AND CONSISTENTLY MONITOR AND ENFORCE COMPLIANCE WITH CONFLICT OF INTEREST POLICY- 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/ Form 990, Part VI, Section B, Line 13 - WRITTEN WHISTLEBLOWER POLICY-ALL PUBLIC ENTITIES ARE COVERED BY STATE LAW. Form 990, Part VI, Section B, Line 14 - WRITTEN DOCUMENT RETENTION AND DESTRUCTION POLICY-ALL PUBLIC ENTITIES ARE **COVERED BY STATE LAW.** Form 990, Part VI, Section B, Line 15 - PROCESS FOR DETERMINING COMPENSATION FOR CEO, EXECUTIVE DIRECTOR OR TOP MANAGEMENT-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 - WAYS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS WERE MADE AVAILABLE-ALL GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS ARE AVAILABLE ON THE LIBRARY'S WEBSITE: BPL.ORG. ALL POLICIES INCLUDING 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.

Supplemental Information (Continued)

Form 990, Part VII, Section B, Line 1(C) - INDEPENDENT CONTRACTORS-\$ AMOUNTS LISTED FOR INDEPENDENT CONTRACTORS Form 990, Part VIII, Line 1d - RELATED ORGANIZATIONS-LISTED HERE AMOUNTS RECEIVED DIRECTLY FROM THE BOSTON PUBLIC LIBRARY FUND INC. \$3,223,126 of WHICH \$501,713 THE LIBRARY PAID OUT TO THE NORMAN B. LEVENTHAL MAP & EDUCATION CENTER INC. AND FROM THE ASSOCIATES OF THE BOSTON PUBLIC LIBRARY INC. \$1,115,223 GRAND TOTAL \$4,338,349. Form 990, Part VIII, Line 2a - 2e - PROGRAM SERVICE REVENUE-AMOUNT LISTED HERE \$129,365 NEXT TO THE HEADING 'NETWORK MEMBERSHIP DUES' IS MEMBERSHIP DUES PAID BY OTHER ORGANIZATIONS WHOSE MEMBERS/PATRONS USE THE METRO BOSTON LIBRARY NETWORK SYSTEM (MBLN). Form 990, Part IX, Line 5 - COMPENSATION OF CURRENT OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES- LISTED HERE \$0 BECAUSE THE CITY OF BOSTON PROCESSES AND PAYS FOR ALL OF THE LIBRARY'S PAYROLL EXPENDITURES TO ITS EMPLOYEES. THE LIBRARY THEN REIMBURSES THE CITY OF BOSTON A PORTION OF THE TOTAL PAYROLL EXPENDITURES PAID BY GIFTS & GRANTS WHICH IS LISTED ON FORM 990 PART IX LINE 7. THE LIBRARY DOES NOT COMPENSATE ANY OF ITS TRUSTEES. Form 990, Part IX, Line 7 - OTHER SALARIES AND WAGES-THE \$ AMOUNT LISTED HERE IS THE PORTION OF THE TOTAL PAYROLL SALARY EXPENDITURES THE LIBRARY REIMBURSED THE CITY OF BOSTON. Form 990, Part IX, Line 8 - PENSION PLAN ACCRUALS AND CONTRIBUTIONS-THE \$ AMOUNT LISTED HERE IS THE PORTION OF Form 990, Part IX, Line 9 - OTHER EMPLOYEE BENEFITS-THE \$ AMOUNT LISTED HERE IS THE PORTION OF OTHER EMPLOYEE BENEFITS THE LIBRARY REIMBURSED THE CITY OF BOSTON. Form 990, Part IX, Line 10 - PAYROLL TAXES-LISTED HERE \$0 FOR PAYROLL TAXES BECAUSE THE CITY OF BOSTON PROCESSES AND PAYS THIS EXPENSE FOR ALL LIBRARY EMPLOYEES. Form 990, Part IX, Line 12 - Advertising & Promotions-Not included on the total \$8,407 is \$14,127 in adverting costs included on Form 990, Form 990, Part IX, Line 17 - Travel-Not included on the \$103,832 is \$144,555 for vehicle lease rentals, maintenance and parking for the shipping department which are included on Form 990, Part IX, Line 24b Equipment rental/Maintenance/Facilities. Form 990, Part IX, Line 21 - PAYMENTS TO AFFILIATES-\$846,522.60 WAS PAID TO THE NORMAN B. LEVENTHAL MAP & EDUCATION CENTER INC. OF WHICH \$661,212.70 CAME FROM THE BOSTON PUBLIC LIBRARY FUND INC. AND \$185,309.90 FROM THE LIBRARY. Form 990, Part IX, Line 23 - INSURANCE-\$18,916.75 TOTAL EXPENDED IN INSURANCE COSTS CONSISTS OF CAR INSURANCE Form 990, Part IX, Line 24a - 24d - Other expenses-Line 24a-Books and related materials-included on the total \$2,751,701 is \$14,127 for advertising and on Line 24b-Equipment rental/maintenance/facilities is \$144,555 for vehicle lease rentals, maintenance and parking for the shipping department. Form 990, Part XI, Line 9 - OTHER CHANGES IN NET ASSETS OR FUND BALANCES--THE FEDERAL COMMUNICATIONS COMMISSION (FCC) "ERATE" PROGRAM HAS FOR YEARS BEEN SUPPORTING THE OPERATING COSTS RELATED TO THE BOSTON PUBLIC LIBRARY'S INFORMATION TECHNOLOGY INFRASTRUCTURE. THE "ERATE" PROGRAM IS ADMINISTERED BY THE UNIVERSAL SERVICE ADMINISTRATION COMPANY. THIS MONEY IS PAID DIRECTLY TO BPL VENDORS AND SINCE 2021 HAS BEEN INCLUDED IN THE BPL AUDITED FINANCIAL STATEMENTS. IN FISCAL YEAR 2024 \$371,520 WAS PAID OUT TO BPL VENDORS. ALSO INCLUDED HERE IS \$6,257 FOR NONPROFITS ACCOUNTING FOR LEASES.

Form: Form 990 (2023) EIN: 04-6151731

Page: 1 Part I, Line 1

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 O, Statement 2

TRUSTEES OF THE PUBLIC LIBRARY OF THE CITY OF BOSTON

Form: Form 990 (2023) EIN: 04-6151731
Page: 2 Part III, Line 4a

First Program Service Accomplishments Description

Description

the Boston Public Library helped 147,444 Massachusetts residents - adults, children, and teens - sign up for new library cards, hosted 241,281 free computer sessions and enabled 659,623 free wireless internet sessions. Engaging the Public Through Programming + Active Spaces: The Library offers a variety of programs for all Children, teens and adults including: Future Readers Club, Homework Assistance, Local & Family History, Writing programs, Theatre Productions, The Lowell Lecture Series, Copley Concerts, Never Too Late Programs, Children's Music and Storytelling. Serving the Public with Improving technology: BPL is a national leader in library service technology. The Library has been improving the Library's IT and business systems, increasing access to knowledge through the provision and creation of digital content, and closing the digital divide by providing the public improved access to the kinds of cutting edge technology that ensure equity. Restoring and Preserving our History: At an estimated one million manuscripts, holdings are particularly strong in medieval and early Renaissance manuscripts, colonial Boston and New England, and the American anti-slavery movement. The library is also home to hundreds of archival collections with strengths in local business, political, cultural, and social history. Caring for the Public's Special Collections The Library maintains and cares for of one the world's most important public collections of art, rare books, maps and other special objects and make these precious objects, owned by the public, accessible to patrons today and far into future generations. Statewide Collection Development & Access: This program provides residents of the Commonwealth access to print, electronic, and downloadable collections not available in their individual libraries. Anyone who lives, works, goes to school, or owns property in Massachusetts can have a Boston Public Library card.

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

OMB No. 1545-0047 2023

Department of the Treasury Internal Revenue Service

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.

(b)

Primary activity

Open to Public Inspection

(f)

Direct controlling

entity

(d)

Total income

Legal domicile (state

or foreign country)

(e)

End-of-year assets

Name of the organization **Employer identification number** TRUSTEES OF THE PUBLIC LIBRARY OF THE CITY OF BOSTON 04-6151731 Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33. Part I

(3)							
(4)		40					
(5)		8.					
(6)							
Part II Identification of Related Tax-Exempt Organizations du one or more related tax-exempt organizations du	ations. Complete if uring the tax year.	the organization a	nswered "Yes" or	n Form 990, Part I	V, line 34, beca	use it h	ad
(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	Section cont	g) 512(b)(13) rolled tity?
						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)							

Name, address, and EIN (if applicable) of disregarded entity

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

Deddage it ridd o'r	c of more related orga	IIZations	ircutcu as a pa	tricisinp during	tilo tax your.							
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under	(f) Share of total income	(g) Share of end-of- year assets	Dispropo alloca	ortionate	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene	i) eral or aging ner?	(k) Percentage ownership
		country)		sections 512-514)			Yes	No		Yes	No	
(1)							4	D)				
(2)												
(3)						70.						
(4)					9	9						
(5)												
(6)				٤O								
(7)				6.								

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

(a) Name, address, and EIN of related organization	(b)	(c) Legal domicile (state or foreign country)	(d)	(e) Type of entity (C corp, S corp, or trust)	(f)	(g) Share of end-of-year assets	(h) Percentage ownership	Section 5 contr ent	i) 512(b)(13) rolled ity?
		,						Yes	No
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

Yes No

1a

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

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

b	Gift, grant, or capital contribution to related organization(s)				1b	
С	Gift, grant, or capital contribution from related organization(s)				1c •	/
d	Loans or loan guarantees to or for related organization(s)				1d	~
е	Loans or loan guarantees by related organization(s)		4.	[1e	~
				Ī		
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	~
				Ī	-	
k	Lease of facilities, equipment, or other assets from related organization(s)			[1k	~
I	Performance of services or membership or fundraising solicitations for related organization(s				11	~
m		•			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)				10	V
	3 1 1 3			Ī		
р	Reimbursement paid to related organization(s) for expenses			[1p	~
q				⊢		_
•	January Carlot Garage (c) and (c)			Ì	•	
r	Other transfer of cash or property to related organization(s)				1r •	/
s	Other transfer of cash or property from related organization(s)				1s	- V
2	If the answer to any of the above is "Yes," see the instructions for information on who must of					nolds.
	(a)	(b)	(c)	(d)		
	Name of related organization	Transaction	Amount involved	Method of determining	amount i	nvolved
		type (a-s)				
В	SOSTON PUBLIC LIBRARY FUND INC	С	3,223,126	ACTUAL \$		
(1)						
B	SOSTON PUBLIC LIBRARY FUND INC	n	48,046	FAIR MARKET VALU	E	
(2)						
	ACCOUNTED OF THE POOTON BURLIO LIBRARY INC.	_	1 115 222	ACTUALS \$		
Α	SSOCIATES OF THE BOSTON PUBLIC LIBRARY INC	С	1,115,223			
(3)		С				
(3)	SSOCIATES OF THE BOSTON PUBLIC LIBRARY INC	n		FAIR MARKET VALUE	E	
(3)					E	
(3) A					E	
(3) A					E	
(3) A (4)					E	
(3) A (4)					E	

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

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

	(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under	Are all p sec 501(tion (c)(3)	(f) Share of total income	(g) Share of end-of-year assets	Dispropo alloca	ortionate	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene mana parti	ral or aging	(k) Percentage ownership
				sections 512—514)	Yes	No			Yes	No		Yes	No	
(1)														
(2)								00.						
(3)							Q							
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(10)														
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(13)														
(14)														
(15)														
(16)														

Page 5 Schedule R (Form 990) 2023 **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 from related organization(s)-The Boston Public Library received \$3,223,126 from The Boston Public Library Fund Inc. of which \$ 501,713 the Library paid out to the Norman B. Leventhal Map & Education Center Inc. and \$ 1,115,223 from The Associates Of The Boston Public Library Inc. to support library operations. In fiscal year 2024 operating under the Library's fed Id # 04-6151731 expenses totaled about \$16.5 million (see schedule D Part XII Line 1). The Library also operates as a separate department within the City Of Boston operations, with fiscal year 2024 expenses totaling about \$47 million (see City Of Boston's fy24 comprehensive financial statements on their website). Schedule R, Part V, Line 1n - Sharing of facilities, equipment, mailing lists, or other assets 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 \$48,046.75 and to the Associates Of The Boston Public Library Inc. free rent space with an estimated fair market value of \$11,139.00. The Norman B. Leventhal Map & Education Center Inc., an affiliate of the BPL was also provided free rent space at the Copley location with an estimated fair market value of \$163,630.50.