Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047 2020

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

Department of the Treasury

Internal Revenue Service ► Go to www.irs.gov/Form990 for instructions and the latest information. Inspection For the 2020 calendar year, or tax year beginning 07/01/2020 and ending 06/30/2021 Check if applicable: C Name of organization TRUSTEES OF THE PUBLIC LIBRARY OF THE CITY OF BOSTON D Employer identification number Address change Doing business as 04-6151731 Name change Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Initial return 700 BOYLSTON STREET 617-536-5400 Final return/terminated City or town, state or province, country, and ZIP or foreign postal code Amended return BOSTON, MA 02116 G Gross receipts \$ 47,840,484 Application pending F Name and address of principal officer: ELLEN DONAGHEY H(a) Is this a group return for subordinates? Yes Vo 700 BOYLSTON STREET, BOSTON, MA 02116 H(b) Are all subordinates included? Tyes No. Tax-exempt status: √ 501(c)(3) 501(c) () < (insert no.) 4947(a)(1) or 527 If "No," attach a list. See instructions Website: ► WWW.BPL.ORG H(c) Group exemption number ▶ Form of organization:

Corporation □ Trust □ Association □ Other ▶ L Year of formation: M State of legal domicile: MA Part I Briefly describe the organization's mission or most significant activities: The Boston Public Library provides educational and cultural enrichment free to all by engaging the public through programming and active spaces, restoring and preserving our Activities & Governance (Continued on Schedule O, Statement 1) 2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) 16 Number of independent voting members of the governing body (Part VI, line 1b) 4 16 Total number of individuals employed in calendar year 2020 (Part V, line 2a) 5 498 6 173 Total unrelated business revenue from Part VIII, column (C), line 12 7a 0 Net unrelated business taxable income from Form 990-T, Part I, line 11 7**b** 0 **Current Year** 8 Contributions and grants (Part VIII, line 1h) 6,181,640 8,614,888 Revenue 9 Program service revenue (Part VIII, line 2g) 121,151 122,454 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . . . 2,757,848 7,254,368 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . . . 1,892,775 258,149 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 10.953.414 16,249,859 Grants and similar amounts paid (Part IX, column (A), lines 1–3) 13 0 0 Benefits paid to or for members (Part IX, column (A), line 4) 14 0 0 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 3.296.966 3,375,807 16a Professional fundraising fees (Part IX, column (A), line 11e) . . . 0 Total fundraising expenses (Part IX, column (D), line 25) ▶ 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 7,044,987 6,441,673 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 10,341,953 9,817,480 19 Revenue less expenses. Subtract line 18 from line 12 611.461 6,432,379 5 Beginning of Current Year **End of Year** Total assets (Part X, line 16) 20 79.863,386 99.754.907 21 Total liabilities (Part X, line 26) 1,257,198 1,350,473 22 Net assets or fund balances. Subtract line 21 from line 20 78,606,188 98,404,434 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Sign Signature of officer Here Ellen Donaghey, Chief Financial Officer Type or print name and title Print/Type preparer's name Date Preparer's signature Check | if **Paid** self-employed Preparer Firm's name Firm's EIN ▶ Use Only Firm's address ▶ Phone no.

May the IRS discuss this return with the preparer shown above? See instructions

Part	Ш	Statement of Program Service Accomplishments
		Check if Schedule O contains a response or note to any line in this Part III
1		fly describe the organization's mission:
		Boston Public Library provides educational and cultural enrichment free to all by engaging the public through programming
		active spaces, restoring and preserving our history, providing access to borrow from our vast collection of books and
	elec	tronic databases and other materials and caring for the Public's Special Collections.
	Did	
2		the organization undertake any significant program services during the year which were not listed on the
_		'es," describe these new services on Schedule O.
3		the organization cease conducting, or make significant changes in how it conducts, any program
		'es," describe these changes on Schedule O.
4	Des	cribe the organization's program service accomplishments for each of its three largest program services, as measured by
		enses. 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.
4.0	10	de:) (Expenses \$ 8.351,264 including grants of \$ 0) (Revenue \$ 122,454)
4a	(Cod	
		Boston Public Library (BPL) is an extraordinary institution that has served the citizens of Boston since 1848. Founded as the
		t municipal library and the first public library to lend books, the Boston Public Library is dedicated to the advancement of
		rning and is "Free to All," as is carved in the facade of the historic McKim building in Copley Square. The BPL encompasses a trai Library, twenty-five vibrant neighborhood libraries, a robust website, and classes and programs for all ages. The Library's
		lection of more than 23 million items includes circulating books, eBooks, DVDs, and music, as well as research and special
		lections that encompass rare manuscripts, prints, photographs, drawings, maps, posters, and more. The Boston Public Library's
		stein Business Library and Innovation Center, Norman B. Leventhal Map Center, and Collections of Distinction such as the sonal library of John Adams, the Anti-Slavery collection, the Thomas Pennant Barton Collection of Shakespeare, and the
		sonal library of John Adams, the Anti-Slavery collection, the Thomas Permant Barton Collection of Shakespeare, and the
		olic Library hosted 4,299 public programs reaching 336,971 people, received 6.7 million visits to its website, and loaned 5.2
		tion items. Of those 5.2 million lends, more than 3.9 million were digital downloads of e-books and audiobooks. In the same
4b	(Cod	de:) (Expenses \$including grants of \$) (Revenue \$)
40	1000	de/(Expenses #/(November #/

	*****	***************************************
4c	(Cod	de:) (Expenses \$ including grants of \$) (Revenue \$)
	201000.0	
	00000	

4d		er program services (Describe on Schedule O.)
4d	(Exp	penses \$ 0 including grants of \$ 0) (Revenue \$ 0) al program service expenses > 8,351,264

Part	V Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	1	
2	Is the organization required to complete Schedule B, Schedule of Contributors See instructions?	2	1	ļ
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
5	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		√
6	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III Did the organization maintain any donor advised funds or any similar funds or accounts for which donors	5		<u> </u>
	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		1
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	1	
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			
10	debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>	9		✓
11	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	1	
а	VII, VIII, IX, or X as applicable. Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"		E.	
	complete Schedule D, Part VI	11a	1	
	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		✓
	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		✓
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		1
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		1
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	1	
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		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		√
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		✓
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		√
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		1
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		-
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I See instructions	17		√
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		V
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		▼
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		∀
Ь	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		✓

Part	Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		1
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	√	
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		1
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	\Box	
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		1
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? If "Yes," complete Schedule L, Part II	26		✓
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		√
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):		1	
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		√
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		1
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		1
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		1
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		1
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		1
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		1
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	1	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	<u> </u>	✓
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? If "Yes," complete Schedule R, Part V, line 2	36		1
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? If "Yes," complete Schedule R, Part VI	37		1
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.	38	1	
Part				_
	Check if Schedule O contains a response or note to any line in this Part V	· · ·		
	Established with the Band of Established State of Washington		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 124 Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0	KASE.		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	100		
C	reportable gaming (gambling) winnings to prize winners?	10	1	P-A

	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	DX		2011
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 498			mm:
þ	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	1	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	0-		,
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,	4.0		/
6	a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country ▶	4a		V
Ь	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	His	(Total	
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		7
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		<u> </u>
_	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
6a	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		1
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).	1115	18	1000
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	7a		
b	and services provided to the payor?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
¢	required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	Clark.	you'll	(an)
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	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			ami
	sponsoring organization have excess business holdings at any time during the year?	8	(()	
9	Sponsoring organizations maintaining donor advised funds.			185
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
þ	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:	MIKE	F (8)	
а	Initiation fees and capital contributions included on Part VIII, line 12	100	100	25/11
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . [10b]	227	300	100
11	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders	STATE OF		1,2
a	 	7380	STR.	10.5
b	Gross income from other sources (Do not net amounts due or paid to other sources			
12a	against amounts due or received from them.)	12a	COUNTY	160.0
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	126	200	21110
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	MAG		ME
	Is the organization licensed to issue qualified health plans in more than one state?	13a	20000	
	Note: See the instructions for additional information the organization must report on Schedule O.		(AIX)	
b	Enter the amount of reserves the organization is required to maintain by the states in which	都區		3871
	the organization is licensed to issue qualified health plans	YA B.Y	19	MA
С	Enter the amount of reserves on hand	4.5	KOV.	-
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	45		,
	excess parachute payment(s) during the year?	15	7.1	_
	If "Yes," see instructions and file Form 4720, Schedule N.	16	27070	1
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?			

Page 6

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O.			
	Check if Schedule O contains a response or note to any line in this Part VI			
Secti	on 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 .		Other	11/15
	If there are material differences in voting rights among members of the governing body, or		UES,	F
	if the governing body delegated broad authority to an executive committee or similar	100		300
	committee, explain on Schedule O.	1000	N. Salar	1173
b	Enter the number of voting members included on line 1a, above, who are independent .			Will I
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	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		✓
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		✓
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		1
6	Did the organization have members or stockholders?	6		✓
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		1
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b		✓
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	76	ME	200
	the year by the following:	NEG!		
а	The governing body?	8a	✓	
b	Each committee with authority to act on behalf of the governing body?	8b	✓	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		/
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue Co	ode.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	✓	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	1	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	1	
ь	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	33113	SEE.	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	1	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	√	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done.	12c	✓	
13	Did the organization have a written whistleblower policy?	13	<u> </u>	1
14	Did the organization have a written document retention and destruction policy?	14		7
15	Did the process for determining compensation of the following persons include a review and approval by			16
а	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	15a	-100	1
	Other officers or key employees of the organization	15b		1
b	If "Yes" to line 15a or 15b, describe the process in Schedule O (see Instructions).	135	CDS:N	A1125.00
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
_	with a taxable entity during the year?	16a	ADMIN A	V
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		
	on C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶ MA			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-7 (3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Our website Another's website Upon request Other (explain on Schedule O)	·		
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict o and financial statements available to the public during the tax year.	finter	est p	olicy,
20	State the name, address, and telephone number of the person who possesses the organization's books and rec ELLEN DONAGHEY, (617)859-2345	cords	>	

Trustee

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 instructions for definition of "key employee."
- · List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- · List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- · List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See instructions for the order in which to list the persons above.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. (C) Position (B) (D) (E) (F) (do not check more than one Reportable Name and title Average Reportable Estimated amount box, unless person is both an hours compensation compensation of other officer and a director/trustee) from the from related compensation per week Officer Individual Institutional Key employee етрюуее Highest compensated (list any organization organizations from the hours for (W-2/1099-MISC) (W-2/1099-MISC) organization and related related organizations rganizations trustee below trustee dotted line) DAVID J LEONARD 35.00 President 0.00 0 198,404 27,357 **EAMON SHELTON** 35.00 **Director Of Operations** 0.00 0 139,150 36,799 MICHAEL R COLFORD 35.00 **Director Of Library Services** 0.00 0 151,898 23,979 LAURA S IRMSCHER 35.00 13,662 122,961 36,548 **Chief Of Collections** 0.00 PRISCILLA FOLEY 35.00 **Director Of Neighborhood Services** 0.00 0 130,042 41,052 **KURT MANSPERGER** 35.00 O 136,622 30,612 0.00 Chief Technology Officer 35.00 **ELLEN DONAGHEY** Chief Financial Officer (CFO) 0.00 0 139,200 22,685 PAMELA CARVER 35.00 Clerk & Executive Assistant To The President 0.00 0 103,922 10.705 ROBERT E GALLERY 1.00 Chair(Resigned effective 1-25 2021) 0.00 0 0 0 PRISCILLA H DOUGLAS 1.00 1 0.00 0 0 0 Chair effective 5/18/2021, Trustee prior **EVELYN ARANA-ORTIZ** 1.00 0 0 0 Vice Chair Interim Chair Jan-May 2021, Trustee prio 0.00 ZAMAWA ARENAS 1.00 0 Trustee 0.00 0 0 1.00 JABARI ASIM 0.00 0 0 0 **Trustee** 1.00 BEN BRADLEE JR 0 0

0.00

0

Part VII Section A. Officers, Directors,	Trustees,	Key	Em,	plo	yee	s, an	Id F	lighest Compe	nsated b	mpio	yees (c	ontini	леа)
		(C)											
(A)	(B)	/ala a	-4 -1		ition	- 41		(D) (E			i) (F)		
Name and title	Average					e than d is both		Reportable	Reporta	able	Estimat	ed amo	unt
	hours					or/trus	tee)	compensation	compens from rela			other	_
	per week (list any	오코	灵	Ş	\$	B ¥	7	from the organization	organiza			ensatio m the	л
	hours for	di vid	∰	Officer	Yer	Highest co	Former	(W-2/1099-MISC)	(W-2/1099			zation a	
	related organizations	Individual trustee or director	ğ	ľ	Key employee	8 8		1			related o	rganiza	ions
	below	i trus	불		yee	좋			,				
	dotted line)	8	Institutional trustee			Highest compensated employee							
<u> </u>			L			<u>8</u>							
CHERYL CRONIN	1.00									_			
Trustee	0.00	/	-	-	_		-	0		0			0
LINDA DORCENA FORRY	1.00												_
Trustee	0.00	/	⊢	⊢	\vdash	-	\vdash	0		0			0
JOHN T HAILER	1.00												
Trustee	0.00	/	_		<u> </u>	ļ	<u> </u>	0		0			0
JEFFREY B HAWKINS	1.00	١.						}			1		
Trustee	0.00	✓	_	┡			\vdash	0		0	200		0
CHYNAH TYLER	1.00												
Trustee	0.00	/		L				0		0	2007		0
NAVJEET BAL effective January 2021	1.00										ś		
Trustee effective january 2021	0.00	1			$ldsymbol{ldsymbol{ldsymbol{eta}}}$		\perp	0		0			0
JOSEPH BERMAN	1.00	1											
Trustee effective january 2021	0.00	✓					\perp	0		0			0
JOYCE LINEHAM	1.00												
Trustee effective january 2021	0.00	✓						0		0			0
MICHAEL RUSH	1.00												
Trustee effective january 2021	0.00	1						0		0			0
CHRISTIAN WESTRA	1.00												
Trustee effective january 2021	0.00	✓						0		0			0

41.0.1.1.1												- 1200	
1b Subtotal			•	٠				13,662	1,1	22,199		229	,737
c Total from continuation sheets to Part			•	٠				-					
d Total (add lines 1b and 1c)							<u>.</u>	13,662		22,199		229	,737
2 Total number of individuals (including bu		to tr	1086	e list	ed	above	e) w		e than \$10	00,000	of		
reportable compensation from the organ	ization -							41				V	A1-
												Yes	No
3 Did the organization list any former							mp	loyee, or highes	t compe	nsated		GES	2000
employee on line 1a? If "Yes," complete							•				3	NO. 17	√
4 For any individual listed on line 1a, is the													
organization and related organizations	greater th	an \$	150	,000)? I	r "Ye	s, "	complete Sched	dule J fo	r sucn		BEGGE 1	
individual	• • • •	• •	•	٠		•	•				4	✓	-
5 Did any person listed on line 1a receive of									ion or ind	lividual	1		100
for services rendered to the organization	? If "Yes," (comp	ete	Scr	nedi	Jle J I	or s	such person .			5		<u>√</u>
Section B. Independent Contractors													
1 Complete this table for your five high													
compensation from the organization. Rep	ort compen	satio	n fo	r the	ca	lenda	r ye	ear ending with or	within the	e organ	ization'	s tax y	ear.
(A) Name and business add	dress							(B) Description of serv	rices		(C) Compens	ation	
Electronic Security Control Systems Inc, 108 Ever	green Stree	t, Brid	gep	ort,	СТ	06606	Ele	ectronic security &	control			184	,800
Innovative Interfaces Inc, 1900 Powell Street, Suite						(SEC 8030)		laris Server Softw				155	,255
EMCOR Service-North East dba Comm Air Balco,						02284	+	/AC					,043
G4S Secure Solutions (USA) Inc, P O Box 277469,						17000		curity					,544
American Service Company, 35 Hanna Street, Qui	- 10 miles (10 m						_	re Alarm Services					,178
2 Total number of independent contractor			ut n	ot	limit	ted to			e) who	NE LO		W-000	17
received more than \$100,000 of compens								6		28.	MILITER		WI.

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII . . . (B) Related or exempt function revenue (A) Total revenue (C) Unrelated Revenue excluded from tax under sections 512-514 business revenue Federated campaigns . 1a Contributions, Gifts, Grants 0 and Other Similar Amounts Membership dues 1b 0 Fundraising events 10 10,610 1d d Related organizations 3,092,871 Government grants (contributions) 1e 4,037,997 All other contributions, gifts, grants, and similar amounts not included above 1f 1,473,410 Noncash contributions included in lines 1a-1f 19 0 Total. Add lines 1a-1f. 8,614,888 **Business Code** Program Service 611710 **NETWORK MEMBERSHIP DUES** 122,454 122,454 0 Revenue 0 All other program service revenue . 0 Total. Add lines 2a-2f . 122,454 Investment income (including dividends, interest, and 3 1,364,926 1,364,926 0 0 4 Income from investment of tax-exempt bond proceeds ▶ 0 0 5 Royalties . 15,863 0 0 15,863 (i) Real (ii) Personal Gross rents 90,500 0 Less: rental expenses 6b 0 0 Rental income or (loss) 6c 90,500 0 Net rental income or (loss) 90,500 0 0 90.500 (ii) Other (i) Securities 7a Gross amount from sales of assets 37.480.067 0 other than inventory 7a b Less: cost or other basis Other Revenue and sales expenses 31,590,625 0 c Gain or (loss) . 7c 5,889,442 0 d Net gain or (loss) 5,889,442 0 0 5,889,442 8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 . . . 8a **b** Less: direct expenses 8ь Net income or (loss) from fundraising events 9a Gross income from gaming activities. See Part IV, line 19 9a 9b Less: direct expenses ▶ Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances 10a Less: cost of goods sold . . . 10b b Net income or (loss) from sales of inventory . **Business Code** Miscellaneous Mcgovern Trust Fund Distribution 611710 0 93,346 11a 93,346 0 Revenue 0 0 b 611710 54,280 54,280 Recovered Fire Alarm/Security Expenses 3,609 Commissions(event \$1,861,other \$1748) 611710 3,609 0 0 All other revenue 0 0 551 551 Total. Add lines 11a-11d . 151,786 Total revenue. See instructions 16,249,859 122,454 0 7.512.517

Part IX Statement of Functional Expenses

Sectio	n 501(c)(3) and 501(c)(4) organizations must comp	lete all columns. All	other organizations	must complete colu	mn (A).
	Check if Schedule O contains a response	or note to any line	in this Part IX .		🗸
	t include amounts reported on lines 6b, 7b, o, 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 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				
4	Benefits paid to or for members	0	0		THE SHALL SHALL
5	Compensation of current officers, directors,	U	0		
•	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	0
7	Other salaries and wages	3,035,902	2,550,158	485,744	0
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	77,711	65,277	12,434	0
9	Other employee benefits	262,194	220,243	41,951	0
10	Payroll taxes	0	0	0	0
11	Fees for services (nonemployees):				
а	Management	0	0	0	0
b	Legal	0	0	0	0
C	Accounting	32,500	0	32,500	0
d	Lobbying	0	0	0	0
e f	Investment management fees	272,171	0	272,171	0
g	Other. (If line 11g amount exceeds 10% of line 25, column	272,171	•	272,171	
5	(A) amount, list line 11g expenses on Schedule O.)	955,806	802,877	152,929	0
12	Advertising and promotion	35,440	29,770	5,670	0
13	Office expenses	361,450	303,618	57,832	0
14	Information technology	1,309,442	1,099,931	209,511	0
15	Royalties				
16 17	Occupancy	21,220	17,825	3,395	0
18	Payments of travel or entertainment expenses	21,220	17,023	3,353	
	for any federal, state, or local public officials	0	o	o	0
19	Conferences, conventions, and meetings .	2,998	2,518	480	0
20	Interest	0	0	0	0
21	Payments to affiliates	26,193	22,002	4,191	0
22 23	Depreciation, depletion, and amortization .	29,183 44,863	24,514	4,669	0
24		44,003		44,863	C TANDER CANAL TO THE
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)			I South The Part	
a	Books and related materials	1,660,370	1,660,370	0	0
b	Equipment rental/maintenance	759,850	638,274	121,576	0
C d	Program/Admin	828,316 98,411	828,316 82,665	15,746	0
e	Security All other expenses	3,460	2,906	554	0
25	Total functional expenses. Add lines 1 through 24e	9,817,480	8,351,264	1,466,216	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) (B) End of year Beginning of year 982,531 1 1 927,478 2 2 Savings and temporary cash investments 20,240,296 22,497,514 3 0 4 4 986,318 1,681,179 Loans and other receivables from any current or former officer, director, 5 trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 5 0 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B). 6 0 7 7 0 4ssets 8 0 9 Prepaid expenses and deferred charges 149,827 441,350 Land, buildings, and equipment: cost or other 10a basis. Complete Part VI of Schedule D 10a 1,451,776 Less: accumulated depreciation 10b 10c 84,019 365,836 b 11 57,420,395 11 73,841,550 12 12 Investments - other securities. See Part IV, line 11 . . . 0 13 Investments—program-related. See Part IV, line 11 13 0 14 14 0 15 15 0 16 Total assets. Add lines 1 through 15 (must equal line 33) 79,863,386 16 99,754,907 17 683,087 17 666,619 18 18 19 19 441,384 451,084 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D . . . 21 Liabilities 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 23 23 Secured mortgages and notes payable to unrelated third parties . . . 24 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24). Complete Part X 25 132,727 232,770 26 Total liabilities. Add lines 17 through 25 26 1,257,198 1,350,473 Organizations that follow FASB ASC 958, check here ▶ ☑ Net Assets or Fund Balances and complete lines 27, 28, 32, and 33. Net assets without donor restrictions 4,793,775 5.151,552 Net assets with donor restrictions 28 28 73,812,413 93,252,882 Organizations that do not follow FASB ASC 958, check here ▶ □ and complete lines 29 through 33. 29 29 30 30 Paid-in or capital surplus, or land, building, or equipment fund 31 31 Retained earnings, endowment, accumulated income, or other funds . . . 32 78,606,188 32 98,404,434 33 Total liabilities and net assets/fund balances 33 79,863,386 99,754,907

Form **990** (2020)

_	-4	-
Page	ш	1
· uge		•

1 01111 0	30 (2020)			га	ye •	
Parl	t XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI				✓	
1	Total revenue (must equal Part VIII, column (A), line 12)			16,24	9,859	
2	Total expenses (must equal Part IX, column (A), line 25)					
3	Revenue less expenses. Subtract line 2 from line 1			6,43	2,379	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 4			78,60	6,188	
5	Net unrealized gains (losses) on investments			12,67	3,535	
6	Donated services and use of facilities				0	
7	Investment expenses				0	
8	Prior period adjustments				0	
9	Other changes in net assets or fund balances (explain on Schedule O)			69	2,332	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	32, column (B))			98,40	4,434	
Part	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," explain	in		號		
	Schedule O.	8	104	1364	208023	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	_	2a		√	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled	or		STATE OF	YOU.	
	reviewed on a separate basis, consolidated basis, or both:	į.		307	1163	
	Separate basis Consolidated basis Both consolidated and separate basis	4		ALC: N	1/11	
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 audited on	a	34	1000		
	separate basis, consolidated basis, or both:	10	13			
	Separate basis Consolidated basis Both consolidated and separate basis	2	566	2057	2040	
¢	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight					
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	✓		
	If the organization changed either its oversight process or selection process during the tax year, explain of	on	3			
	Schedule O.			118	l hin	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the					
	Single Audit Act and OMB Circular A-133?		3a			
þ	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		,			
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits.		3b	000		
			Form	990	(2020)	

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

TRUSTEES OF THE PUBLIC LIBRARY OF THE CITY OF BOSTON

Employer identification number

04-6151731

Pai	rt I Reason for Public Charit	y Status. (All	organizations must	comple	te this p	art.) See instruction	ons.				
The o	organization is not a private foundation	on because it is	s: (For lines 1 through	12, chec	k only on	e box.)					
1	A church, convention of churche	s, or association	on of churches descri	bed in se	ction 17	0(b)(1)(A)(i).					
2	A school described in section 17	70(b)(1)(A)(ii). (Attach Schedule E (Fo	orm 990 (or 990-E2	Z).)					
3	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).										
4											
5	An organization operated for the section 170(b)(1)(A)(iv). (Complete		college or university	owned o	r operate	d by a government	al unit described in				
6	A federal, state, or local government	nent or governr	mental unit described	in sectio	n 170(b)	(1)(A)(v).					
7	An organization that normally re- described in section 170(b)(1)(A)			oort from	a govern	nmental unit or from	the general public				
8	A community trust described in s	section 170(b)	(1)(A)(vi). (Complete F	Part II.)							
9	An agricultural research organiza or university or a non-land-grant										
	university:										
10	An organization that normally recrete from activities related to support from gross investment in acquired by the organization after the control of the cont	its exempt fur acome and unr	nctions, subject to cer related business taxat	tain exce de incom	eptions; a e (less se	nd (2) no more than ection 511 tax) from	331/3% of its				
11	An organization organized and o	perated exclus	ively to test for public	safety. S	See sect i	on 509(a)(4).					
12	An organization organized and or										
	of one or more publicly supported Check the box in lines 12a through										
а	Type I. A supporting organization(s) supporting organization. You	the power to	regularly appoint or e	lect a ma	jority of t						
b	Type II. A supporting organiz	ation supervise	ed or controlled in co	nnection	with its s						
	control or management of the organization(s). You must co	mplete Part I	V, Sections A and C.								
С	Type III functionally integral its supported organization(s)						ally integrated with,				
d	Type III non-functionally integra that is not functionally integra requirement (see instructions)	ated. The organ	nization generally mus	st satisfy	a distribu	ition requirement an					
8	 Check this box if the organization functionally integrated, or Type 						e II, Type III				
f	Enter the number of supported org	ganizations .					1				
g	Provide the following information a	about the supp									
	(i) Name of supported organization	(ii) EIN	(III) Type of organization (described on lines 1–10 above (see instructions))	(iv) Is the o listed in you docur	ir governing	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)				
				Yes	No						
A}											
B)											
C)											
D)							1				
E)											

	(Complete only if you checked the						alify under
Saat	Part III. If the organization fails to ion A. Public Support	quality unde	er the tests iis	stea below, p	iease compie	ете Рап III.)	
	idar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	(a) 2010	(b) 2017	(6) 2018	(0) 2019	(6) 2020	(I) Total
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge					П	
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4				ROWER P		
	on B. Total Support						
	dar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
7	Amounts from line 4			ļ			
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						-
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10			THE WARRY			
12	Gross receipts from related activities, etc.					12	
13	First 5 years. If the Form 990 is for the	_					
<u> </u>	organization, check this box and stop he						· · P []
	on C. Computation of Public Suppor			4.4(0)			
14 15	Public support percentage for 2020 (line 6 Public support percentage from 2019 Sch		•			15	<u>%</u>
16a	331/3% support test—2020. If the organi box and stop here. The organization qua	zation did not	check the box	k on line 13, ar	nd line 14 is 30	31/3% or more,	check this
b	331/3% support test—2019. If the organithis box and stop here. The organization						
17a	10%-facts-and-circumstances test—20 10% or more, and if the organization m Part VI how the organization meets the organization	eets the facts facts-and-circ	-and-circumst umstances tes	ances test, chast. The organiz	eck this box a ation qualifies	and stop here.	Explain in
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organizatio in Part VI how the organization meets the organization	n meets the fa e facts-and-cir	acts-and-circui cumstances te	mstances test, est. The organi	check this bo zation qualifie	x and stop he s as a publicly	re. Explain supported
18	Private foundation. If the organization of						

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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.)

Sect	ion A. Public Support		THE NOTE OF STREET	• • • • • • • • • • • • • • • • • • •		,	
Caler	ndar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and membership fees		1			1	
	received. (Do not include any "unusual grants.")]	
2	Gross receipts from admissions, merchandise				1 -	Ì	
	sold or services performed, or facilities furnished in any activity that is related to the			_	11		
	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					=1	
5	The value of services or facilities	100	}				
	furnished by a governmental unit to the						
_	organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3						
	received from other than disqualified persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b					7 1	
8	Public support. (Subtract line 7c from	and the second	u.C. III Do	All Control of the	S SUMBLES	Assimilar to	
	line 6.)						
Secti	on B. Total Support			100			
Calen	dar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9	Amounts from line 6						
10a						7-	
	payments received on securities loans, rents,						
	royalties, and income from similar sources.	T T	HI I				
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses acquired after June 30, 1975						
	·						
C	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether						
	or not the business is regularly carried on						
12	Other income. Do not include gain or						
12	loss from the sale of capital assets						
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,			-			
	and 12.)						
14	First 5 years. If the Form 990 is for the	organization'	s first, second	, third, fourth,	or fifth tax ye	ear as a sectio	n 501(c)(3)
	organization, check this box and stop he						<u> </u>
	on C. Computation of Public Suppor						
15	Public support percentage for 2020 (line 8						<u>%</u>
16	Public support percentage from 2019 Sch					16	%_
	on D. Computation of Investment In				401	1 .= 1	
17	Investment income percentage for 2020 (%
18	Investment income percentage from 2019					18 221 m	% and line
19a	331/3% support tests – 2020. If the organi 17 is not more than 331/3%, check this box						
h	33 ¹ /3% support tests—2019. If the organiz		-			-	_
b	line 18 is not more than 3318%, check this t						
20	Private foundation. If the organization di		_			=	_
				,	errowers still www.	with wood might di	F L

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on 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.)

Secti	on A. All Supporting Organizations	Delt		
		_	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		
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		
3 a	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		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c	223	1,35
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	MAJ	900
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		
C	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		NAS NAS NAS
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).	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		Elan M
6	Substitutions only. Was the substitution the result of an event beyond the organization's control? 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	5c		
	by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.	6		259
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 or 990-EZ).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	8		11.77
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 in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b		EAST.
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c		211
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.	10a		
h	Did the organization have any excess business holdings in the tax year? (Use Schedule C. Form 4720, to	TENE	SER.	SEL

determine whether the organization had excess business holdings.)

Schedi	III A (Form 990 of 990-EZ) 2020			rage J
Part	IV Supporting Organizations (continued)			
44	Lies the appropriation accorded a gift or contribution from any of the following payments?	Acres 64	Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons? A person who directly or indirectly controls, either alone or together with persons described in lines 11b and		HITTO	1177
а	11c below, the governing body of a supported organization?	11a		
b		11b		
c	A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide	(Series)	1400	1120
•	detail in Part VI .	11c		
Sect	ion 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		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2		
Secti	ion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	11		
Secti	ion 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		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	3		
Secti	ion E. Type III Functionally Integrated Supporting Organizations			
1 a b c	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see a second to be a second to			
2	Activities Test. Answer lines 2a and 2b below.		Yes	
а	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 in line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3 a	Parent of Supported Organizations. <i>Answer lines 3a and 3b below.</i> 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? <i>If "Yes" or "No," provide details in Part VI.</i>	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b	BIR	ILIES

(see instructions).

				. 490
Part	V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	gan	izations	
1	☐ Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organ			
Sect	ion A-Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4_	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
_ 7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B-Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
Ь	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):	1e		
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C—Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	Service Comments	A
2	Enter 0.85 of line 1.	2	The man de la company	
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	A SECTION OF	L. Company
6	Distributable Amount. Subtract line 5 from line 4, unless subject to		The second second	14
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functional	allv i	ntegrated Type III suppo	rting organization

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)						
Section D-Distributions						
1	Amounts paid to supported organizations to accomplish	exempt purposes		1		
2	Amounts paid to perform activity that directly furthers ex-	empt purposes of suppo	orted			
	organizations, in excess of income from activity			2		
3	Administrative expenses paid to accomplish exempt purp	ooses of supported orga	nizations	3		
4	Amounts paid to acquire exempt-use assets			4		
5	Qualified set-aside amounts (prior IRS approval required	provide details in Part	VI)	5		
6	Other distributions (describe in Part VI). See instructions.			6		
7	Total annual distributions. Add lines 1 through 6.			7		
8	Distributions to attentive supported organizations to which	th the organization is res	ponsive			
	(provide details in Part VI). See instructions.	-		8		
9	Distributable amount for 2020 from Section C, line 6			9		
10	Line 8 amount divided by line 9 amount	===		10		
			(ii)		(iii)	
Sect	on E—Distribution Allocations (see instructions)	(i) Excess Distributions	Underdistribution Pre-2020	าร	Distributable Amount for 2020	
1	Distributable amount for 2020 from Section C, line 6		TO SOME WEST			
2	Underdistributions, if any, for years prior to 2020					
	(reasonable cause required - explain in Part VI). See					
	instructions.					
3	Excess distributions carryover, if any, to 2020		81192 V 411V	1111		
а	From 2015		o susimmunis	5165		
þ	From 2016		THE ALTONOMY WI			
С	From 2017	24				
d	From 2018		and the land	111		
е	From 2019	THE HUMBERS		11/2	Sectoro moderni	
f	Total of lines 3a through 3e		V-VS-MISSIS	-4		
g	Applied to underdistributions of prior years					
h	Applied to 2020 distributable amount		SEMBEL & KU			
i	Carryover from 2015 not applied (see instructions)			NAG	And making spiles of	
i	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				MAT ANNA TO THE	
4	Distributions for 2020 from	A U TI I WAS STONY		-	Americans Internal	
•	Section D, line 7:					
а	Applied to underdistributions of prior years				Anna and an	
	Applied to 2020 distributable amount	the state of the State of	ansammelik er er er	11		
c	Remainder. Subtract lines 4a and 4b from line 4.			117		
	Remaining underdistributions for years prior to 2020, if	TI VII WII				
c	any. Subtract lines 3g and 4a from line 2. For result	IVE THE ATTEMPT AND				
5	greater than zero, explain in Part VI . See instructions.					
_	-			1.05	DEPAIL ALL CONTRACTOR OF THE PARTY OF THE PA	
6	Remaining underdistributions for 2020. Subtract lines 3h			mi		
	and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.					
		NAME OF TAXABLE PARTY.		2.802		
7	Excess distributions carryover to 2021. Add lines 3j and 4c.			000		
8	Breakdown of line 7:		DILL SIGNED IN LOVE		III SIIO CELLUSIII LELL	
а	Excess from 2016		ESTIMATION OF			
b	Excess from 2017	PANTE TECHNOLOGY	ALII IIMM 13W ASA			
С	Excess from 2018	HALL WIT HOME SER	THEORY DO AND A	821		
d	Excess from 2019			11		
е	Excess from 2020		HEOMITORIAL SERVICE	11		

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)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

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

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

TRUS	TEES OF THE PUBLIC LIBRARY OF THE CITY OF BOST		04-6151731
Pai			s or Accounts.
	Complete if the organization answered "	Yes" on Form 990, Part IV, line 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year) .		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor	advisors in writing that the assets hel	
	funds are the organization's property, subject to the	= -	
6	Did the organization inform all grantees, donors, a		
	only for charitable purposes and not for the benefit		
	conferring impermissible private benefit?	<u> </u>	· · · · · · · · · · · · · · · · · · ·
Par	Conservation Easements.		
	Complete if the organization answered "		
1	Purpose(s) of conservation easements held by the	-	W. S. 2000
	Preservation of land for public use (for example, recre	· ·	The state of the s
	Protection of natural habitat	☐ Preservation of	a certified historic structure
	☐ Preservation of open space		
2	Complete lines 2a through 2d if the organization he	ld a qualified conservation contribution	
	easement on the last day of the tax year.		Held at the End of the Tax Year
a			
b	Total acreage restricted by conservation easements		
C	Number of conservation easements on a certified h		
d	Number of conservation easements included in (• •	1 1
	9		
3	Number of conservation easements modified, trans	sterred, released, extinguished, or term	ninated by the organization during the
	tax year >	unting appropriate legated by	
4	Number of states where property subject to conser		andian bandling of
5	Does the organization have a written policy reg violations, and enforcement of the conservation eas		
6	Staff and volunteer hours devoted to monitoring, inspec		
0	Starr and volunteer nours devoted to monitoring, inspec	and enforcing	conservation easements during the year
7	Amount of expenses incurred in monitoring, inspectin	a handling of violations, and enforcing of	consequation easements during the year
•	► \$	g, nariding of violations, and emoreing c	onservation casements during the year
8	Does each conservation easement reported on line	2/d) above satisfy the requirements of s	ection 170(h)(A)(R)(i)
0	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports of		
•	balance sheet, and include, if applicable, the text of		
	organization's accounting for conservation easeme	—	
Par	III Organizations Maintaining Collections	of Art. Historical Treasures, or C	Other Similar Assets.
	Complete if the organization answered "	•	
12	If the organization elected, as permitted under FAS		e statement and balance sheet works
	of art, historical treasures, or other similar assets		
	service, provide in Part XIII the text of the footnote		
b	If the organization elected, as permitted under FAS	SB ASC 958, to report in its revenue s	tatement and balance sheet works of
_	art, historical treasures, or other similar assets held		
	provide the following amounts relating to these item	ns:	
	(i) Revenue included on Form 990, Part VIII, line 1		. ∴ . ▶ \$
	(i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X		> \$
2	If the organization received or held works of art,		
	following amounts required to be reported under FA		
а	Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X		▶ \$0
b	Assets included in Form 990, Part X		> \$ 0

Pari	III Organizations Maintaining	Collections of	Art, Historical	Treasures,	or Ot	her Similar Ass	ets (continued)
3	Using the organization's acquisition, collection items (check all that apply):		her records, che	ck any of the	e follow	ving that make sig	nificant use of its
а	✓ Public exhibition			n or exchange			
þ	Scholarly research		e 🗌 Othe	er			
¢	Preservation for future generations	ì					
4	Provide a description of the organiza XIII.	tion's collections a	and explain how	they further	the org	anization's exemp	ot purpose in Part
5	During the year, did the organization assets to be sold to raise funds rather						☐ Yes ☑ No
Part	IV Escrow and Custodial Arra	angements.	·				
	Complete if the organization 990, Part X, line 21.	answered "Yes"	" on Form 990,	Part IV, line	9, or	reported an amo	ount on Form
1a	Is the organization an agent, trustee included on Form 990, Part X?						☐ Yes ☐ No
þ	If "Yes," explain the arrangement in P	art XIII and comple	ete the following	table:			
					<u> </u>	Am	ount
C	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 amount					•	
b	If "Yes," explain the arrangement in P.	art XIII. Check here	e if the explanati	on has been _l	provide	ed on Part XIII .	<u> L</u>
Par				0.1848	40		
	Complete if the organization					Add There are bearing	date:
4.	Desiration of work belongs	(a) Current year	(b) Prior year	(c) Two years		(d) Three years back	(e) Four years back
1a	Beginning of year balance	61,526,120	62,960,15		72,714	60,125,636	54,737,117
b		284,321	14,10	1	93,355	1,167,112	2,087,806
С	Net investment earnings, gains, and losses	40 520 257	4 042 70		44 607	2 702 772	6 200 422
4	Grants or scholarships	19,536,257	1,812,78		41,687 44,024	3,702,773	6,399,122
d	Other expenditures for facilities and	2,936,666	2,835,68	4 2,84	44,024	2,696,832	2,605,575
е	programs	162 001	160 20	, ,	EO EO1	150 000	154.010
f	Administrative expenses	162,901 304,671	158,29 266,93		58,501 45,076	156,688 269,287	154,919 337,915
g	End of year balance	77,942,460			60,155	61,872,714	60,125,636
2	Provide the estimated percentage of t						00, 123,030
a	Board designated or quasi-endowmer) %	g, 00/4/1/1/(4)	,, 11014		
b	Permanent endowment ▶ 1						
C	Term endowment ▶ 0 %						
_	The percentages on lines 2a, 2b, and		00%.				
3a	Are there endowment funds not in the			hat are held a	and ad	ministered for the	
	organization by:		o organication to				Yes No
	(i) Unrelated organizations						3a(i) ✓
	- 11.						3a(ii) ✓
b	If "Yes" on line 3a(ii), are the related o	rganizations listed	as required on §	Schedule R?			3b ✓
4	Describe in Part XIII the intended uses	-	•				
Part							
	Complete if the organization	answered "Yes'	' on Form 990,	Part IV, line	11a.	See Form 990, F	art X, line 10.
	Description of property	(a) Cost or ot (investm	1''	or other basis (other)		Accumulated epreciation	(d) Book value
1a	Land		0	0	e Turch		0
b	Buildings		0	0		0	0
С	Leasehold improvements		0	0		0	- 0
d	Equipment		0	1,131,346		798,648	332,698
e	Other		0	320,430		287,292	33,138
LOTAL	Add lines 1a through 1e (Column (d) n	nuet equal Form 0	uu Part X colur	n iki line 10.	C)	■ I	205 026

Part VII	Investments - Other Securities.		
	Complete if the organization answered "Yes" on Form 990, Part I	V, 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	
(2) Closely h	neld equity interests		
(3) Other			
		<u> </u>	
(H)	ma (b) must sound Form 000. Part V and (D) line 12.1		
	mn (b) must equal Form 990, Part X, col. (B) line 12.) . Investments—Program Related.		
Part VIII	Complete if the organization answered "Yes" on Form 990, Part I	V line 11c See F	orm 990 Part X line 13
	(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(4)			
(1)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Colui	mn (b) must equal Form 990, Part X, col. (B) line 13.) . 🕨		REPORT OF THE PARTY OF THE PART
Part IX	Other Assets.		
	Complete if the organization answered "Yes" on Form 990, Part I	V, line 11d. See F	orm 990, Part X, line 15.
	(a) Description		(b) Book value
(1)			3 140 10 4
(2)			
_(3)			
(4)			
(5)			
(6)	<u> </u>	- 1	
_(7)			
(8)			
(9)	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)		
Part X	mn (b) must equal Form 990, Part X, col. (B) line 15.)		05000 P1
	Complete if the organization answered "Yes" on Form 990, Part I line 25.	v, line Tie or Fit.	See Form 990, Part X,
1.	(a) Description of liability		(b) Book value
(1) Federal in			0
	THE CITY OF BOSTON		232,770
(3)			
(4)		.	
(5)			
(6)			
(7)			
(8)			
(9)	man (h) manual forms 000. Days V and 70) time 05.1		
	mn (b) must equal Form 990, Part X, col. (B) line 25.)		tomonto that reports the
	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) 2020	Page 4

Part	· ·			Return.	
	Complete if the organization answered "Yes" on Form 990,				
1	Total revenue, gains, and other support per audited financial statements			1	29,838,541
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 0-	1		
a	Net unrealized gains (losses) on investments	2a 2b	12,673,535	M. S	
b	Recoveries of prior year grants	_	222,815		
d	Other (Describe in Part XIII.)	2d	692,332	100	
e	Add lines 2a through 2d			2e	13,588,682
3	Subtract line 2e from line 1			3	16,249,859
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	i .	i		10,240,033
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	0	0.0	
b	Other (Describe in Part XIII.)	4b	0		
c	Add lines 4a and 4b			4c	0
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line	12.)		5	16,249,859
Part				r Returi	1.
	Complete if the organization answered "Yes" on Form 990,	Part I	V, line 12a.		
1	,			1_	10,040,295
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			-83	
a	Donated services and use of facilities	2a	222,815	153	
b	Prior year adjustments	2b	0		
C	Other losses		0		
d	Other (Describe in Part XIII.)	2d	0	0.0	
е 3	Add lines 2a through 2d	• •		2e 3	222,815
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	i		3	9,817,480
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	0		
b	Other (Describe in Part XIII.)	4b	0	448	
	Add lines 4a and 4b		V	4c	0
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin			5	9,817,480
Part 2	Supplemental Information.				0,011,100
Provid	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4; P	art IV, lines 1b and 2b	; Part V, I	ine 4; Part X, line
2; Part	XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	to pro	vide any additional inf	formation	ı.
Sched	ule D, Part III, Line 1 - EXPLANATION: TERMS FOR NOT REPORTING ASSETS	PER S	SFAS 116 -THE LIBRAR	Y MAINTA	AINS
	CTIONS INCLUDING ARTWORK, RARE BOOKS COLLECTIONS AND HISTORI				
	IASED OR DONATED. THESE ITEMS ARE PRESERVED AND CARED FOR AN				
	ITIONS. THE LIBRARY DOES NOT HAVE A FORMAL POLICY THAT REQUIRES				
	USED TO EXPAND THE COLLECTIONS THROUGH ADDITIONAL ACQUISITION				
	OT SOLD WORKS OF ARTS AND HISTORICAL TREASURES. AS OF JUNE 30,				ON TO
	COLLECTIONS OR USE PROCEEDS TO RESTORE CURRENT HOLDINGS OR E				
	IONAL ACQUISITIONSIN ADDITION-FORM 990 SCHEDULE D, PART XIII-EX				
	CIAL INFORMATION THE LIBRARY IS A PUBLIC ENTITY AND THEREFORE DO	JES N	UT FULLOW FASB PRO	JNOUNCE	MENIS
1330E	D AFTER NOVEMBER 30, 1989				
Sched	ule D, Part III, Line 4 - LIBRARY BOASTS OVER ONE MILLION RARE BOOKS A	ND M	ANUSCRIPTS A WEAT	TH OF MA	 \P
	AL SCORES AND PRINTS. AMONG ITS LARGE COLLECTIONS, THE LIBRARY				
	M SHAKESPEARE, ORIGINAL MUSIC FROM MOZART TO PROKOFIEV'S "PET				
	CTIONS THE PERSONAL LIBRARY OF JOHN ADAMS. DUE TO THE EXTENT				
	AYED ON A ROTATING BASIS. THESE UNIQUE SPECIAL EXHIBITS ARE SHOWN				
THE P	JBLIC AN OPPORTUNITY TO VIEW BOOKS AND SPECIAL DOCUMENTS WHIC	CH AR	E USUALLY ONLY ACC	ESSIBLE	ТО
REGIS	TERED READERS IN THE RARE BOOKS READING ROOM.				
	ule D, Part V, Line 1c - ITEM '1C' LABELED NET INVESTMENTS EARNINGS, G				
IN INV	ESTMENTS FOR CURRENT AND ALL PRIOR YEARS LISTED HERE.				
	ule D, Part V, Line 1d - ITEM '10' LABELED GRANTS OR SCHOLARSHIPS SHO	WS 5	% DISTRIBUTION WITH	DRAWN F	ROM THE
ENDO	WMENT FUNDS FOR CURRENT AND ALL PRIOR YEARS LISTED HERE.				

Part XIII - Supplemental Information (Continued)

Schedule D. Part V. Line 1e - ITEM '1E' LABELED OTHER EXPENDITURES FOR FACILITIES AND PROGRAMS SHOWS DISTRIBUTION TO TRINITY CHURCH IN THE CITY OF BOSTON FOR CURRENT AND ALL PRIOR YEARS LISTED HERE.
Schedule D, Part V, Line 1f - ITEM '1F' LABELED ADMINISTRATIVE EXPENSES SHOWS ACTUAL EXPENSES FOR CURRENT AND ALL PRIOR YEARS LISTED HERE.
Schedule D, Part V, Line 4 - ENDOWMENT FUNDS ARE USED TO SUPPORT THE ACTIVITIES AND PROGRAMS OF THE PUBLIC LIBRARY OF THE CITY OF BOSTON.
Schedule D, Part XI, Line 2b - DONATED SERVICES AND USE OF FACILITIES (\$222,815) IS THE FAIR MARKET VALUE OF FREE RENTAL SPACE PROVIDED TO THE BOSTON PUBLIC LIBRARY FUND INC. (\$48,046) AND TO THE ASSOCIATES OF THE BOSTON PUBLIC LIBRARY INC. (\$11,139) AND THE NORMAN B. LEVENTHAL MAP & EDUCATION CENTER INC. (\$163,630) ALL OPERATING WITHIN THE COPLEY LOCATION.
Schedule D, Part XI, Line 2d - OTHER IS \$692,332 IN EXPENSES PAID OUT DIRECTLY TO THE LIBRARY'S VENDORS BY THE UNIVERSAL SERVICE ADMINISTRATIVE COMPANY (USAC). THIS IS TO SUPPORT THE LIBRARY'S INFORMATION TECHNOLOGY INFRASTRUCTURE.

,

SCHEDULE J (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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.

OMB No. 1545-0047

Open to Public Inspection

TRUSTEES OF THE PUBLIC LIBRARY OF THE CITY OF BOSTON

04-6151731

Employer identification number

Part	t I Questions Regarding Compensation				
		<u></u>	Yes	No	
1a	Check the appropriate box(es) if the organization provided any 990, Part VII, Section A, line 1a. Complete Part III to provide any		緩		
	☐ First-class or charter travel ☐ Housi	ng allowance or residence for personal use	12/3	100	
	TO THE PERSON NAMED IN COLUMN TO THE	ents for business use of personal residence	1200	-	
		or social club dues or initiation fees		1000	
		nal services (such as maid, chauffeur, chef)			
			130	W.	
b	If any of the boxes on line 1a are checked, did the organiz or reimbursement or provision of all of the expenses de				
	explain	· · · · · · · · · · · · · · · · · · ·			
			690	10.08	
2	Did the organization require substantiation prior to reim directors, trustees, and officers, including the CEO/Executiv 1a?	e Director, regarding the items checked on line			
	ta:	2	1 1 1 1	E. S	
3	Indicate which, if any, of the following the organization used	to establish the compensation of the		To be	
	organization's CEO/Executive Director. Check all that apply.		1772	1176	
	related organization to establish compensation of the CEO/E	xecutive Director, but explain in Part III.			
	☐ Compensation committee ☐ Writte	n employment contract	1		
	☐ Independent compensation consultant ☐ Comp	ensation survey or study	2	TON.	
	☐ Form 990 of other organizations ☐ Appro	val by the board or compensation committee	100	. 34	
4	During the year, did any person listed on Form 990, Part VII, organization or a related organization:	Section A, line 1a, with respect to the filing			
а	Receive a severance payment or change-of-control payment	? 4a		1	
b					
C	c Participate in or receive payment from an equity-based compensation arrangement?				
	If "Yes" to any of lines 4a-c, list the persons and provide the	applicable amounts for each item in Part III.		- 53	
			100	100	
_	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organization		138		
5	For persons listed on Form 990, Part VII, Section A, line	e 1a, did the organization pay or accrue any			
	compensation contingent on the revenues of:		LINES.		
a	5	5a		√	
b	Any related organization?		-	1	
	If "Yes" on line 5a or 5b, describe in Part III.		1000		
e	For persons listed on Form 990, Part VII, Section A, line	a ta did the organization hav or accrue any	103		
0	compensation contingent on the net earnings of:	s 1a, did the organization pay of accide any	NA.	The Name of Street, or other teams, and the street, and the st	
а	The organization?		S BILLING	1	
	Any related organization?		+	1	
	If "Yes" on line 6a or 6b, describe in Part III.		N SWID	723,35	
	17 7 65 617 1116 64 67 65 65 65 65 65 65 65 65 65 65 65 65 65) HE	120	
7	For persons listed on Form 990, Part VII, Section A, line payments not described on lines 5 and 6? If "Yes," describe		THE REAL PROPERTY.	1	
8	Were any amounts reported on Form 990, Part VII, paid or ac		+	i	
9	to the initial contract exception described in Regulation				
	in Part III			1	
		0.60	0 51	SUGI	
9	If "Yes" on line 8, did the organization also follow the re	ebuttable presumption procedure described in	1000000		
	Regulations section 53.4958-6(c)?				

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)-(ii) 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.

		(B) Breakdown of	W-2 and/or 1099-MISO	compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation	
(A) Name and Title		(f) Base compensation	(ii) Bonus & incentive compensation	(III) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990	
DAVID J LEONARD, President	0	0	0	0	0	0	0		
1	(ii)	193,654	4,750	27,357	0	0	225,761		
EAMON SHELTON, Director Of	(1)	0	0	0	0	0	0	(
2 Operations	(0)	139,150	0	36,799	0	0	175,949		
MICHAEL R COLFORD, Director	(1)	0	0	0	0	0	0		
3 Of Library Services	(0)	151,898	0	23,979	0	0	175,877		
LAURA S IRMSCHER, Chief Of	(1)	13,662	0	0	0	0	13,662	(
4 Collections	(11)	122,961	0	36,548	0	0	159,509		
PRISCILLA FOLEY, Director Of	(0)	0	0	0	0	0	0		
5 Neighborhood Services	(ii)	130.042	0	41,052	0	0	171,094		
KURT MANSPERGER, Chief	(0)	0	0	0	0	0	0		
6 Technology Officer	(11)	136,623	0	30,612	0	0	167,235		
ELLEN DONAGHEY, Chief	(1)	120 200	0	0	0	0	0		
7 Financial Officer (CFO)	(ii)	139.200	0	22,685	0	0	161,885	(
	(1)					2 4.107 NV (200 to co. co. co. co.	9 TO 10 TO 1		
8	(ii)								
	(0)			i e u e su ma consta			The state of the s	CONTRACTOR OF	
9	(ii)								
	(i)	owe was a consumal		NAME OF THE PARTY	Samuranian in the				
10	(11)								
100000	(1)		All the transport of the					Starrown saw of	
11	(ii)				V				
**	0						(4) (5) (1) (1) (1) (1) (1) (1) (1)		
12	00								
	(0)						7		
13	(11)								
	(0)					1			
14	(11)								
	(1)								
15	(11)								
	(1)								
16	00								

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

Internal Revenue Service Go to www.ii
Name of the organization

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

TRUSTEES OF THE PUBLIC LIBRARY OF THE CITY OF BOSTON 04-6151731 Form 990, Part III, Line 2 - COVID-19, WHICH BEGAN IN 2020, CONTINUES TO CAUSE THE INTERRUPTION OF SERVICES. Form 990, Part III, Line 3 - DUE TO THE COVID-19 OUTBREAK IN THE UNITED STATES IN 2020 AND 2021, THE LIBRARY HAD TO KEEP AS OF MARCH 2020 ALL ITS LOCATIONS CLOSED AND HAVE MOST OF THE STAFF WORK REMOTELY FROM HOME WHEN POSSIBLE TO DO SO. THIS MEANT THAT IN ORDER TO CONTINUE TO PROVIDE SERVICES TO THE PUBLIC, SERVICES HAD TO SHIFT ONLINE AND BE DELIVERED VIA OTHER CREATIVE MEANS. AS OF JUNE 2021 THE LIBRARY HAD BEGAN SLOWLY TO OPEN BY ALLOWING SOME STAFF BACK IN THE BUILDINGS. Form 990, Part V, Line 2a - THE 498 LISTED HERE IS THE TOTAL # OF EMPLOYEES PAID UNDER THE LIBRARY DEPARTMENT FOR CALENDAR YEAR 2020. THE CITY OF BOSTON PROCESSES THE PAYROLL FOR THE LIBRARY AND FILES THE W-3 TRANSMITTAL OF WAGE AND TAX STATEMENTS. Form 990, Part V, Line 2b - THE CITY OF BOSTON PROCESSES THE LIBRARY'S ENTIRE PAYROLL. THEY ALSO FILE ALL THE REQUIRED FEDERAL EMPLOYMENT TAX RETURNS FOR THE LIBRARY UNDER THE CITY OF BOSTON FEDERAL ID. Form 990, Part VI, Section A, Line 8a - THE CLERK TAKES THE MINUTES OF ALL THE TRUSTEE MEETINGS AND COMMITTEE MEETINGS AND ONCE THE MINUTES ARE APPROVED THEY ARE POSTED ON THE LIBRARY'S WEBSITE: BPL.ORG. Form 990, Part VI, Section A, Line 8b - THE CLERK TAKES THE MINUTES OF ALL THE TRUSTEE MEETINGS AND COMMITTEE MEETINGS AND ONCE THE MINUTES ARE APPROVED THEY ARE POSTED ON THE LIBRARY'S WEBSITE: BPL.ORG. Form 990, Part VI, Section B, Line 11b - A DRAFT OF FORM 990 WAS PROVIDED TO THE GOVERNING BODY FOR REVIEW AND APPROVAL BEFORE IT WAS FILED. THIS FORM 990 IS PREPARED/REVIEWED/FILED BY THE ASSISTANT PRINCIPAL ACCOUNTANT. IT IS ALSO REVIEWED AND APPROVED BY THE SUPERVISOR OF ACCOUNTING AND THE CHIEF FINANCIAL OFFICER. ALL THE FINANCIAL NUMBERS LISTED ON THEM CORRESPONDS TO THE AUDITED FINANCIAL STATEMENT TOTALS. ACCOUNTING SCHEDULES HAVE BEEN CREATED TO BACK UP ALL THE DATA ENTERED. Form 990, Part VI, Section B, Line 12c - ALL EMPLOYEES ARE PROVIDED A SUMMARY OF THE CONFLICT OF INTEREST LAW AND MUST SIGN AND COMPLETE AN ACKNOWLEDGEMENT OF ITS RECEIPT AT TIME OF HIRE AND ANNUALLY THEREAFTER. ALSO, WITHIN THE FIRST 30 DAYS OF HIRE AND EVERY 2 YEARS THEREAFTER THEY ARE REQUIRED TO COMPLETE AN ONLINE TRAINING PROGRAM AT HTTP://WWW.MUNIPROG.ETH.STATE.MA.US/. Form 990, Part VI, Section B, Line 14 - ALL PUBLIC ENTITIES ARE COVERED BY STATE LAW. Form 990, Part VI, Section B, Line 15 - THE COMPENSATION FOR OFFICERS AND KEY EMPLOYEES ARE SET BY THE CITY OF **BOSTON'S HUMAN RESOURCES DEPARTMENT.** Form 990, Part VI, Section C, Line 19 - ALL GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS ARE AVAILABLE ON THE LIBRARY'S WEBSITE: BPL.ORG. ALL POLICIES INCLUDING THE CONFLICT OF INTEREST POLICY ARE AVAILABLE ON THE CITY'S HUB WHICH ALL EMPLOYEES HAVE ACCESS TO AND THEY ARE ALSO INCLUDED ON THE CITY OF BOSTON EMPLOYEE HANDBOOK. Form 990, Part VII, Section B, Line 1(C) - \$ AMOUNTS LISTED FOR INDEPENDENT CONTRACTORS IS FOR CALENDAR YEAR 2020. Form 990, Part VIII, Line 1c - MARATHON TEAM DONATIONS RECEIVED TOTALED \$10,610. DUE TO COVID-19 THE BOSTON MARATHON DID NOT TAKEN PLACE. Form 990, Part VIII, Line 1d - IN FY21 LISTED HERE AMOUNTS RECEIVED DIRECTLY FROM THE BOSTON PUBLIC LIBRARY FUND INC. \$2,150,339 WHICH \$226,193 IS FOR THE NORMAN B. LEVENTHAL MAP & EDUCATION CENTER INC. AND FROM THE ASSOCIATES OF THE BOSTON PUBLIC LIBRARY INC. \$942,532, GRAND TOTAL \$3,092,871. PRIOR TO FY18 THESE WERE INCLUDED ON FORM 990 PART VIII STATEMENT OF REVENUE ITEM LINE 1F "ALL OTHER CONTRIBUTIONS..."

Supplemental Information (Continued)

Form 990. Part VIII. Line 1f - ALL OTHER CONTRIBUTIONS, GIFTS, GRANTS, AND SIMILAR AMOUNTS INCLUDES \$692,332 FROM THE UNIVERSAL SERVICE SCHOOLS AND LIBRARIES PROGRAM, COMMONLY KNOWN AS "E-RATE". THESE \$ SUPPORT THE
OPERATING COSTS RELATED TO THE LIBRARY'S INFORMATION TECHNOLOGY INFRASTRUCTURE AND ARE PAID DIRECTLY TO THE LIBRARY'S VENDORS. THE E-RATE PROGRAM IS ADMINISTERED BY THE UNIVERSAL SERVICE ADMINISTRATIVE COMPANY
UNDER THE DIRECTION OF THE FEDERAL COMMUNICATIONS COMMISSION (FCC). IN PAST YEARS THE LIBRARY HAS RECEIVED THIS SUPPORT, BUT FY2021 IS THE FIRST YEAR IT HAS BEEN INCLUDED ON THE LIBRARY'S AUDITED FINANCIAL
STATEMENTS.
Form 990, Part VIII, Line 2a - 2e - AMOUNT LISTED HERE \$122,454 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 - 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.
Form 990, Part IX, Line 7 - 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 - THE \$ AMOUNT LISTED HERE IS THE PORTION OF PENSION BENEFITS THE LIBRARY REIMBURSED THE CITY OF BOSTON.
Form 990, Part IX, Line 9 - THE \$ AMOUNT LISTED HERE IS THE PORTION OF OTHER EMPLOYEE BENEFITS (HEALTH INSURANCE AND MEDICARE TAXES) THE LIBRARY REIMBURSED THE CITY OF BOSTON.
Form 990, Part IX, Line 10 - 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 21 - PAYMENTS TO AFFILIATES-\$26,193 WAS PAID TO THE NORMAN B. LEVENTHAL MAP & EDUCATION CENTER INC., THIS MONEY CAME FROM THE BOSTON PUBLIC LIBRARY FUND INC.
Form 990, Part IX, Line 23 - INSURANCE TOTAL OF \$44,863 CONSISTS OF CAR INSURANCE \$31575, EXECUTIVES LIABILITY INSURANCE \$9132 AND DISHONEST EMPLOYEE INSURANCE \$4,156.
Form 990, Part XI, Line 9 - 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 DIRECLY TO BPL VENDORS AND IS INCLUDED IN THE BPL'S AUDITED FINANCIAL STATEMENTS.
FOR BPL'S FISCAL YEAR 2021 \$692,332 HAS BEEN PAID OUT TO BPL VENDORS.

Schedule O, Statement 1

TRUSTEES OF THE PUBLIC LIBRARY OF THE CITY OF BOSTON

Form: Form 990 (2020) 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.

Page: 2

TRUSTEES OF THE PUBLIC LIBRARY OF THE CITY OF BOSTON

Part III, Line 4a

Form: Form 990 (2020) EIN: 04-6151731

First Program Service Accomplishments Description

Description

fiscal year, the Boston Public Library helped 119,595 Massachusetts residents - adults, children, and teens - sign up for new library cards, hosted 9,490 free computer sessions, enabled 37,250 free wireless internet sessions, and had more than 384,519 visitors. 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 !T 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. Book Bundles - With patrons unable to enter branch libraries and browse for the books they needed, library staff quickly took to creating bundles of books based on genre, subject, and reading level to have on hand for circulation. For example, if a parent of a four-year old came to a branch and asked for some books for their child, the library could respond with a pre-selected bundle of books that could just be checked out. Similarly, if a patron wanted some dystopian science fiction and a few graphic novels, that could be supplied as well. Library staff created an innovative way to get patrons what they needed without necessitating in-person browsing, Craft Kits - Many of the programs geared toward children involved a craft, While librarians focused on incorporating simple crafts into their virtual storytimes that only necessitated basic household items, they also recognized that there was a need to provide materials for crafts, especially to households that might not have this type of material on-hand. Children's Librarians in branches have been creating kits with craft materials related to storytimes and distributing them through BPL to Go and at Storywalks around the City. Digital Equity Initiatives: As part of BPL to Go, the BPL's program of services available during the pandemic, BPL launched the Public Computer Access program, which allowed residents to sign up for a two-hour appointment to use library computers in a socially distanced space within the Central Library in Copley Square. At the same time, working with the Mayor's Office of New Urban Mechanics, BPL also expanded its Wi-Fi access to create the Outdoor Wi-Fi Program, providing 24-hour outdoor internet access at nine BPL branch locations across the city, allowing users to socially distance while accessing the Internet for free. BPL also created and rolled out Printing To Go, a free print-on-demand service, to all open BPL branches. Patrons can upload documents they need printed by filling out a form at bpl.org/printing-to-go, selecting their location, and picking up their print jobs 72 hours later at the branches, or 24 hours later at the Central Library in Copley Square. BPL's most recent expansion of its digital initiatives came with the recently launched Connectivity Kits. Connectivity Kits are designed to help patrons bridge the digital divide by providing free, reliable internet access in any location. The kits include a 14" Chromebook, a hotspot, and a mouse, as well as the necessary chargers and a quick start guide, all in a BPL bag for easy access and transportation. While the BPL continues to offer Public Computer Access at the Central Library in Copley Square, Connectivity Kits extend this service into patrons' homes and neighborhoods, on a schedule that works for them.

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

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

► Attach to Form 990.

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

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

Open to Public Inspection

Name of the organization

TRUSTEES OF THE PUBLIC LIBRARY OF THE CITY OF BOSTON

04-6151731

OMB No. 1545-0047

2020

(e) Name, address, and EIN (if applicable) of disregarded entity		Prir		(c) egal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	Direct con entit	rtrolling
(1)								
(2)						-		
(3)						-		
(4)								
(5)								
(6)								
Part II Identification of Related Tax-Exempt Organizations one or more related tax-exempt organizations do	ations. Cor	mplete if	the organization ar	nswered "Yes" or	Form 990, Par	t IV, line 34, bed	cause it h	ad
(a) Name, address, and EIN of related organization	(1:		(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controllin	g Section con	(a) 512(b)(13) trolled sby?
							Yes	No
(1) BOSTON PUBLIC LIBRARY FUND INC (04-3150560) 700 BOYLSTON STREET, BOSTON, MA 02116	FUNDRAISI BPL	NG FOR	MA	501(c)(3)	7	N/A		1
(2) ASSOCIATES OF THE BOSTON PUBLIC LIBRARY INC (04-290082	FUNDRAISI BPL	NG FOR	MA	501(c)(3)	7	N/A		1
(3) THE CITY OF BOSTON (04-6011380) ONE CITY HALL SQUARE, BOSTON, MA 02116	CITY GOVE	RNMENT	MA	501(c)(3)	6	N/A		1
(4)								
(5)								
(6)							1	
m)				-		+	-	

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

Cal. No. 50135Y

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.													
(e) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicite (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512 – 514)	(f) Share of total income	(g) Share of end-of- year assets	(I Disprop alloca		(i) Code V UBI amount in box 20 of Schedule K-1 (Form 1065)	partner?		(k) Percentage ownership	
							Yes	No		Yes	No		
.(1)													
(2)													
(3)													
(4)													
(5)							e.t						
(6)													
.(7)													

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

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

Schedu	e R (Form 990) 2020																				-	Page 3
Part	Transactions With Related Organizations. Complete if the organization answer	vere	ed "	Ye	s"	on	Fo	rm	990), P	art	IV,	line	34	, 35	ōb,	or 3	36.				
Not	c: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.																				Yes	No
1	During the tax year, did the organization engage in any of the following transactions with one	or	mor	e re	elat	ed	org	ani	zatio	ons	liste	d ir	ı Pa	rts	11-11	/?				dicity,	771	担功
a	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity																			1a		1
b	Gift, grant, or capital contribution to related organization(s)																			1b		1
С	Gift, grant, or capital contribution from related organization(s)																			1c	1	
d	Loans or loan guarantees to or for related organization(s)																			1d		1
8	Loans or loan guarantees by related organization(s)																			1e		1
f	Dividends from related organization(s)																			11		1
	Sale of assets to related organization(s)																			19	_	
9 h	Purchase of assets from related organization(s)																			1h		-
п																						7
. !	Exchange of assets with related organization(s)																			11		_
J	Lease of facilities, equipment, or other assets to related organization(s)	•	•	•	•		•		٠	٠	٠			٠	٠	٠	•		1	1j	NA.	1
k	Lease of facilities, equipment, or other assets from related organization(s)																			1k		1
-	Performance of services or membership or fundraising solicitations for related organization(s) .									,									11		7
m	Performance of services or membership or fundraising solicitations by related organization(s																			1m	1	
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)																			1n	1	
٥	Sharing of paid employees with related organization(s)																			10		1
_	orienting or paid originary out that read original and or	•	٠	•	•	•	•		٠	٠	•			٠	٠	٠	•	•		- 1	1.927	E CLY
р	Reimbursement paid to related organization(s) for expenses																			1p	20022	1
q	Reimbursement paid by related organization(s) for expenses																			10		7
ч	neimbulsement paid by related organization(s) for expenses	•	•	•	-	•	•			•				•	٠	٠	•	•	•	-14.		
r	Other transfer of cash or property to related organization(s)																			1r	1	2372528
S	Other transfer of cash or property from related organization(s)																			19		1
2	If the answer to any of the above is "Yes," see the instructions for information on who must																					
	if the answer to any of the above is Tes, see the instructions for information on who must of	T	piei			ши	, in	CILI	ing	CO	_	d re	nau	ons	nip	s au	ia tr	aris			921101	us.
	(a) Name of related organization	l		Fran type					4	lmou	(c)	volv	ad		Me	thod	of d	eter	(d) minin	g amoui	nt invo	ved
B	STON PUBLIC LIBRARY FUND INC	c			-			+				2,15	0,3:	19 4	ACT	UAL	\$					=0
(1)		_					_	4		_				4								
(2)	ISTON PUBLIC LIBRARY FUND INC	n											8.04	16 F	AIR	MA	IRKI	ETN	VAL	JΕ		
AS	SOCIATES OF THE BOSTON PUBLIC LIBRARY INC	С						7				94	2,5	12 /	CT	UAL	\$	_				-
(3)	SOCIATES OF THE BOSTON PUBLIC LIBRARY INC	n			_		_	+		_	-	-4	1 11	10 5	AIC	844	DV	ET	VALI	IC.		_
W. C.	SOURCES OF THE BOSTON POBLIC LIDIORITY INC	"											1, 14	2	AUR	. IVIP	were		WL	JE		
(4)		+	-	_	_	_		+	_	_		_		+	_	_		_				
(5)		1						4		_				1								
(4)																						

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 pross revenue) that was not a related propagation. See instructions reporting exclusion for certain investment partnerships.

(e) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	gn income (related, section total income end		(g) Share of end-of-year assets	Disprop	(h) (i) Code V – UBI amount in box 2 of Schedule K-1 (Form 1065)		General or managing partner?		(k) Percentage ownership		
			sections 512-514)	Yes	No			Yes	No		Yes	No	
(1)								T					
(2)								\top					
(3)								T					
(4)								t					
(5)													
(6)								†					
(7)								†					
(8)						-0.000		†					
(9)			1390										
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Part VII	Supplemental Information Provide additional information for responses to questions on Schedule R. See instructions.
Schedule R	t, Part V, Line 1c - Gift, Grant, or capital contribution to related organization(s)-The Boston Public Library received \$ 2,150,339
	oston Public Library Fund Inc. and \$ 942,532 from The Associates Of The Boston Public Library to support library operations.
	operates as a separate department within the City Of Boston operations, with the City paying most of its costs. In fiscal year
	brary's expenses it paid on its own totaled about 10 million and as a department of the City general fund about 39 million.
Schedule R	, Part V, Line 1n - Sharing of facilities, equipment, mailing lists, or other assets related with related organization(s)-The Boston
	ary provided at the Copley location free rent space to The Boston Public Library Fund Inc. with an estimated fair market value of
	and to the Associates Of The Boston Public Library Inc. with an estimated fair market value of \$11,139.00. Although not
	a related organization to the Library, The Norman B. Leventhal Map & Education Center Inc. was also provided free rent space
	ey location with an estimated fair market value of \$163,630.50.
at the copie	ey (Ceation with an estimated fair market value of \$103,000.50.
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