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Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-0047

Department of the Treasury ▶The organization may have to use a copy of this return to satisfy state reporting requirements Internal Revenue Service Inspection calendar year, or tax year beginning 07-01-2009 and ending 06-30-2010 A For the 2009 D Employer identification number B Check if applicable BROOKLYN PUBLIC LIBRARY use IRS Address change 11-1904261 label or Doing Business As E Telephone number print or Name change type. See Specific (718) 230-2456 Initial return Number and street (or P O box if mail is not delivered to street address) Room/suite Instruc-**G** Gross receipts \$ 143,477,142 Terminated tions. City or town, state or country, and ZIP + 4 BROOKLYN, NY 11238 Amended return Application pending Name and address of principal officer Is this a group return for JOHN VITALI affiliates? 10 GRAND ARMY PLAZA BROOKLYN, NY 11238 Γ Yes Γ No H(b) Are all affiliates included? If "No," attach a list (see instructions) Tax-exempt status Group exemption number 🕨 Website: ► WWW BROOKLYNPUBLICLIBRARY ORG M State of legal domicile NY L Year of formation 1896 Part I Summary Briefly describe the organization's mission or most significant activities SEE ATTACHMENT 2 Activities & Governance 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) \cdot . Number of independent voting members of the governing body (Part VI, line 1b) $\,$. $\,$. 35 1,828 Total number of employees (Part V. line 2a) . . . 1,500 Total number of volunteers (estimate if necessary) . Total gross unrelated business revenue from Part VIII, column (C), line 12 Net unrelated business taxable income from Form 990-T, line 34 $\,$. **Prior Year Current Year** 8 Contributions and grants (Part VIII, line 1h) . 105,035,094 101,415,702 Program service revenue (Part VIII, line 2g) . 2,790,723 2,374,063 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . -2,993,805 1,998,411 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 383,818 21,892 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12 105,215,830 105,810,068 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 0 0 0 0 14 Benefits paid to or for members (Part IX, column (A), line 4) . . Salaries, other compensation, employee benefits (Part IX, column (A), lines 5 15 80.458.163 79.529.880 **Expenses** 16a Professional fundraising fees (Part IX, column (A), line 11e) . . 0 0 Total fundraising expenses (Part IX, column (D), line 25) $\blacktriangleright \frac{1,741,681}{}$ Ь **17** Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) . 28,963,039 27,387,989 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 109,421,202 106,917,869 19 Revenue less expenses Subtract line 18 from line 12 . -4.205.372 -1,107,801 t Assets or | nd Balances | **Beginning of Current End of Year** Year 20 Total assets (Part X, line 16) . 59,581,917 63,200,628 Total liabilities (Part X, line 26) . . 18,905,826 21,709,177 22 40,676,091 41,491,451 Net assets or fund balances Subtract line 21 from line 20 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 ***** 2009-12-01 Here Signature of officer JOHN VITALI DEPUTY DIRECTOR BUSINESS ADMINISTR Type or print name and title Preparer's signature Date Check if Preparer's identifying number

EISNERAMPER LLP

750 THIRD AVENUE

May the IRS discuss this return with the preparer shown above? (see instructions) $\,$.

NEW YORK, NY 100172703

Paid

Preparer's

Use Only

Firm's name (or yours

address, and ZIP + 4

if self-employed),

┌ Yes ┌ No

EIN ▶

empolyed 🕨 🛘

Part III Statement of Program Service Accomplishments

1 [Briefly	describe	the	organization	's	missioi
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IT IS THE MISSION OF THE LIBRARY TO ENSURE THE PRESERVATION AND TRANSMISSION OF SOCIETY'S KNOWLEDGE, HISTOR	Y
AND CULTURE, AND TO PROVIDE THE PEOPLE OF BROOKLYN WITH FREE AND OPEN ACCESS TO INFORMATION FOR EDUCATIOI	N,
RECREATION AND REFERENCE	

4e	Total program service expense	s► \$ 100,862,8	7 5		
	(Expenses \$	including grants o	of\$) (Revenue \$)
4d	Other program services (Desc				
	Special programs functions provide pr school and school age children Childr services are available in locations thro located in downtown Brooklyn The p and events throughout all Library loca exhibitions, and cultural and historic of holdings. During the same period staff	en's services include story hou oughout Brooklyn A Business li rograms and exhibitions depart itions The free public program elebrations In FY 2010 the Sp	r, and homework assistance brary providing services to sr tment provide inspiring thoug s and events include poetry i ecial Programs generated 29	reading clubs Free adult literacy, E nall businesses, entrepreneurs and tht provoking and entertaining cultu readings, author visits, literary discu 1,000 circulation and renewals of lib	SOL and Pre-GED educational the corporate community are ral and educational programs ssions, concerts, films series, ar irary materials and 76,000
4c	(Code) (Expe	enses \$ 6,051,766	including grants of \$	0) (Revenue \$	142,444)
	The Neighborhood Libraries provide fr mile of nearly every Brooklyn residen million+ books, DVD's videos and CD' advisory and references services Libr books and materials via its online cat from prior year and 3.4 million holding 711,000 participants	t Library services include use is covering topics for all ages a ary users can also access Libra alog In FY 2010 the Neighbort	of Internet and PC software and interests, programs cover ry information and resources nood Libraries generated 16 6	via 900+ public computers, browsi ring literary, technology instruction a via the Library's website, and sear 5 million circulation and renewals of	ng and borrowing privileges for ind cultural topics, readers th for, request and renew librar library materials, up 2 1 million
4b	(Code) (Expe			0) (Revenue \$	1,733,066)
	The Central Library provides subject s patrons In addition, the Central Libra access to historic resources to researc circulation and renewals of library ma 3,500 programs to 80,000 participants	ry offers collections and service hers around the world, local st terials and 783,000 holdings. I	es dedicated to the Brooklyn udents, genealogists, journal During this same period, staff	Collection and world languages The list etc In FY 2010 the Central Libra attended to 395,000 reference inqu	e Brooklyn Collection provides ry generated 2 6 million
4a	(Code) (Expe			0) (Revenue \$	498,553)
4	Describe the exempt purpose as Section 501(c)(3) and 501(c)(4) allocations to others, the total e) organizations and sect	ıon 4947(a)(1) trusts a	re required to report the amo	•
	If "Yes," describe these change	s on Schedule O			
3	Did the organization cease cond services?			nducts, any program	┌ Yes ┌ No
	If "Yes," describe these new ser	vices on Schedule O			
2	the prior Form 990 or 990-EZ?			which were not listed on	┌ Yes ┌ No

Checklist of Required Sched

	•		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	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? 🕏	2	Yes	
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		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	Yes	
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 💆	8	Yes	
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasi- endowments? <i>If</i> " <i>Yes," complete Schedule D, Part V</i>	10	Yes	
11	Is the organization's answer to any of the following questions "Yes"? If so,complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	Yes	
	◆ Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.			
	◆ 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.			
	◆ 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.			
	◆ 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.			
	◆ Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
	◆ 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? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	Yes	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			!
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		N o
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? <i>If</i> " <i>Yes,"</i> complete Schedule F, Part II	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III	16		No
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	17		No
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	Yes	
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		No
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		No

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		N o
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		N o
23	Did the organization answer "Yes" to Part VII, Section A, questions 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	Yes	
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 questions 24b-24d and complete Schedule K. If "No," go to line 25	24a		N o
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
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) and 501(c)(4) 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		No
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		Νο
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
		28a		No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		N o
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? If "Yes," complete Schedule L, Part IV	28c		N o
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		N o
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		N o
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		N o
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? <i>If</i> "Yes," complete Schedule R, Part I	33		N o
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		N o
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		N o
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		N o
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		N o
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
		F	orm 990	(2009)

Part V State	ements Regarding (Other IRS Filings	and Tax Compliance
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			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable		103	
ь	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the calendar year ending with or within the year covered by this return			
Ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		Νο
Ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3Ь		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? \cdot .	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		N o
	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
ь	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			

10 GRAND ARMY PLAZA BROOKLYN, NY 11238 (718) 230-2456

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Se	ction A. Governing Body and Management					
			Yes	No		
_						
1a	Enter the number of voting members of the governing body 1a 35					
ь	Enter the number of voting members that are independent 1b 35					
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		Νο		
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		Νο		
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		No		
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		Νo		
6	Does the organization have members or stockholders?	6		Νο		
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	Yes			
ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		Νο		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following					
а	The governing body?	8a	Yes			
ь	Each committee with authority to act on behalf of the governing body?	8b		Νο		
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the					
<u> </u>	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Νo		
	ction B. Policies (This Section B requests information about policies not required by the Internal venue Code.)					
	· ······		Yes	No		
10a	Does the organization have local chapters, branches, or affiliates?	10a		Νο		
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b				
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?					
11A	Describe in Schedule O the process, if any, used by the organization to review the Form 990					
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes			
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes			
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes			
13	Does the organization have a written whistleblower policy?	13	Yes			
14	Does the organization have a written document retention and destruction policy?	14	Yes			
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					
а	The organization's CEO, Executive Director, or top management official	15a	Yes			
b	Other officers or key employees of the organization	15b		Νο		
	If "Yes" to line a or b, describe the process in Schedule O (See instructions)					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	16-		N -		
h	taxable entity during the year?	16a		Νο		
	participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b				
Se	ction C. Disclosure					
17	List the States with which a copy of this Form 990 is required to be filed►NY					
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)					
	(3)s only) available for public inspection. Indicate how you make these available. Check all that apply of which website. Another's website. Upon request					
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table					
20	State the name, physical address, and telephone number of the person who possesses the books and records of the VINTRESS BROWN	ie orga	nızatıor	n -		

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

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. Use Schedule J-2 if additional space is needed

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees. 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, or 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

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if the organization did i	not compen	sate any	y curi	rent	or fo	rmer	ffice	r, dırector, trustee	or key employee			
(A) Name and Title	(B) Average hours	Posi t	(C tion (hat a	ched	ckal)	I		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other		
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations		
See add'l data												

1b	Total .											١	1,615,375	C)	151,733

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization 47

			Yes	No		
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If</i> "Yes," complete Schedule J for such individual	3		Νο		
4	organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such					
	ındıvıdual	4	Yes			
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person	5		No		

Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

(A) Name and business address	(B) Description of services	(C) Compensation
XEROX GLOBAL SERVICES PO BOX 828187 PHILADELPHIA, PA 191828187	TECHNOLOGY CONSULT	1,422,413
PFEIFFER PARTNERS ARCHITECT 62 WHITE STREET SUITE 5E NEW YORK, NY 10013	ARCHITECT	260,778
AFFILIATED COMPUTER SERVICES PO BOX 201322 DALLAS, TX 75320	IT CONSULTANTS	290,608
INNOVATIVE INTERFACES INC 5850 SHELLMOUND WAY EMERYVILLE, CA 94608	IT CONSULTANTS	221,039
IVY GROUP 123 EAST MAIN ST CHARLOTTESVILLE, VA 22902	MNG CONSULTANT	255,210
2 Total number of independent contractors (including but not limited to those listed above) \$100,000 in compensation from the organization ►5) who received more than	

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Form 9	•	<u> </u>						Page 9
Part \	/1111	Statement o	of Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
क क	1a	Federated cam	paigns 1a					
E E	ь	Membership du	es 1b					
ಶ್ಮ	c	Fundraising eve	ents 1c	327,821				
स इस्	d	_	rations 1d					
<u></u>	e	Government grants		96,101,350				
Si.	_	_		4,986,531				
美量	"	similar amounts no	ons, gifts, grants, and 1f ot included above					
Contributions, gifts, grants and other similar amounts	g	3.	butions included in 18,499					
<u> </u>	h	IIIIes Ia-II \$ _		▶-	101,415,702			
<u> </u>	"	Total. Add filles	S 1d-11		101,113,702			
e L				Business Code				
Program Service Revenue	2a	FINES AND FEE		900,099	1,760,260	1,760,260		
22	Ь	DUPLICATE CARDS	· · · · · · · · · · · · · · · · · · ·	900,099	51,098	51,098		
2 0	C	BOOK SALES		900,099	72,374	72,374		
38	d	XEROX REVENUES		900,099	316,377	316,377		
Ē	e	MISCELLANEOUS		900,099	173,954	173,954		
Ž	f	All other progra	am service revenue					
ž	g	Total. Add lines	s 2a-2f		2,374,063			
	3		ome (including divident					
		and other simila	aramounts)	▶	1,578,387			1,578,387
	4	Income from inves	tment of tax-exempt bond p	proceeds 🕨	0			
	5	Royalties			0			
			(ı) Real	(II) Personal				
	6a	Gross Rents						
	b	Less rental expenses						
	c	Rental income or (loss)						
	d		me or (loss)					
			(ı) Securities	(II) O ther				
	7a	Gross amount from sales of	38,026,112					
		assets other than inventory						
	ь	Less cost or	37,606,088					
		other basis and sales expenses						
	С	Gain or (loss)	420,024					
	d	Net gain or (los	s)	▶	420,024			420,024
٨s	8a	Gross income f events (not inc						
Other Revenue			,821					
 ≥			reported on line 1c)					
æ		See Part IV, lin	a	47,088				
je i	ь	Less direct ex	penses b	60,986				
ᅙ	c		· (loss) from fundraising (-13,898			-13,898
	9a		rom gaming activities					
		See Part IV, lin						
	ь	loss director	apenses b					
	c		loss) from gaming activ	vities▶	0			
		Gross sales of						
		returns and allo						
			а					
	b	-	oods sold b	<u></u>				
	С		loss) from sales of inve		0			
	11-	Miscellaneous		Business Code	35,790			35,790
	11a	CAFETERIA SA	4 LES		33,730			33,790
	b							
	C .							
	d	All other reven						
	e	Total. Add lines	5 11a-11d	· · · · •	35,790			
	12	Total revenue	See Instructions	▶				
	1				105,810,068	2,374,063		2,020,303

Part IX Statement of Functional Expenses
Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	Section 501(c)(3) and 501(c)(4) organizations mu			(D)	
	ll other organizations must complete column (A) but are not required to		(B) (B)	(C)	(D)
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S $$ See Part IV , line 21 $$	0			
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	0			
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	906,776	269,632	466,992	170,152
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			
7	Other salaries and wages	56,414,682	53,600,378	2,014,303	800,001
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	4,012,130	3,787,032	177,199	47,899
9	Other employee benefits	13,052,603	12,320,290	576,480	155,833
10	Payroll taxes	5,143,689	4,851,703	202,890	89,096
11	Fees for services (non-employees)				
а	Management	0			
b	Legal	317,484	162,185	151,567	3,732
С	Accounting	84,800		84,800	
d	Lobbying	54,000		54,000	
e	Professional fundraising See Part IV, line 17	0			
f	Investment management fees	83,398		83,398	
g	Other	2,082,605	1,845,338	50,730	186,537
12	Advertising and promotion	313,654	242,757	17,554	53,343
13	Office expenses	3,785,458	3,658,771	97,453	29,234
14	Information technology	0			_
15	Royalties	0			
16	Occupancy	2,162,858	2,146,614	16,216	28
17	Travel	202,278	193,634	6,617	2,027
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	0			
20	Interest	0			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	1,584,957	1,584,957		
23	Insurance	531,520	426,556	104,964	
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
а	BOOKS AND LIBRARY MATERIALS	12,275,768	12,275,768		
b	SUPPLIES	1,958,808	1,694,715	94,255	169,838
С	STAFF DEVELOPMENT/TRAINING	420,394	394,832	22,511	3,051
d	REPAIRS AND MAINTENANCE	1,290,318	1,213,607	72,301	4,410
e	SCHOLAR FUND AND STAFF RECOGN	30,720	28,423	2,297	
f	All other expenses	208,969	165,683	16,786	26,500
25	Total functional expenses. Add lines 1 through 24f	106,917,869	100,862,875	4,313,313	1,741,681
26	Joint costs. Check here ► ☐ If following SOP 98-2 Complete this line only if the organization reported in		· ,		
	column (B) joint costs from a combined educational campaign and fundraising solicitation				

Pa	rt X	Balance Sheet					
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing			14,500	1	15,300
	2	Savings and temporary cash investments			9,131,038	2	5,973,552
	3	Pledges and grants receivable, net			4,553,841	3	7,453,342
	4	Accounts receivable, net				4	
	5	Receivables from current and former officers, directors, trustees highest compensated employees Complete Part II of	s, key	employees, and			
		Schedule L				5	
	6	Receivables from other disqualified persons (as defined under s persons described in section $4958(c)(3)(B)$ Complete Part II of		1 4958(f)(1)) and			
		Schedule L				6	
ssets	7	Notes and loans receivable, net				7	
8	8	Inventories for sale or use				8	
⋖	9	Prepaid expenses and deferred charges			323,349	9	578,366
	10a	Land, buildings, and equipment cost or other basis <i>Complete</i> Part VI of Schedule D	10a	23,752,681			
	ь	Less accumulated depreciation	10b	7,122,092	16,521,821	10c	16,630,589
	11	Investments—publicly traded securities			2,208,136	11	2,233,594
	12	Investments—other securities See Part IV, line 11		•	26,735,633	12	30,230,741
	13	Investments—program-related See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11			93,599	15	85,144
	16	Total assets. Add lines 1 through 15 (must equal line 34)			59,581,917	16	63,200,628
	17	Accounts payable and accrued expenses .			16,976,544	17	19,714,491
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
<u>ē</u>	21	Escrow or custodial account liability Complete Part IV of Schedul	le D .	•		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified					
ä		persons Complete Part II of Schedule L		•		22	
	23	Secured mortgages and notes payable to unrelated third parties				23	
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities Complete Part X of Schedule D			1,929,282	25	1,994,686
	26	Total liabilities. Add lines 17 through 25			18,905,826	26	21,709,177
مي		Organizations that follow SFAS 117, check here \blacktriangleright $\overline{ u}$ and comp	lete li	ines 27			
9		through 29, and lines 33 and 34.					
<u>a</u>	27	Unrestricted net assets			37,346,614		34,972,647
Fund Balance	28	Temporarily restricted net assets			1,350,723	_	4,035,104
Ĕ	29	Permanently restricted net assets			1,978,754	29	2,483,700
Fu		Organizations that do not follow SFAS 117, check here ► and and a second secon	nd com	ıplet e			
or	30	lines 30 through 34.				30	
Assets	30	Capital stock or trust principal, or current funds				31	
15.5	31 32	Paid-in or capital surplus, or land, building or equipment fund Retained earnings, endowment, accumulated income, or other fu				32	
	33	Total net assets or fund balances	iiius		40,676,091	33	41,491,451
Net							
l	34	Total liabilities and net assets/fund balances			59,581,917	34	63,200,628

			Yes	No
1	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Νo
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both			
	▼ Separate basis			
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	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b	Yes	

Form **990** (2009)

OMB No 1545-0047

Inspection

SCHEDULE A (Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Name of the organization BROOKLYN PUBLIC LIBRARY

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

Public Charity Status and Public Support

Attach to Form 990 or Form 990-EZ. See separate instructions. **Employer identification number**

11-1904261

Pai	rt I	Reas	on for Pul	blic Charity Stat	us (All org	anızatıons	must comp	lete this par	t.) See inst	ructions	
The o	rganı			e foundation because							
1	Г	A churc	h, conventio	on of churches, or as	sociation of	churches s	ection 170(b))(1)(A)(i).			
2	Г	A schoo	ol described	ın section 170(b)(1)	(A)(ii). (Att	tach Schedu	le E)				
3	Г			perative hospital serv				n 170(b)(1)(A	(iii).		
4	Γ	A medic	al research	organization operatery, and state						(A)(iii). Ent	er the
5 6 7 8 9		A feder An orga describ section A comm An orga receipts	170(b)(1)(A al, state, or inization that ed in 170(b)(1)(A nunity trust inization that is from activi	erated for the benefit A)(iv). (Complete Palocal government or a normally receives a A)(vi) (Complete Paldescribed in section tormally receives ties related to its exiss investment incom	ort II) government: a substantia ort II) 170(b)(1)(A (1) more the empt function	al unit descr I part of its s A)(vi) (Com an 331/3% c ons—subject	ribed in sectio support from iplete Part II if its support to certain ex	on 170(b)(1)(a government) from contributed	A)(v). al unit or from tions, membe 1 (2) no more	n the genera rship fees, a than 331/39	l public and gross 6 of
		acquire	d by the org	anızatıon after June 3	30,1975 S	ee section 5	09(a)(2). (Co	omplete Part I	II)		
10	Γ	Anorga	nızatıon org	anized and operated	exclusively	to test for p	ublic safety	Seesection 50	09(a)(4).		
11	Γ	one or r	nore publicly	anized and operated y supported organiza oes the type of supported by Type II	tions descri orting organi	bed in section and c	on 509(a)(1)	or section 50 s 11e through	9(a)(2) See	section 509	
e	Γ	other th		x, I certify that the o							
f				eceived a written de	termination	from the IRS	Sthatitis a T	Гуре I, Туре I	I or Type III	supporting	organizatio <u>n,</u>
		check t		006, has the organiz	intion accon	tad any gift	or contribution	an fram any of	th a		J
g			g persons?	000, has the organiz	астоп ассер	ted any gnt	or contribution	on nom any or	tile		
		(i) a pe	rson who dır	ectly or indirectly co	ntrols, eithe	eralone or to	gether with p	persons descr	ıbed ın (ıı)		Yes No
		and (III)	below, the g	joverning body of the	the support	ted organıza	tion?			11g(i)	
		(ii) a fa	mıly membe	r of a person describ	ed ın (ı) abo	ve [?]				11g(ii)	
		(iii) a 3	5% controll	ed entity of a person	described i	n (ı) or (ıı) a	bove?			11g(iii	<u> </u>
h		Provide	the followin	g information about t	he supporte:	d organizati	on(s)				
				I	I				1		T
supported EIN lines 1- 9 abov organization or IRC section				Type of	(iv) Is the organization in col (i) listed in your governing document?		Did you no organiza col (i) o suppo	otify the tion in of your	(vi) Is the organization in col (i) organized in the US?		(vii) A mount of support?
				instructions))	Yes	No	Yes	No	Yes	No	1
Total											

Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I.)

_	(Complete only if y	ou checkeu the	box on line 3,	7, 01 6 01 Part	1.)			
	ection A. Public Support	1	I	1				
Cal	endar year (or fiscal year beginning	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	9	(f) Total
_	in)						-+	
1	Gifts, grants, contributions, and membership fees received (Do							
	not include any "unusual	92,352,121	93,903,989	104,931,668	105,035,094	101,41	5,702	497,638,574
	grants ")							
2	Tax revenues levied for the							
2	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							
4	Total. Add lines 1 through 3	92,352,121	93,903,989	104,931,668	105,035,094	101,41	5.702	497,638,574
5	The portion of total contributions	, , , , , , , , , , , , , , , , , , , ,		,			+	
3	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							497,638,574
S	ection B. Total Support		l .					
	endar year (or fiscal year							
-	beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009)	(f) Total
7	A mounts from line 4	92,352,121	3,994,761	104,931,668	105,035,094	101,41	5,702	497,638,574
8	Gross income from interest,	,,	-,,					
8	dividends, payments received							
	on securities loans, rents,	2,765,590	3,994,761	3,064,606	-2,993,805	1.99	8,411	8,829,563
	royalties and income from	2,7.00,050	3,33.,732	5,00.,000	2,550,000	_,	,	0,023,000
	similar sources							
9	Net income from unrelated						-	
9	business activities, whether or							
	not the business is regularly							
	carried on							
10	Other income (Explain in Part							
10	IV) Do not include gain or loss							
	from the sale of capital	285,006	320,692	392,335	388,458	3.	5,790	1,422,281
	assets							
11	Total support (Add lines 7							
	through 10)							507,890,418
12	Gross receipts from related activi	ties, etc (See ins	tructions)			12		11,361,700
				d blood Countly on	6.60			
13	First Five Years If the Form 990 is check this box and stop here	for the organizat	ion's first, secon	a, thira, fourth, or	TITTE tax year as a	501(c)(3) c	organi	zation,
	check this box and stop here							F-1
-	ection C. Computation of Pu	blic Support	Dorcontago					
	•			- 11 l (f)		1		
14	Public Support Percentage for 200	19 (line 6 column	(r) aivided by line	e 11 column (r))		14		97 981 %
15	Public Support Percentage for 200	08 Schedule A , Pa	art II, line 14			15		96 856 %
16a	33 1/3% support test-2009. If th	e organization did	not check the bo	ox on line 13, and	line 14 is 33 1/3%	or more, c	heck t	:his box
	and stop here. The organization qu	-				,		▶ ▼
ь	33 1/3% support test-2008. If th	e organization did	not check the b	ox on line 13 or 10	6a, and line 15 is .	3 3 1/3% or	more,	check this
	box and stop here. The organization	on qualifies as a p	ublicly supported	dorganization	•		,	▶ □
17a	10%-facts-and-circumstances tes			-	ne 13, 16a, or 16l	and line 1	4	•
	is 10% or more, and if the organiz							
	in Part IV how the organization me							ted
	organization				•			▶ □
ь	10%-facts-and-circumstances tes	t—2008. If the ord	janization did not	check a box on li	ne 13, 16a, 16b, o	or 17a and I	ıne	•
	15 is 10% or more, and if the orga							
	Explain in Part IV how the organiz	ation meets the "	facts and circum:	stances" test The	e organization qua	lifies as a p	ublicly	1
	supported organization					•		▶ ┌
18	Private Foundation If the organiza	ition did not chec	k a box on line 13	3, 16a, 16b, 17a c	or 17b, check this	box and see	9	
	instructions			•				▶ □

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

	(Complete only if you	cnecked the	box on line 9 o	r Part I.)			
	ction A. Public Support				1	T	ı
Cale	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
_	include any "unusual grants ")						
2	Gross receipts from admissions, merchandise sold or services						
	performed, or facilities furnished in						
	any activity that is related to the						
	organization's tax-exempt						
3	purpose Gross receipts from activities that				+		
3	are not an unrelated trade or						
	business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its behalf						
5	The value of services or facilities						
_	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5				-		
7a	A mounts included on lines 1, 2, and 3 received from disqualified						
	persons				1		
ь	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						
8	Public Support (Subtract line 7c						
	from line 6)						
	ction B. Total Support		1			1	Γ
Cale	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	A mounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
ь	Unrelated business taxable						
	ıncome (less section 511 taxes)						
	from businesses acquired after						
_	June 30, 1975 Add lines 10a and 10b						
c 11	Net income from unrelated						
	business activities not included						
	ın lıne 10b, whether or not the						
	business is regularly carried on						
12	Other income Do not include gain or loss from the sale of						
	capital assets (Explain in Part						
	IV)						
13	Total support (Add lines 9, 10c,						
14	11 and 12) First Five Years If the Form 990 is for	or the organizat	lon's first, second	L third fourth or	l fifth tax vear as a	1 a 501(c)(3) organ	l uzation
	check this box and stop here	or the organizat		., 4,	men tax your as t	(c)(c) c.gu.	▶ ┌
	ction C. Computation of Publ						
15	Public Support Percentage for 2009	(line 8 column	(f) divided by line	13 column (f))		15	
16	Public support percentage from 200	8 Schedule A , F	art III, line 15			16	
Se	ction D. Computation of Inve	stment Inco	ome Percenta	ge			
17	Investment income percentage for 2	009 (line 10c c	olumn (f) dıvıded	by line 13 columi	n (f))	17	
18	Investment income percentage from	2008 Schedule	A, Part III, line 1	L 7		18	
19a	33 1/3% support tests—2009. If the	organization di	d not check the b	ox on line 14, and	d line 15 is more	than 33 1/3% and	d line 17 is not
	more than 33 1/3%, check this box a	ind stop here. T					
L	organization 33 1/3% support tests—2008. If the	► C	d not chastes been	on line 14 amilion	100 and line 4	5 ic mara +ha= 22	1/20/2 and line
b	שר בו בע suppoit tests—zouo. If the	organization (I	и посепеска вох	OILLINE TH OLINE	= ⊥⊃a, anu nne 1(us more man 33	1/370 and ine

18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization **Private Foundation** If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Part IV

Supplemental Information. Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. See instructions

Schedule A (Form 990 or 990-EZ) 2009

Software ID: Software Version:

EIN: 11-1904261

Name: BROOKLYN PUBLIC LIBRARY

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and		ent c			015			(D)	(E)	(5)	
(A) Name and Title	(B) Average		tion (che		П		(D) Reportable	(E) Reportable	(F) Estimated amount of other	
	hours per week	Individual trustee or director	hat Institution			Highest compensated employee	Former	compensation from the organization (W- 2/1099-MISC)	compensation from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations	
		.l tiustee or	Institutional Trustee	鱼	employee	npensated	ner				
ANTHONY W CROWELL CHAIRMAN	2 0	X		X				0	0	0	
LAURA ENSLER VICE CHAIR	2 0	X		X				0	0	0	
ANTONIA YUILLE WILLIAMS SECRETARY	2 0	Χ		Х				0	0	0	
MIRIAM KATOWITZ TREASURER	2 0	Χ		Х				0	0	0	
THOMAS G AMON ESQ TRUSTEE	2 0	X						0	0	0	
PETER ASCHKENASY TRUSTEE	2 0	X						0	0	0	
JORDAN BAROWITZ TRUSTEE	2 0	X						0	0	0	
BONNIE BELLAMY WATKINS TRUSTEE	2 0	Х						0	0	0	
DR ELAINE BUCKBERG TRUSTEE	2 0	Χ						0	0	0	
ARLETY B CAMPOS TRUSTEE	2 0	Х						0	0	0	
KWANZA BUTLER TRUSTEE	2 0	Χ						0	0	0	
JERRY E GARCIA TRUSTEE	2 0	Χ						0	0	0	
NICHOLAS A GRAVANTE JR TRUSTEE	2 0	Χ						0	0	0	
SHARON GREENBERGER TRUSTEE	2 0	Χ						0	0	0	
HONORABLE IRA B HARKAVY TRUSTEE	2 0	X						0	0	0	
BETTY F KHAN TRUSTEE	2 0	Χ						0	0	0	
MARIANNA KOVAL TRUSTEE	2 0	Χ						0	0	0	
JOSH MAZESS TRUSTEE	2 0	X						0	0	0	
ROBERT C MILLER TRUSTEE	2 0	Χ						0	0	0	
IRIS Y CHIU TRUSTEE	2 0	X						0	0	0	
MANUEL A ROMERO TRUSTEE	2 0	Х						0	0	0	
HONORABLE ALICE FISHER RUBIN TRUSTEE	2 0	X						0	0	0	
SANDRA SCHUBERT TRUSTEE	2 0	Х						0	0	0	
CARLO SCISSURA ESQ TRUSTEE	2 0	Х						0	0	0	
DANNY SIMMONS TRUSTEE	2 0	X						0	0	0	

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

Compensated Employees, and	Independ	ent C	ontr	acto	ors					
(A) Name and Title	(B) A verage hours		((ition (that a	chec		I		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee		Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
HOWARD SMITH TRUSTEE	2 0	Χ						0	0	0
CHRISTINA TETTONIS TRUSTEE	2 0	Χ						0	0	0
DR LUCILLE COLE THOMAS TRUSTEE	2 0	X						0	0	0
ALBERT C WILTSHIRE TRUSTEE	2 0	X						0	0	0
NINA COLLINS TRUSTEE	2 0	X						0	0	0
LETICIA THEODORE-GREEN TRUSTEE	2 0	X						0	0	0
GINO MENCHINI TRUSTEE	2 0	X						0	0	0
MABLE ROBERTSON TRUSTEE	2 0	X						0	0	0
ERIC EVE TRUSTEE	2 0	X						0	0	0
JOYCE CUMBERBATCH TRUSTEE	2 0	X						0	0	0
DIONNE MACK-HARVIN EXECUTIVE DIRECTOR	35 0			X				240,381	0	0
JOHN VITALI DEPUTY DIR OF BUS ADMIN	35 0			X				204,158	0	24,599
MARY GRAHAM DEP DIR OF PUBLIC SERVICE	35 0				X			198,925	0	15,933
JUDITH NICHOLS DEPUTY DIR OF EXTERNAL AFFAIRS	35 0				X			204,087	0	17,171
LAWRENCE JENNINGS DIRECTOR OF HUMAN RESOURCES	35 0					X		177,774	0	18,312
SELVON SMITH DIRECTOR OF IT	35 0					X		152,118	0	19,915
VINTRESS BROWN DIRECTOR OF FINANCE	35 0					Χ		145,841	0	16,434
ARON BUKSPAN DIRECTOR, MAJOR & CAP GIVING	35 0					X		148,646	0	16,142
LAY CHENG LEE DIR CAP PLANNING AND FAC MNGR	35 0					X		143,445	0	23,227

Form 990, Part VIII - Statement of Revenue - 2a - 2g Program Service Revenue -

	Business Code	(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514
FINES AND FEE	900,099	1,760,260	1,760,260		
DUPLICATE CARDS	900,099	51,098	51,098		
BOOK SALES	900,099	72,374	72,374		
XEROX REVENUES	900,099	316,377	316,377		
MISCELLANEOUS	900,099	173,954	173,954		

Form 990, Part IX - Statement of Functional Expenses - 24a - 24e Other Expenses

Do not include amounts reported on line 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
BOOKS AND LIBRARY MATERIALS	12,275,768	12,275,768		
SUPPLIES	1,958,808	1,694,715	94,255	169,838
STAFF DEVELOPMENT/TRAINING	420,394	394,832	22,511	3,051
REPAIRS AND MAINTENANCE	1,290,318	1,213,607	72,301	4,410
SCHOLAR FUND AND STAFF RECOGN	30,720	28,423	2,297	

DLN: 93493349002260

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047

Open to Public Inspection

If the organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities),

- ◆ Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- ◆ Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

exempt funtion activities

If the organization answered "Yes," to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

	e organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, line tion 501(c)(4), (5), or (6) organizations. Complete Part III	ine 35a (rega	rding	proxy tax)	, then	
	me of the organization DOKLYN PUBLIC LIBRARY	Employer ide	ntıfıc	ation numbe	er	
		11-190426				_
Par	t I-A Complete if the organization is exempt under section 501(c) or is a	section 52	<u>7 or</u>	ganizatio	n.	_
1	Provide a description of the organization's direct and indirect political campaign activities in Pa	rt IV				
2	Political expenditures	F	\$_			
3	V olunteer hours		_			_
Pai	t I-B Complete if the organization is exempt under section 501(c)(3).					_
1	Enter the amount of any excise tax incurred by the organization under section 4955	▶	\$_			
2	Enter the amount of any excise tax incurred by organization managers under section 4955	.	\$_			
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?			┌ Yes	┌ No	
4a	Was a correction made?			┌ Yes	┌ No	
b	If "Yes," describe in Part IV					
Pai	t I-C Complete if the organization is exempt under section 501(c) except	section 50)1(c)(3).		
1	Enter the amount directly expended by the filing organization for section 527 exempt function a	ctivities 🕨	\$_			
2	Enter the amount of the filing organization's funds contributed to other organizations for section	527				

Did the filing organization file Form 1120-POL for this year? State the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV

Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b

(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

e Grassroots ceiling amount (150% of line 2d, column (e))

f Grassroots lobbying expenditures

Pa	Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).										
	Check If the filing organization belongs to an affiliated group Check If the filing organization checked box A and "limited control" provisions apply										
<u> </u>	Limits on Lobbying E (The term "expenditures" means ar	(a) Filing Organization's Totals	(b) Affiliated Group Totals								
1a	Total lobbying expenditures to influence public o	ppinion (grass roots lob	bying)								
b	Total lobbying expenditures to influence a legisla	ative body (direct lobby	yıng)								
c	Total lobbying expenditures (add lines 1a and 18	b)									
d	Other exempt purpose expenditures										
e	Total exempt purpose expenditures (add lines 1	c and 1d)									
f	Lobbying nontaxable amount Enter the amount f	from the following table	ın both								
	If the amount on line 1e, column (a) or (b) is: Not over \$500,000	The lobbying nontaxa 20% of the amount on lir									
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,00	0							
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000,0	000							
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,00	00							
	Over \$17,000,000	\$1,000,000									
		•									
g	Grassroots nontaxable amount (enter 25% of lin	ne 1 f)									
h	Subtract line 1g from line 1a If zero or less, enter	er -0-									
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -									
j	If there is an amount other than zero on either li section 4911 tax for this year?	ne 1h or line 1ı, did the	organization file F	orm 4720 repoi	rtıng	┌ Yes ┌ No					
	(Some organizations that made a columns below. See the	he instructions fo	ection do not l r lines 2a thro	nave to com ugh 2f on pa		ne five					
	Lobbying Exp	enditures During	4-Year Averag	ing Period	I	ı					
	Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total					
2a	Lobbying non-taxable amount										
b	Lobbying ceiling amount (150% of line 2a, column(e))										
c	Total lobbying expenditures										
d	Grassroots non-taxable amount										

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

		(a)		(b)	
		Yes	No	A mount	
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of				
а	Volunteers?		No		
Ь	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		Νο		
c	Media advertisements?		Νo		
d	Mailings to members, legislators, or the public?		Νo		
e	Publications, or published or broadcast statements?		Νo		
f	Grants to other organizations for lobbying purposes?		Νo		
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		54,000	
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No		
i	Other activities? If "Yes," describe in Part IV		Νo		
j	Total lines 1c through 1i			54,000	
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No		
b	If "Yes," enter the amount of any tax incurred under section 4912				
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912		l		
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		No		
	ATTLA Complete if the experiention is example under section FO1/s)/(1) section	E01/a	\/E\	ti	

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2		
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?	3		

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes".

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
а	Current year	2a	
Ь	Carryover from last year	2b	
c	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	4	
_	political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions)	5	
5	Laxable amount of loppying and political expenditures (see Instructions)	1 5	

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1, Also, complete this part for any additional information

Ident if ier	Return Reference	Explanation
PART II B		The Library's lobbying activity consists of a coordinated efforts at the City and State levels to portray the Library in the best possible light to ensure continued funding for its operations and programs. The Library lobbies the Executive branch of the State government and individual members of the State senate and assembly to ensure that it gets adequate funding from the State Department of Education, to seek funding for special capital initiatives and for member items for programs at the branch level. IN ADDITION, It lobbies the Executive branch of the New York City government AND members of the City Council to ensure that the Library is adequately funded for its operations and capital projects. The Library hired various consultants to facilitate the grant process with the various government agencies and direct contact with various legislators.

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DLN: 93493349002260

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

▶ Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Open to Public

Ciliui	The verified deliving				
	me of the organization DOKLYN PUBLIC LIBRARY		Employer identification	n numbe	er
Pa	rt I Organizations Maintaining Donor Adorganization answered "Yes" to Form 99		11-1904261 unds or Accounts. C	omplet	te if the
	organization answered Tes to Form 93	(a) Donor advised funds	(b) Funds and othe	raccour	nts
L	Total number at end of year				
2	Aggregate contributions to (during year)				
3	Aggregate grants from (during year)				
ļ	Aggregate value at end of year				
;	Did the organization inform all donors and donor advi funds are the organization's property, subject to the	-		_ Yes	☐ No
,	Did the organization inform all grantees, donors, and used only for charitable purposes and not for the ben		_	_ Yes	□ No
)a	rt II Conservation Easements. Complete	if the organization answered "Ves" to	<u> </u>		,
• !	Purpose(s) of conservation easements held by the o Preservation of land for public use (e.g., recreating the protection of natural habitat. Preservation of open space. Complete lines 2a-2d if the organization held a qualication held a qualication for the last day of the tay year.	on or pleasure) Preservation of an Preservation of ce	historically importantly l rtified historic structure of a conservation easem		a
	on the last day of the tax year		Held at the	End of	the Yea
а	Total number of conservation easements		2a	. Liid Oi	
b		_	2b		
	Total acreage restricted by conservation easement				
۳ C	Number of conservation easements on a certified h	` ,	2c		
d	Number of conservation easements included in (c)	•	2d		
	Number of conservation easements modified, transfe	rred, released, extinguished, or terminate	d by the organization dur	ıng	
	the taxable year 🗠				
	Number of states where property subject to conserva	ation easement is located 🟲			
	Does the organization have a written policy regarding enforcement of the conservation easements it holds?			_ Yes	☐ No
	Staff or volunteer hours devoted to monitoring, inspe	cting and enforcing easements during the	year ►		
	A mount of expenses incurred in monitoring, inspecti	ng, and enforcing easements during the ye	ear ► \$		
,	Does each conservation easement reported on line 2 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	(d) above satisfy the requirements of sec		_ Yes	┌ No
ı	In Part XIV, describe how the organization reports c balance sheet, and include, if applicable, the text of the the organization's accounting for conservation easer	the footnote to the organization's financial			
ar	TIII Organizations Maintaining Collection Complete if the organization answered		or Other Similar As	sets.	
.a	If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its fir	for public exhibition, education or research	ch in furtherance of public		£,
b	If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these items	public exhibition, education, or research ii			
	(i) Revenues included in Form 990, Part VIII, line 1		► \$		
	(ii) Assets included in Form 990, Part X		► \$		
!	If the organization received or held works of art, hist following amounts required to be reported under SFA		- 4	:he	
а	Revenues included in Form 990, Part VIII, line 1		► \$		
ь	Assets included in Form 990, Part X		► \$		

Par	ter Organizations Maintaining Co	llections of Art,	His	<u>tori</u>	<u>cal Trea</u>	sures, or	<u>Othe</u>	<u>r Similaı</u>	r Asse	ts (co	ntınued)
3	Using the organization's accession and othe items (check all that apply)	r records, check any	of th	e foll	owing that	are a signifi	cant u	se of its co	llection	ו	
а	Public exhibition		d	\sqcap	Loan or e	xchange pro	grams				
b	Scholarly research		e	Γ	Other						
c	▼ Preservation for future generations										
4	Provide a description of the organization's co	ollections and explain	n how	v they	further th	ne organizatio	n's ex	cempt purp	ose in		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t			,				nılar	Г	Yes	√ No
Pa	rt IV Trust, Escrow and Custodial A Part IV, line 9, or reported an an						answ	ered "Yes	s" to Fo	orm 99	90,
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	lian or other intermed	diary	for c	ontribution	ns or other as	sets	not	Γ	Yes	Г No
ь	If "Yes," explain why in Part XIV and comple	ete the following table	9								
									A mou	ınt	
c	Beginning balance						1c				
d	Additions during the year						1d				
e	Distributions during the year						1e				
f	Ending balance						1f				
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21?						Г	Yes	┌ No
b	If "Yes," explain the arrangement in Part XIV	/									
Pa	rt V Endowment Funds. Complete), Par	t IV, line	10.		
_		(a)Current Year 1,978,754	(b)	Prior '	Year (c	:)Two Years Bac	k (d)	Three Years	Back (e)Four Ye	ars Back
1a	Beginning of year balance	504,946					+				
b	Contributions	504,946					+				
c	Investment earnings or losses						+				
d	Grants or scholarships						-				
е	Other expenditures for facilities and programs										
f	Administrative expenses										
g	End of year balance	2,483,700									
2	Provide the estimated percentage of the yea	r end balance held as	5		I		<u> </u>		I		
а	Board designated or quasi-endowment 🕨										
ь	Permanent endowment 100 000 %										
c	Term endowment -										
3a	Are there endowment funds not in the posses	ssion of the organiza	tion t	hat a	re held an	ıd admınıster	ed for	the			
	organization by									Yes	No
	(i) unrelated organizations			•					3a(i)		Νο
	(ii) related organizations								3a(ii)		No
b	If "Yes" to 3a(ii), are the related organizatio	•							3b		
4	Describe in Part XIV the intended uses of th					Davit V Juni	- 10				
Рa	tt VI Investments—Land, Buildings	s, and Equipmen	I t. 5								
	Description of investment				Cost or othe (investmer			(c) Deprec	iation	(d) Boo	ok value
1a	Land										
	Buildings		•								
С	Leasehold improvements		•			14,1	56,789	1,4	74,636	12	2,682,153
	Equipment		•			6,4	52,361	4,9	38,913		1,523,448
е	Other					3,1	33,531	70	08,543		2,424,988

(a) Description of security or category (including name of security)	(b) Book value		(c) Method of valuation Cost or end-of-year market value		
nancial derivatives and other financial products	1				
losely-held equity interests					
ee Additional Data Table					
tal. (Column (b) should equal Form 990, Part X, col (B) line 12)	30,230,741				
art VIII Investments—Program Related. Se		13			
			d of valuation		
(a) Description of investment type	(b) Book value		year market value		
otal. (Column (b) should equal Form 990, Part X, col (B) line 13)					
Part IX Other Assets. See Form 990, Part X, III	ne 15.				
(a) Descri			(b) Book value		
otal. (Column (b) should equal Form 990, Part X, col.(B) line	(5.)				
Part X Other Liabilities. See Form 990, Part >					
(a) Description of Liability	(b) A mount				
ederal Income Taxes	0				
EFUNDABLE ADVANCES	1,994,686				
	1,554,000				
otal. (Column (b) should equal Form 990, Part X, col (B) line 25) 🖡	1,994,686				

	ule D (Form 990) 2008	hanna in Nat Assats forms	· · ·	00.1-	Fire a significant		Page 4
Pari 1	Total revenue (Form 990, Part	hange in Net Assets from I	Form 9	90 to	Financial Stateme	nts 1	105,810,068
2	Total expenses (Form 990, Part					2	106,917,869
3	Excess or (deficit) for the year					3	-1,107,801
4	Net unrealized gains (losses) o					4	1,923,161
5	Donated services and use of fa	cilities				5	
6	Investment expenses					6	
7	Prior period adjustments					7	
8	Other (Describe in Part XIV)					8	_
9	Total adjustments (net) Add III					9	1,923,161
10 Part		per financial statements Combine evenue per Audited Financ			onts With Payanua	10	815,360
1	Total revenue, gains, and othe		ciai Sta	teme	ints with Revenue		139,522,754
	statements					1	
2		t not on Form 990, Part VIII, line	12	ا ء۔	1 022 161		
a b	-	ments		2a 2b	1,923,161		
c	Recoveries of prior year grants			2c	31,0,2,323		
d	Other (Describe in Part XIV)			2d			
e	Add lines 2a through 2d .			•		2e	33,796,084
3	Subtract line $\bf 2e$ from line $\bf 1$.					3	105,726,670
4		O, Part VIII, line 12, but not on lir		ء ا	1		
a b	Other (Describe in Part XIV)	uded on Form 990, Part VIII, line	/b .	4a 4b	83,398		
c	Add lines 4a and 4b		 			4c	83,398
5	Total Revenue Add lines 3 and	d 4c. (This should equal Form 990	, Part I, I	ıne 12)	5	105,810,068
Part		xpenses per Audited Finar		atem	ents With Expense	s per	
1		audited financial statements .				1	138,707,394
2 a	Donated services and use of fa	t not on Form 990, Part IX, line 25	•	2a	31,872,923		
b				2b		1	
c	Losses reported on Form 990,			. 2c		1	
d	Other (Describe in Part XIV)			2d]	
e	Add lines 2a through 2d					2e	31,872,923
3	Subtract line 2e from line 1.					3	106,834,471
4		0, Part IX, line 25, but not on line uded on Form 990, Part VIII, line		4a	83,398		
a b	Other (Describe in Part XIV)	· · · · · · · · · · · · · · · · · · ·		4b	,	1	
c	Add lines 4a and 4b					4c	83,398
5		nd 4c. (This should equal Form 990), Part I,	lıne 18	3)	5	106,917,869
	XIV Supplemental Inf						
		scriptions required for Part II, line: , Part XII, lines 2d and 4b, and Pa				art IV ,	lines 1b and 2b,
	Ident if ier	Return Reference			Explanat	ion	
Part I	II - QUESTION 1a				ARY HAS COLLECTION		
			I		MATERIALS, INCLUDIN ER ITEMS THESE COLL		•
					NED BY THE LIBRARY U HELD FOR RESEARCH,		
			EXH	IBITI	ON IN FURTHERANCE	FPUE	BLIC SERVICE
					S FROM SALES OF COL OTHER ITEMS FOR CO		
			COL	LECTI	ONS PURCHASED BY TEAR OF PURCHASE THE	HE LI	BARY IS EXPENSED
			COL	LECTI	IONS, FOR FINANCIAL	STATE	EMENT PURPOSES
					BE DETERMINED THE ND OTHER LIBRARY MA		
			REC	ORDE	D AS COLLECTIONS, B	UT AR	E RECORDED AS AN
					IN THE YEAR PURCHA: MS ARE RELATIVELY S		HE USEFUL LIVES OF
PART	III - QUESTION 4		I		yn Public Library owns a portant special collectio		
			Coll	ection	of Children's Literature	7000	juvenile books dating
					e mid 18th century, the (Hection purchased in 190		
			orch	estral	score collections More	ver, th	ie Library's local
			I		t, the Brooklyn Collectio collections, none more ir	,	
					eally Eagle photography a newsworthy local, nation		
			The	Brookl	yn Collection's general E OF 19TH AND 20TH (hotog	raphy collections
			РНО	TOGR	AVURES, PORTFOLIOS	S, PHO	TO ALBUMS, STEREO
			I	,	ANOTYPES The collectell-known photographers		
			АВВ	отт, А	ALVIN LANGDON COBU	JRN, T	HOMAS ROMA,
					TIEGLITZ, IRVING UND ERHILL IN ADDITION,		,
					ION MAINTAINS A NUI IONS, INCLUDING SOM		
			COL	LECTI	ONS SUCH AS THE BR	0 0 KL	YN DODGERS
					BILIA COLLECTION TH IONS FURTHER ITS EXI		
			I		VIDE THE PEOPLE OF CESS TO A WELL PRESE		
					S KNOWLEDGE, HISTO		
PART	V	LINE 4			NE 4 THE INTENDED U		
			END	O WM E	ENTS ARE TO BE USED	то ви	Y BOOKS THAT
			HUM	1ANIT	THE MISSION OF THE IES PROGRAMS 3 STA	F WEL	FARE 4 YOUTH AND
					N'S PROGRAM 5 WILLEM AND AUDITORIUM CAP		
			UPK	EEP O	FTECHNOLOGY EQUI	PMENT	T AND ONGOING
				MTENA MON:	ANCE OF THE CENTRA S		ARI INFURMATION
PART	х	LINE 2			he Library adopted the p Codification ("ASC") 74		
			acco	ounting	and reporting for uncert	ainty ii	n income taxes For the
					ese provisions could be a ousiness income TAX (U		
			the I	Library	's investments Because atus, ASC 740-10-05 H	ofthe	Library's general tax-
			antio	cipated	d to have a material impa		
			stat	ements	5		

Additional Data

Software ID:

Software Version:

EIN: 11-1904261

Name: BROOKLYN PUBLIC LIBRARY

Form 990, Schedule D, Part VII - Investments— Other Securities

(a) Description of security or cateory (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
MULTI-STRATEGY COMMOD FUND	982,807	F
MULTI-STRATEGY EQUITY INVESTOR	8,782,600	F
ALL CAP FUND	3,191,529	F
CORE EQUITY FUND	2,848,147	F
INTERNATIONAL EQUITY FUND	1,899,313	F
EMERGING MARKETS INVESTORS CO	1,353,029	F
HEDGED INVESTORS COMPANY	1,673,600	F
MULTI-STRATEGY BOND INVESTORS	9,037,523	F
REAL RETURN BOND FUND	462,193	

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DLN: 93493349002260

OMB No. 1545-0047

SCHEDULE G (Form 990 or 990-EZ)

licensing

Department of the Treasury

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Internal Revenue Service	e
Name of the org	janization
BROOKLYN PU	BLIC LIBRARY

Employer identification number

						11-1904261	
Pa	rt I Fundraising A o Form 990-EZ file	ctivities. Comple ers are not require				to Form 990, Part IV	, line 17.
1 a b c d	Indicate whether the organizations Mail solicitations Internet and e-mail s Phone solicitations In-person solicitation Did the organization have or key employees listed in the compensated at least	olicitations a a written or oral agr n Form 990, Part VI	reement wi I) or entity or entities	e f g th any ind / in conne (fundraise	Solicitation of no Solicitation of go Special fundraisii dividual (including office ection with professional ers) pursuant to agreem	n-government grants vernment grants ng events ors, directors, trustees fundraising activities? ents under which the fur	
	(i) Name of Individual or entity (fundraiser)	(ii) Activity	(iii) fundrais custo contribi Yes	er have dy or rol of	(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
Tota	al						

List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or

Pa	rt I	Fundraising Events. Commore than \$15,000 on Form					eporte	∌d
		· · ·	(a) Event #1	(b) Event #2	(c) O ther Events	(d) Tot (Add col		
			(event type)	(event type)	(total number)			
Ę	1	Gross receipts	374,909	9			374	,909
Revenue	2	Less Charitable contributions	327,82	L			327	,821
	3	Gross income (line 1 minus line 2)	47,088	3			47	,088
	4	Cash prizes				<u> </u>		
မှာ	5	Non-cash prizes						
»Luse	6	Rent/facility costs						
Expenses	7	Food and beverages						
Direct	8	Entertainment						
Δ	9	Other direct expenses .	60,986	5		<u> </u>	60	,986
	10	Direct expense summary Add lir	nes 4 through 9 ın columr	(d)	🛌		60	,986
	11	Net income summary Combine I	nes 3, column d, and line	10		r	-13	,898
Par	t II	Gaming. Complete if the o \$15,000 on Form 990-EZ, li		"Yes" to Form 990, Pa	rt IV, line 19, or repo	orted more	e than	
Φ		,	(a) Bingo	(b) Pull tabs/Instant	(c) O ther gaming	(d) Tot	_	_
Revenue				bingo/progressive bingo		(Add col	(a) thro	ough
	1	Gross revenue						
s Seg	2	Cash prizes						
Expenses	3	Non-cash prizes						
	4	Rent/facility costs						
Drea	5	Other direct expenses						
	6	Volunteer labor	│	┌ Yes	┌ Yes			
					_			
	7	Direct expense summary Add line	s 2 through 5 in column (d)				
	8	Net gaming income summary Con	nbine lines 1, column d, a	nd line 7	<u> </u>		I Vaa I	N-
9		ter the state(s) in which the organiz		· · · · · · · · · · · · · · · · · · ·			Yes	No
a b		the organization licensed to operate 'No," Explain	gaining activities in eac	ii oi tilese states.		· 9a		
	_							
10a b		re any of the organization's gaming 'Yes," Explain	licenses revoked, susper	nded or terminated during	the tax year?	10a		
11 12		es the organization operate gaming the organization a grantor, beneficia				11	<u> </u>	
		med to administer charitable gamin				. 12		

		Yes	No
13	Indicate the percentage of gaming activity operated in		
а	The organization's facility		
b	An outside facility		
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records		
	Name 🟲		
	Address -		
15a	Does the organization have a contract with a third party from whom the organization receives gaming		
	revenue?	,	
b	If "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the	+	
	amount of gaming revenue retained by the third party 🟲 \$		
c	If "Yes," enter name and address		
	Name 🟲		
	Address •		
16			
16	Gaming manager information		
	Name 🟲		
	Name F		
	Gaming manager compensation 🕨 \$		
	Description of services provided -		
	Director/officer Employee Independent contractor		
	I Director/officer I Employee I Independent contractor		
.7	Mandatory distributions		
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to		
	retain the state gaming license?	<u> </u>	
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent		
	in the organization's own exempt activities during the tax year ▶ \$	1	

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DLN: 93493349002260

OMB No 1545-0047

Schedule J (Form 990)

Internal Revenue Service

Department of the Treasury

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

Compensated Employees ► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

Compensation Information

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Name of the organization BROOKLYN PUBLIC LIBRARY Employer identificati					on nur	nber	
DRC	JORLIN FODLIC LIDRARI			11-1904261			
Pa	rt I Questions Regarding Compensation						
						Yes	Νo
1a	Check the appropriate box(es) if the organization provides 990, Part VII, Section A, line 1a Complete Part III to						
	First-class or charter travel	Γ	Housing allowance or residence for	personal use			
	Travel for companions	Γ	Payments for business use of perso	nal residence			
	Tax idemnification and gross-up payments	Γ	Health or social club dues or initiati	on fees			
	✓ Discretionary spending account	Γ	Personal services (e g , maid, chauf	feur, chef)			
b	If any of the boxes in line 1a are checked, did the orgareimbursement orprovision of all the expenses describ				1b	Yes	
2	Did the organization require substantiation prior to reli officers, directors, trustees, and the CEO/Executive D		• .		2	Yes	
3	Indicate which, if any, of the following the organization organization's CEO/Executive Director Check all that						
	Compensation committee	굣	Written employment contract				
	Independent compensation consultant	~	Compensation survey or study				
	Form 990 of other organizations	굣	Approval by the board or compensa	tion committee			
4	During the year, did any person listed in Form 990, Pa or a related organization	rt V I	I, Section A, line 1a with respect to th	ne filing organization			
а	Receive a severance payment or change-of-control pa	y me r	nt?		4a		Νo
b	Participate in, or receive payment from, a supplement	al nor	iqualified retirement plan?		4b		Νo
c	Participate in, or receive payment from, an equity-bas	ed co	mpensation arrangement?		4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and prov	ıde th	ne applicable amounts for each item ii	n Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must	com	plete lines 5-9.				
5	For persons listed in form 990, Part VII, Section A, lir compensation contingent on the revenues of	ie 1a	, did the organization pay or accrue ai	пу			
а	The organization?				5a		Νo
b	Any related organization?				5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III						
6	For persons listed in form 990, Part VII, Section A, lir compensation contingent on the net earnings of	ie 1a	, did the organization pay or accrue ai	пу			
а	The organization?				6a		Νo
b	Any related organization?				6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III						
7	For persons listed in Form 990, Part VII, Section A, li payments not described in lines 5 and 6? If "Yes," des			n-fixed	7		No
8	Were any amounts reported in Form 990, Part VII, pai subject to the initial contract exception described in R in Part III				8		No
9	If "Yes" to line 8 did the organization also follow the r	a hutt	able presumption procedure describe	d in Regulations			

section 53 4958-6(c)?

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

For each individual whose compensation must be reported in 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 are not listed on Form 990, Part VII

Note. The sum of columns (B)(I)-(III) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				reported in prior Form 990 or Form 990-EZ
DIONNE MACK- HARVIN	(I) (II)	240,381 0	0 0	0	0	14,578 0	254,959 0	
JOHN VITALI	(I) (II)	204,158 0	0	0	0	24,599 0	228,757 0	
MARY GRAHAM	(ı) (ıı)	198,925 0	0 0	0	0	15,933 0	214,858	
LAWRENCE JENNINGS	(ı) (ıı)	177,774 0	0 0	0	1 1	18,312 0	196,086	
JUDITH NICHOLS	(ı) (ıı)	204,087 0	0	0	0	17,171 0	221,258 0	
SELVON SMITH	(ı) (ıı)	152,118 0	0	0	0	19,915 0	172,033 0	
VINTRESS BROWN	(ı) (ıı)	145,841 0	0 0	0	0	16,434 0	162,275 0	
ARON BUKSPAN	(I) (II)	148,646 0	0	0	1	16,142 0	164,788 0	
LAY CHENG LEE	(I) (II)	143,445 0	0 0	0	0	23,227 0	166,672 0	

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

Ident if ier	Ret urn Ref erence	Explanation
PART I		THE LIBRARY REIMBURSES ALL TRUSTEES AND OFFICERS AND EMPLOYEES FOR ALLOWABLE EXPENSES INCURRED IN CARRYING OUT THE MISSION OF THE LIBRARY EXPENSES ARE REIMBURSED IN ACCORDANCE WITH THE LIBRARY'S APPROPRIATE TRAVEL AND EXPENSE REIMBURSEMENT POLICY

Schedule J (Form 990) 2009

SCHEDULE M (Form 990)

Department of the Treasury

Internal Revenue Service

NonCash Contributions

OMB No 1545-0047

▶Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990.

Open to Public Inspection

Employer identification number Name of the organization BROOKLYN PUBLIC LIBRARY 11-1904261 Types of Property (a) (b) (c) (d) Check Number of Contributions Revenues reported on Method of determining Form 990, Part VIII, line revenues ıf applicable 1 g 1 Art—Works of art . . 2 Art—Historical treasures 3 Art—Fractional interests 218,499 fmv 4 Books and publications Х 5 Clothing and household goods Cars and other vehicles Boats and planes . . . Intellectual property Securities—Publicly traded . 10 Securities—Closely held stock 11 Securities—Partnership, LLC, or trust interests 12 Securities—Miscellaneous . . 13 Qualified conservation contribution—Historic structures 14 Qualified conservation contribution—Other . . Real estate—Residential . Real estate—Commercial . 17 Real estate—Other . . . 18 Collectibles 19 Food inventory . . . 20 Drugs and medical supplies . **21** Taxidermy 22 Historical artifacts . . . Scientific specimens . . 23 Archeological artifacts . 24 25 Other ► (___ Other ►(__ 26 27 Other ►(__ **28** Other ► (Number of Forms 8283 received by the organization during the tax year for contributions 29 for which the organization completed Form 8283, Part IV, Donee Acknowledgement . . Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? No 30a **b** If "Yes," describe the arrangement in Part II 31 Yes Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash contributions? 32a Νo b If "Yes," describe in Part II If the organization did not report revenues in column (c) for a type of property for which column (a) is checked,

Page 2

Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Identifier Return Reference Explanation

Schedule M (Form 990) 2009

OMB No 1545-0047

2009

SCHEDULE 0 (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 Complete to provide information for responses to specific questions on

> Form 990 or to provide any additional information. ► Attach to Form 990.

Open to Public Inspection

Name of the organization BROOKLYN PUBLIC LIBRARY

Employer identification number

11-1904261

Identifier	Return Reference	Explanation
PART VI- SECTIONS A AND B AND FORM 8868	LINES 7a, 11a, 12c, 15, 18-19	SECTION A LINE 7A In accordance with the Library's by-law's the governing board (Trustees) has the authority to manage and control the affairs of the Library. The board of trustees shall consist of no more than thirty eight members. By virtue of their respective offices the Mayor of the City of New York, the Comptroller of the City of New York, the Speaker of the City of the City of New York on the President of the Borough of Brooklyn are Ex-Officio Trustees of the Library. Each Ex-Officio may appoint a representative to serve on his or her behalf as a member of the board. Each representative appointed by an Ex-Officio or any other member of the Board, except in cases where this is prohibited by law. The Mayor of the City of New York and the President of the Borough of Brooklyn may each appointed Library. The Mayor of the City of New York and the President of the Borough of Brooklyn may each appointed Library 1 in Library. The Mayor of the City of New York and the President of the Borough of Brooklyn may each appointed Library 1 in Library. The Mayor of the City of New York and the President of the Borough of Brooklyn may each appointed Library. In Library, and the President of the Borough of Brooklyn may each appointed Library. In Library, the City of New York and the President of the Borough of Brooklyn may each appointed Library. In Library, the City of Promage of the City of President of the State of the City of President of the State of the City of President and the City
		e see the Instructions for Form 900 Cat. No. 51.056K Schedule O (Form 900) 200