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DLN: 93493352004022

Form **990**

Department of the Treasury Internal Revenue Service

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

Open to Public

► The organization may have to use a copy of this return to satisfy state reporting requirements

A Fo	r the 2	2011 ca	lendar year, or tax year beginning 07-	01-2011 and ending 06-30-2012	2		·
		pplicable	C Name of organization BROOKLYN PUBLIC LIBRARY			D Employer ic	lentification number
┌ Add	ress ch	ange			_	11-19042	
┌ Na	me chai	nge	Doing Business As			E Telephone r	number
┌ Init	ıal retui	rn	Number and street (or P O box if mail is no	ot delivered to street address) Room/su	ıte.	(718)230	-2456
┌ Ter	mınated	d	10 GRAND ARMY PLAZA	st delivered to street dadress, Room, sa	il C	G Gross receipt	s \$ 146,787,363
_	ended i		City or town, state or country, and ZIP + 4		_		
_		pending	BROOKLYN, NY 11238				
i vai	Jication	pending	F. Nama and address of numerical	- 			
			F Name and address of principal LINDA JOHNSON PRESIDENT C		H(a) Is thi affilia	s a group retu tes?	rn for ┌ Yes 🔽 No
			10 GRAND ARMY PLAZA		aiiiiu		, 165 p 110
			BROOKLYN,NY 11238		H(b) Are all	l affiliates inclu	ded?
T Ta	x-exem	pt status	▼ 501(c)(3)	o)		•	t (see instructions)
		·		0) 4547(a)(1) 01 527	H(c) Grou	p exemption n	umber F
	ebsite	: - ww	W BROOKLYNPUBLICLIBRARY ORG				
		ganızatıon	Corporation Trust Association O	ther ►	L Year of for	mation 1902	M State of legal domicile NY
Pa	rt I	Sumi	mary				
	1		scribe the organization's mission or n	nost significant activities			
e e	5	SEE PAR	T III LINE 1				
Ě	-						
Ĕ]						
Governance	2 (Check th	ıs box 🛏 ıf the organızatıon dıscontı	nued its operations or disposed o	of more than 2	5% of its net	assets
Ĭ	1 8	Number	of voting members of the governing bo	dy (Part VI, line 1a)		з	31
Activities &	4 1	Number	of independent voting members of the	governing body (Part VI, line 1b)		4	31
ĕ			nber of individuals employed in calenc			5	1,519
\$			nber of volunteers (estimate if necess			6	1,500
र्			elated business revenue from Part VI			7a	261,805
			ated business taxable income from Fo			7b	90,723
					Prio	r Year	Current Year
	8	Contrib	outions and grants (Part VIII, line 1h)		1110	98,949,141	102,525,696
횰	9		m service revenue (Part VIII, line 2g		2,399,828	2,749,225	
Revenu	10		ment income (Part VIII, inle 29 ment income (Part VIII, column (A), l		2,422,838	2,132,407	
Æ	11		revenue (Part VIII, column (A), lines			21,684	26,640
	12		evenue—add lines 8 through 11 (must		e	21,004	20,040
	12					03,793,491	107,433,968
	13	Grants	and similar amounts paid (Part IX, co	olumn (A), lines 1-3)		0	0
	14	Benefit	s paid to or for members (Part IX, col	umn (A), line 4)		0	0
	15		s, other compensation, employee ben	efits (Part IX, column (A), lines			
\$ \$		5-10)				76,544,425	79,216,416
Expenses	16a		sional fundraising fees (Part IX, colum			0	0
五	Ь		ndraising expenses (Part IX, column (D), line 2				
	17		expenses (Part IX, column (A), lines 1			23,299,556	23,588,756
	18		xpenses Add lines 13-17 (must equ			99,843,981	102,805,172
	19	Revenu	ue less expenses Subtract line 18 fro	m line 12		3,949,510	4,628,796
Net Assets or Fund Balances						of Current ear	End of Year
Sets sfae	20	Totala	ssets (Part X, line 16)			15,684,159	91,717,754
AS GB	21		abilities (Part X, line 26)			66,653,209	40,699,443
25 E	22		sets or fund balances Subtract line 2			49,030,950	51,018,311
	1311		ature Block	1 110111 11111 20		40,000,000	31,010,311
			erjury, I declare that I have examined this	return including accompanying se	chedules and st	atements and	to the hest of my
know	ledge a		, it is true, correct, and complete. Declar				
know	ledge.						
			**			12.12.15	
e:		Signat	** ture of officer		20 Da	12-12-15 te	
Sign Here		'			24		
	-		VITALI CHIEF FINANCIAL OFFICER or print name and title				
		· · · ·		Date ,	Check If	Drenamar's taxon	aver identification number
Б		Preparer's		9	self-	(see instruction	ayer identification number ns)
Paid	l -		•	€	employed 🕨 🦳		
•	arer's	Firm's na if self-em	me (or yours EISNERAMPER LLP			EIN Þ	
Use (only		and ZIP + 4 750 THIRD AVENUE				
		Ī	NEW YORK NY 100172703			Phone no 🕨 (212) 949-8700

May the IRS discuss this return with the preparer shown above? (see instructions)

FOIII	1990 (2011)					Page ∠
Par	Statement of Progr Check if Schedule O cor			art III		F
1	Briefly describe the organization	on's mission				
AND	S THE MISSION OF THE LIBRA CULTURE, AND TO PROVIDE REATION AND REFERENCE					
2	Did the organization undertake the prior Form 990 or 990-EZ?			e year which were no		'es ✓ No
	If "Yes," describe these new se	rvices on Schedule O				
3	Did the organization cease con services?			vit conducts, any pr · · · · ·	ogram Г	res ✓ No
4	Describe the organization's pro expenses Section 501(c)(3) a grants and allocations to other	gram service accomplis nd 501(c)(4) organizati	ons and section 49	47(a)(1) trusts are r	equired to report t	
4a	(Code) (Exp	penses \$ 20,338,6	66 including grants o	f \$) (Revenue \$	502,247)
	The Central Library provides subject patrons In addition, the Central Libraccess to historic resources to resear circulation and renewals of library m. 2,304 programs to 55,672 participan	ary offers collections and sen chers around the world, local aterials and 783,000 holdings	vices dedicated to the B students, genealogists, During this same perk	rooklyn Collection and wo journalists, etc In FY 20 od, staff attended to 248,	orld language The Brod 112 the Central Library ,750 reference inquiries	oklyn Collection provides generated 2 5 million
4b	(Code) (Exp	penses \$ 70,701,0	82 including grants o	F dt) (Revenue \$	1,745,905)
40	The Neighborhood Libraries provide it mile of nearly every Brooklyn reside million+ books, DVD's videos and CI advisory and references services. Lib books and materials via its online ca million from the previous year, and a programs to 660,804 participants.	free access to library services nt Library services include u D's covering topics for all age orary users can also access Li talog In FY 2012 the Neighb	via 58 neighborhood lo ise of Internet and PC s s and interests, progran orary information and re orhood Libraries genera	cations throughout Brook oftware via 900+ public on sons covering literary, techn sources via the Library's ted 16 2 million circulatio	lyn There is a neighbo computers, browsing ai nology instruction and c website, and search fo n and renewals of libra	rhood library within a half- nd borrowing privileges for 6 ultural topics, readers r, request and renew library ry materials, down 1 4
	(Code) (Exp	penses \$ 5,811,0	48 including grants o	F &) (Revenue \$	239,268)
4 C	Special programs functions provide p school and school age children Child services are available in locations thi located in downtown Brooklyn The l and events throughout all Library loc exhibitions, and cultural and historic holdings During this same period, st	orograms and services dedicalizen's services include story houghout Brooklyn A Busines Programs and Exhibitions Departions The free public progracelebrations In FY 2012 the	ted to certain groups of our, homework assistar s library providing servic partment provides inspir ams and events include Special Programs gener	library users including so ace and reading clubs Fre tes to small businesses, e ling, thought provoking, a poetry readings, author v ated 451,767 circulation of	eniors, children with spee adult literacy, ESOL a entrepreneurs and the count of th	ecial needs, toddlers, pre- and Pre-GED educational orporate community is I and educational programs is, concerts, films series, art materials and 76,000
4d	Other program services (Des	•				
	(Expenses \$	including grant	s of \$) (Revenue	\$)
4e	Total program service expense	es► \$ 96,850	,796			

art IV	Checklis	t of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	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^{\bullet}	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		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? If "Yes," complete Schedule D, Part II	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 temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b	Yes	
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If</i> "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
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, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If</i> "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? If "Yes," complete Schedule F, Part II and IV.	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 and IV	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
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. All Form 990 filers that operated one or more hospitals must attach audited financial statements	20b		

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		No
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		No
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		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	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		No
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? <i>If "Yes," complete Schedule L, Part III </i>	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 IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule Ma	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		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
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		No
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		No
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		No
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	35a		No
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$? If "Yes," complete Schedule R, Part V, line 2	35b		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "Yes," complete Schedule R, Part V, line 2	36		No
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		No
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 99 0	(2011)

Part V	Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V		.	
			Yes	No
a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
	1a 216			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
а	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	10	163	
_	return			1
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
а	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 or securities account)?	4 a		No
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
3	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo
ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			
a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	5c 6a		No
b	organization solicit any contributions that were not tax deductible?			
	were not tax deductible?	6b		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 c		Νo
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
	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?			1
	Sponsoring organizations maintaining donor advised funds.	8		
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
)	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
L	Section 501(c)(12) organizations. Enter			
	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)			
	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	_		
3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state	13a		
b	Enter the aggregate amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c	Enter the aggregate amount of reserves on hand			
_		ایما		
4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
-	If "Vac " has it filed a Form 720 to report these nauments? If "No " provide an explanation in Schodule O	7.46	1	

Part VI 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
1_	Enter the number of voting members of the governing heady at the and of the tay			
1a	Enter the number of voting members of the governing body at the end of the tax year			
b	Enter the number of voting members included in line 1a, above, who are independent			
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		No
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		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	Yes	
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
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	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal			
Re	venue Code.)			1
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		No
Ь	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," described in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did 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	Yes	
	If "Yes," to line 15a or 15b, 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 taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ection C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed▶NY			

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 made these available. Check all that apply

(718) 230-2456

- 19 Describe in Schedule O whether (and if so, how), the organization made 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 organization ► VINTRESS BROWN
 10 GRAND ARMY PLAZA
 BROOKLYN, NY 11238

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

- 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, if any See instructions for definition of "key employee"
- ◆ List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, 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 neither the or	ganization nor any re	lated o	rgan	ızatı	ons	compe	ensat	ted any current or fo	rmer officer, direc	tor, or trustee
(A) Name and Title	(B) A verage hours per week (describe	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and
	hours for related organizations in Schedule O)	Individual trustae or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former		MISC)	related organizations
See Additional Data Table										
				\vdash			_			

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

	(A) Name and Title	(B) A verage hours per week (describe hours	verage Position (do not check nours more than one box, per unless person is both week an officer and a director/trustee) 2/3				Rep comp fro organiz	(D) ortable ensation m the zation (W- 9-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)		(F) Estimated amount of other compensation from the organization and related			
		for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			THISC,		organiza	
See /	Addıtıonal Data Table													
												_		
												_		
								_				4		
	0.1.7.1.1							┢┤		ı		4		
1b c	Sub-Total		tion A			•		<u>-</u>						
d					•			 		1,366,679		0		299,216
2	Total number of individuals (incl \$100,000 of reportable compen						above) who	o receive	ed more tha	n			
													Yes	No
3	Did the organization list any fori on line 1a? <i>If</i> "Yes," complete Sch					eye	mploy •	ee, d	or highes	t compens	ated employee	3		No
4	For any individual listed on line : organization and related organization													
5	Individual	receive or accri	ie comi	• nensa	• ation	• i froi	manv	• unre	· ·	· · ·	or individual for	4	Yes	
J	services rendered to the organiz										•	5		No
	ection B. Independent Con													
1	Complete this table for your five \$100,000 of compensation from or within the organization's tax y	the organizatio												
	Nan	(A) ne and business ad	dress							Desci	(B) ription of services		(C Comper	
209-	L CONSTRUCTION CORP 39 33RD ROAD IDE, NY 11361									GENERAL CO	NTRACTOR			632,796
80 8	TERMAN CONSTRUCTION CO INC TH AVENUE YORK, NY 10011									CONSTRUCT	ION MANAGER			498,310
4 WC	Z COMPANY INC DOD HOLLOW ROAD SIPANY, NJ 07054									MGMT CON:	SULTANT			357,000
1215	ORMANCE MECHANICAL SECOND AVENUE HYDE PARK, NY 11040									HVAC MAINT	ENANCE			337,077
PHAR	ROS SYSTEMS INTERNATIONAL INC NDEN OAKS SUITE 310									IT CONSULTA	ANT			321,473

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►12

Form **990** (2011)

Part v	<u> </u>	Statement 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
報告	1a	Federated campaigns 1a					
亞哥	Ь	Membership dues 1b					
% E	c	Fundraising events 1c	385,225				
žž.	d	Related organizations 1d					
% <u>=</u>	e e	Government grants (contributions) 1e	98,519,539				
흜	f	All other contributions, gifts, grants, and 1f	3,620,932			i	
音を	'	similar amounts not included above —					
윤등	g	Noncash contributions included in 237.600					
Contributions, gifts, grants and other similar amounts	[lines 1a-1f \$	<u>.</u>	102,525,696			
ပက	h	Total. Add lines 1a-11		102,323,030			
<u>a</u>		В	ısıness Code				
ē	2a	FINES AND FEE	900099	1,887,887	1,887,887		
ã.	ь	DUPLICATE CARDS	900099	17,100	17,100		
<u>.</u> م	c	BOOK SALES	900099	36,431	36,431		
ž	d	PRINT AND COPY	900099	300,015	300,015		
क्रू	e	MISCELLANEOUS	900099	507,792	245,987	261,805	
Program Serwce Revenue	f All other program service revenue		300033	301,132	2-13,307	201,003	
Š	'	An other program service revenue					
<u> </u>	g	Total. Add lines 2a-2f	-	2,749,225			
	3	Investment income (including dividends, i	nterest				
		and other similar amounts)	. ▶ [1,036,385			1,036,385
	4	Income from investment of tax-exempt bond proce	eds 🕨 📗	0			
	5	Royalties	▶ [0			
		(ı) Real (ıı) Personal				
	6a	Gross rents					
	ь	Less rental expenses					
	c	Rental income					
	l <u>.</u>	or (loss)					
	d	Net rental income or (loss)					
		(1) Securities Gross amount 40,395,160	(II) Other				
	7a	from sales of					
		assets other than inventory					
	ь	Less cost or 39,299,138					
		other basis and sales expenses					
	c	Gain or (loss) 1,096,022					
	d	Net gain or (loss)	▶ [1,096,022			1,096,022
Other Revenue	8a	Gross income from fundraising events (not including \$385,225 of contributions reported on line 1c)					
é		See Part IV, line 18					
一		a	50,280				
Ě	Ь	Less direct expenses b	54,257				
0	C	Net income or (loss) from fundraising ever	nts 🟲	-3,977			-3,977
	9a	Gross income from gaming activities See Part IV, line 19 a					
	ь	Less direct expenses b					
	c	Net income or (loss) from gaming activitie	s	o			
	10a	Gross sales of inventory, less returns and allowances .					
	ь	Less cost of goods sold b					
	c	Net income or (loss) from sales of invento	ry >	o			
			ısıness Code				
	11a	CAFE INCOME		30,617			30,617
	ь						
			-				
	ر د	All other revisions					
	d	All other revenue					
	e	Total Add lines 11a-11d		30,617			
	12	Total revenue. See Instructions	•	107,433,968	2,487,420	261,805	2,159,047

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D) Check if Schedule O contains a response to any question in this Part IX

Do no	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	0			
2	Grants and other assistance to individuals in the United States See Part IV, line 22	0			
3	Grants and other assistance to governments, organizations, and individuals outside the United States 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	801,051	218,445	426,609	155,997
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	51,953,958	49,442,898	1,924,568	586,492
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	6,091,133	5,299,932	711,961	79,240
9	Other employee benefits	15,552,651	15,013,831	497,397	41,423
10	Payroll taxes	4,817,623	4,497,757	248,415	71,451
11	Fees for services (non-employees)				
а	Management	0			
b	Legal	142,405	84,673	57,681	51
С	Accounting	85,500		85,500	
d	Lobbying	69,000		69,000	_
е	Professional fundraising See Part IV, line 17	0			
f	Investment management fees	76,687		76,687	
g	Other	2,237,803	2,001,978	149,942	85,883
12	Advertising and promotion	195,116	147,192	27,717	20,207
13	Office expenses	4,065,823	3,941,652	105,264	18,907
14	Information technology	0		,	
15	Royalties	0			
16	Occupancy	2,326,137	2,305,553	20,543	41
17	Travel	143,827	135,877	7,224	726
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	1,487,415	1,487,415		
23	Insurance	508,095	434,416	73,679	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)	,	,	,	
а	BOOKS AND LIBRARY MATERIALS	8,584,693	8,584,693		
b	SUPPLIES	1,766,195	1,531,482	79,951	154,762
c	STAFF DEVELOPMENT/TRAINING	147,429	139,055	6,410	1,964
d	REPAIRS AND MAINTENANCE	1,385,732	1,303,448	75,802	6,482
e					
f	All other expenses	366,899	280,499	44,829	41,571
25	Total functional expenses. Add lines 1 through 24f	102,805,172	96,850,796	4,689,179	1,265,197
26	Joint costs. Check here ► ☐ If following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				rm 990 (2011)

Part X **Balance Sheet** (A) (B) Beginning of year End of year 20,032 19,932 1 1 55.817.631 32.023.462 2 3 7,678,246 3 6.961,716 0 4 0 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 0 0 5 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of 0 0 6 0 0 7 0 6.736 8 395,545 9 9 168.931 Prepaid expenses and deferred charges 10a 25,159,420 Land, buildings, and equipment cost or other basis *Complete* Part VI of Schedule D 10a 10b 6,172,513 b Less accumulated depreciation 16,318,771 10c 18,986,907 2,246,814 2,257,504 11 11 31,184,851 12 33, 127, 295 12 Investments—other securities See Part IV, line 11 13 13 0 Investments—program-related See Part IV, line 11 . . ol 0 14 14 73,089 114,451 15 15 115,684,159 91,717,754 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . 16 17, 186, 689 19,170,519 17 17 Accounts payable and accrued expenses . 18 18 19 49,466,520 19 21,528,924 20 20 Ω ol 21 Escrow or custodial account liability Complete Part IV of Schedule D . . 21 0 Liabilities 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 0 22 ol 0 23 Secured mortgages and notes payable to unrelated third parties . . . 23 ol 24 Unsecured notes and loans payable to unrelated third parties 24 0 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule 25 D 26 66,653,209 26 40,699,443 **Total liabilities.** Add lines 17 through 25 Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 27 41,346,209 42,824,520 Unrestricted net assets 5, 193, 443 28 5,695,323 28 Temporarily restricted net assets Fund 29 2,491,298 29 2,498,468 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34. ö 30 30 Capital stock or trust principal, or current funds Assets 31 31 Paid-in or capital surplus, or land, building or equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ 33 49.030.950 33 51,018,311 Total net assets or fund balances 34 Total liabilities and net assets/fund balances 115.684.159 34 91.717.754

Pal	Check if Schedule O contains a response to any question in this Part XI			. [~	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		107,4	133,96
2	Total expenses (must equal Part IX, column (A), line 25)	2			 305,17
3	Revenue less expenses Subtract line 2 from line 1	3		4,6	528,79
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		49,0	30,95
5	Other changes in net assets or fund balances (explain in Schedule O)	5		-2,6	541,43
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6		51,0	018,31
Pai	The Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII			୮	
1	Accounting method used to prepare the Form 990			Yes	No
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
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 t 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 is on a separate basis, consolidated basis, or both	ssued			
_	Separate basis Consolidated basis Both consolidated and separated 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?		За	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the reaudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b	Yes	

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

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.

Inspection **Employer identification number**

		ie organi: UBLIC LIBF							Employer	identificatio	n number
BROOM	XLIIV F	орцс ць	CAICT						11-1904	261	
Pa	rt I	Reas	on for Pu	blic Charity Sta	tus (All or	ganızatıons	must com	plete this p	art.) See ı	nstructions	
The	rganı	zatıon ıs	not a priva	te foundation becaus	seitis (For	lınes 1 throu	ıgh 11, check	conly one b	ox)		
1	Г	A chur	ch, convent	ion of churches, or a	ssociation of	fchurches s	section 170(b)(1)(A)(i).			
2	Г	A scho	ol described	d in section 170(b)(1	L)(A)(ii). (At	ttach Sched	ule E)				
3	Г	A hosp	ital or a cod	perative hospital se	rvice organiz	zatıon descr	ıbed ın sectio	n 170(b)(1)	(A)(iii).		
4	Γ			h organızatıon opera ıty, and state	ted in conjun	nction with a	hospital des	cribed in sec	tion 170(b)	(1)(A)(iii). E	nter the
5	Γ	=	•	erated for the benefi (A)(iv). (Complete P	_	e or universi	ty owned or o	perated by a	a governmer	ital unit desc	rıbed ın
6	Г	A federal, state, or local government or governmental unit described in section 170(b)			ion 170(b)(1	l)(A)(v).					
7	⊽	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi) (Complete Part II)					eral public				
8	Γ			described in sectio i		A)(vi) (Cor	nplete Part II	[)			
9	Γ	An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III)					/3% of				
10	Г	An organization organized and operated exclusively to test for public safety See section 509(a)									
11 e	Г	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Che the box that describes the type of supporting organization and complete lines 11e through 11h a					09(a)(3). Check III - Other Ified persons				
g		check	this box	2006, has the organ							, , , , , , , , , , , , , , , , , , ,
9		followir (i) a pe	ng persons? erson who di		ontrols, eith	er alone or t	ogether with) 11g (Yes No
				er of a person descri						11g(
h		(iii) a 3	35% contro	lled entity of a persong information about	n described	ın (ı) or (ıı) a				11g(
(i) Name of supported organization		e of rted	of (ii) (described on ted EIN lines 1-9 abov		organization in col (i) listed in col (i)		(v) Did you not organizati col (i) of suppor	ion in your	(vi) Is the organization in col (i) organized in the US?		(vii) A mount of support?
				(see instructions))	Yes	No	Yes	No	Yes	No	
									<u> </u>		
Tota	l		1	l	1	1	I	1	1	1	1

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 or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

	ection A. Public Support	ne organization	Talls to quality t	ander the tests	listed below, pi	ease coi	<u>iipiete P</u>	art III.)
	endar year (or fiscal year beginning	9 (-) 2007	(1-) 2000	(-) 2000	(4) 2010	(-) 2 <i>c</i>		(6) T - t - l
	ın)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 20	111	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual	104,931,66	105,035,094	101,415,702	98,949,141	102,	,525,696	512,857,301
	grants ")						\longrightarrow	
2	Tax revenues levied for the							
	organization's benefit and either paid to or expended on its behalf							
3	The value of services or facilities							
	furnished by a governmental unit to the organization without charge							
4	Total. Add lines 1 through 3	104,931,66	105,035,094	101,415,702	98,949,141	102,	,525,696	512,857,301
5	The portion of total contributions							
	by each person (other than a							
	governmental unit or publicly supported organization) included							
	on line 1 that exceeds 2% of the							
	amount shown on line 11, column							
	(f)						\longrightarrow	
6	Public Support. Subtract line 5 from line 4							512,857,301
S	ection B. Total Support			<u> </u>				
	endar year (or fiscal year	(-) 2007	(h) 2008	(a) 2000	(d) 2010	(-) 20	11	(6) Total
	beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 20		(f) Total
7	A mounts from line 4	104,931,668	105,035,094	101,415,702	98,949,141	102,	525,696	512,857,301
8	Gross income from interest,							
	dividends, payments received on securities loans, rents,	3,064,606	-2,993,805	1,998,411	2,422,838	2.	132,407	6,624,457
	royalties and income from	3,55.,555	2,330,000	2,550,111	2,122,000	_,	102,	3,32.,13.
	sımılar sources							
9	Net income from unrelated							
	business activities, whether or				22,905		90,723	113,628
	not the business is regularly carried on							
10	Other income (Explain in Part							
	IV) Do not include gain or loss	392,335	388,458	35,790	32,512		30,617	879,712
	from the sale of capital	372,333	300,130	33,730	32,312		30,017	0.3,.12
	assets Total support (Add lines 7						-+	
11	through 10)							520,475,098
12	Gross receipts from related activ	ıtıes, etc (See ın:	structions)	•	•	12		12,359,100
13	First Five Years If the Form 990 i	s for the organiza	tion's first, second	l, third, fourth, or	fifth tax year as a	501(c)(3) organız	ation,
	check this box and stop here							▶ ┌
	ection C. Computation of Po	ublic Support	Percentage					
<u></u> 14	Public Support Percentage for 20			11 column (f))		14		98 536 %
15	Public Support Percentage for 20	-				 		98 116 %
	33 1/3% support test—2011. If the	•		v on line 12 and	lung 1.4 to 2.2 1/20/	15	abook ti	
LUa	and stop here. The organization q	_		· ·	ille 14 is 33 1/3%	o or more	, CHECK LI	IIIs box
b	33 1/3% support test—2010. If t				6a, and line 15 is	33 1/3% (or more, a	check this
	box and stop here. The organization	•		-				▶□
17a	10%-facts-and-circumstances tes							
	is 10% or more, and if the organizin Part IV how the organization m							ed
	organization	icoto tile lacto al	chicambiances	toot The organiz	Lation qualifies as	a publici)	Jappoit	.eu ▶□
b	10%-facts-and-circumstances tes							
	15 is 10% or more, and if the org							
	Explain in Part IV how the organization	zation meets the '	racts and circums	tances" test I he	e organization qua	lities as a	publicly	⊳ ⊏
18	Private Foundation If the organiz	ation did not chec	k a box on line 13	, 16a, 16b, 17a o	or 17b, check this	box and s	ee	FI
	instructions		= ==	. , , , = : = :	,			▶ □

Schedule A (Form 990 or 990-EZ) 2011 Page 3 Part III Support Schedule for Organizations Described in IRC 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total ın) Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b Public Support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total ın) Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b C Net income from unrelated 11 business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 13 11 and 12) First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f)) 15 15 Public support percentage from 2010 Schedule A, Part III, line 15 16 16 Section D. Computation of Investment Income Percentage

Investment income percentage for 2011 (line 10c column (f) divided by line 13 column (f))

19a 33 1/3% support tests—2011. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not

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

33 1/3% support tests-2010. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line

more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

Investment income percentage from 2010 Schedule A, Part III, line 17

17

18

17

18

▶[

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. Also complete this part for any additional information. (See instructions).
	Facts And Circumstances Test
	Explanation

Schedule A (Form 990 or 990-EZ) 2011

DLN: 93493352004022

OMB No 1545-0047

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.

f the organization answered "Yes,"	to Form 990, Part IV,	Line 3, or Form 990-	EZ, Part V, line 46 (P	Political Campaign Activities	٠),
hen					

- ◆ 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

Provide a description of the organization's direct and indirect political campaign activities on behalf of or

◆ Section 527 organizations Complete Part I-A only

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

If the organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, line 35c (Proxy Tax), then

◆ Section 501(c)(4), (5), or (6) organizations Complete Part III

Name	of t	the	org	anızatıo	n
BROOK	LYN	PUE	SLIC	LIBRARY	

Employer identification number

┌ Yes

11-1904261

Part I-A	Complete if	the organization i	s exempt under s	ection 501(c) (<u>or is a section 527</u>	organization.

- in opposition to candidates for public office in Part IV Political expenditures
- 3 Volunteer hours

art I-B	Complete if	the organ	<u>ization is (</u>	<u>exempt under</u>	section 501(c)(3).

- Enter the amount of any excise tax incurred by the organization under section 4955 1
- 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?
- Was a correction made? ☐ Yes
- If "Yes," describe in Part IV

Did the filing organization file Form 1120-POL for this year?

Part I-C Complete if the organization is exempt under section 501(c) except section 501(c)(3).

- Enter the amount directly expended by the filing organization for section 527 exempt function activities
- Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt funtion activities
- 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b
- Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing

organization made payments. 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

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

f Grassroots lobbying expenditures

(The term "expenditures" means amounts paid or incurred.) Lia Total lobbying expenditures to influence public opinion (grass roots lobbying) b Total lobbying expenditures to influence a legislative body (direct lobbying) c Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures e Total exempt purpose expenditures (add lines 1c and 1d) f Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is: Not over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000 over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000 over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000 over \$1,000,000 but not over \$1,000,000 \$1,000,000 g Grassroots nontaxable amount (enter 25% of line 1f) Subtract line 1g from line 1a If zero or less, enter -0- i Subtract line 1f from line 1c If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.)	ווטפ	edule C (F	01111 9 9 0 01 9 9 0 - EZ) 2 0 1 1					Page ∠
A Check If the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member expenses, and share of excess lobbying expenditures) Check If the filing organization checked box A and "limited control" provisions apply Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) Organization Total Incurred (The term "expenditures" means amounts paid or incurred.)	Pa	rt II-A		n is exempt under	section 501(c)(3) and fi	iled Form 5768	(election
expenses, and share of excess lobbying expenditures) Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) Limits on Lobbying Expenditures (The term "expenditures to influence public opinion (grass roots lobbying) Lobbying expenditures to influence a legislative body (direct lobbying) Total lobbying expenditures (add lines 1a and 1b) Other exempt purpose expenditures Total obtaining purpose expenditures (add lines 1c and 1d) Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is: If the amount on line 1e, column (a) or (b) is: If the amount on line 1e, column (a) or (b) is: Not over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 S1,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000 but not over \$1,500,000 S1,000 but not over \$1,500,000 Over \$1,0	١	Check		an affiliated group (and	lıst ın Part IV ea	ch affiliated gr	oup member's nam	e, address, EIN,
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Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000 Over \$17,000,000 \$1,00		Over \$500,	000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,0	000		
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Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 2009 Lobbying non-taxable amount		(Sor	ne organizations that made a	section 501(h) el	ection do not	have to co		ne five
beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 2a Lobbying non-taxable amount b Lobbying ceiling amount			Lobbying Exp	enditures During	4-Year Avera	ging Period	d	
b Lobbying ceiling amount				(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
	2a	Lobbyin	g non-taxable amount					
	b							
c Total lobbying expenditures	c	Total loi	obying expenditures					
d Grassroots non-taxable amount	d	Grassro	ots non-taxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))	e							

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

		(6	1)	(b)
		Yes	No	Amount
L	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	
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		Νo	
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		69,000
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No	
i	O ther activities? If "Yes," describe in Part IV			
j	Total lines 1c through 1i			69,000
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	
aı	LIII-A Complete if the organization is exempt under section $501(c)(4)$, section	n 501(c)(5). 0	r section

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	
b	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		

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 political expenditure next year?

Taxable amount of lobbying and political expenditures (see instructions)

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 1i Also, complete this part for any additional information

Identifier	Return Reference	Explanation
PART II B		The Library's lobbying consist of coordinated efforts at the City, State and Federal 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, members of the City Council and the New York City Mayor's office, 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.

DLN: 93493352004022

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

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

Supplemental Financial Statements

Open to Public

пена	F Attach to FC	orm 990. F See separate instructions.	Inspection
	me of the organization OOKLYN PUBLIC LIBRARY		Employer identification number
DICC	SOUTH I SOLIC LIDIUM		11-1904261
Pa	Organizations Maintaining Donor Ad		inds or Accounts. Complete if the
	organization answered "Yes" to Form 99	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	(4,20000 44000 44000	
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advi- funds are the organization's property, subject to the o		or advised Yes No
6	Did the organization inform all grantees, donors, and used only for charitable purposes and not for the ben conferring impermissible private benefit		
Pa	rt II Conservation Easements. Complete	ıf the organizatıon answered "Yes" to	Form 990, Part IV, line 7.
2	Purpose(s) of conservation easements held by the or Preservation of land for public use (e.g., recreating Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qualiceasement on the last day of the tax year	on or pleasure)	historically importantly land area ertified historic structure of a conservation
			Held at the End of the Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements	<u>_</u>	2b
C	Number of conservation easements on a certified his	toric structure included in (a)	2c
d	Number of conservation easements included in (c) ac	equired after 8/17/06	2d
3	Number of conservation easements modified, transfe	rred, released, extinguished, or terminate	d by the organization during
	the taxable year 🗠		
4	Number of states where property subject to conserva	ation easement is located 🛌	<u></u>
5	Does the organization have a written policy regarding enforcement of the conservation easements it holds?		ling of violations, and Yes No
6	Staff and volunteer hours devoted to monitoring, insp	ecting and enforcing conservation easem	ents during the year ►
7	A mount of expenses incurred in monitoring, inspecting	ng, and enforcing conservation easements	during the year
	▶ \$		
8	Does each conservation easement reported on line 2 $170(h)(4)(B)(i)$ and $170(h)(4)(B)(ii)$?		☐ Yes ☐ No
9	In Part XIV, describe how the organization reports contained sheet, and include, if applicable, the text of the organization's accounting for conservation easen	he footnote to the organization's financial	
Par	t IIII Organizations Maintaining Collectio Complete if the organization answered "		or Other Similar Assets.
1a	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 fin	for public exhibition, education or researc	h ın furtherance of public service,
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	oublic exhibition, education, or research in	
	(i) Revenues included in Form 990, Part VIII, line 1		▶ -\$
	(ii) Assets included in Form 990, Part X		► \$
2	If the organization received or held works of art, histofollowing amounts required to be reported under SFA		·
а	Revenues included in Form 990, Part VIII, line 1		► \$

b Assets included in Form 990, Part X

Part	Organizations Maintaining Co	llections of Art	<u>, His</u>	torica	al Trea	sures, or O	<u>the</u>	<u>r Similar Ass</u>	ets (c	ontınued)
3	Using the organization's accession and othe items (check all that apply)	r records, check an	y of th		_	_			n	
а	▼ Public exhibition		d	Г	oan or	exchange progr	ams			
b	Scholarly research		e	Γ	Other					
c	✓ Preservation for future generations									
4	Provide a description of the organization's co	ollections and expla	ıın hov	v they 1	further t	he organization	's ex	empt purpose in		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t								Yes	√ No
Par	Escrow and Custodial Arrang Part IV, line 9, or reported an an	ements. Comple	ete ıf	the o	ganıza	tion answere		es" to Form 99	0,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ian or other interme	ediary	for cor	ntributio	ns or other ass	ets i		Yes	┌ No
b	If "Yes," explain the arrangement in Part XIV	/ and complete the	follow	ıng tab	le	_				
						-		Amo	unt	
С	Beginning balance						1c			
d	Additions during the year					L	1d			
е	Distributions during the year					L	1e			
f	Ending balance					L	1 f			
2a	Did the organization include an amount on Fo	orm 990, Part X, lin	e 21?					Γ	Yes	┌ No
b	If "Yes," explain the arrangement in Part XIV	•								
Pa	t V Endowment Funds. Complete		n ans	wered						
		(a)Current Year	(b)	Prior Ye		Two Years Back	+		(e) Four '	Years Back
1a	Beginning of year balance	3,499,060		2,48	3,700	1,978,75		2,056,789		
b	Contributions	7,170			7,598	504,94	5	21,965		
C	Investment earnings or losses	-52,546		1,09	9,049					
d	Grants or scholarships						↓			
e	Other expenditures for facilities	118,516		ğ	1,287			100,000		
_	and programs				_		+			
f	Administrative expenses	3,335,168		2.40	9,060	2,483,70		1,978,754		
g	End of year balance	, , ,		3,45	19,000	2,463,70	1	1,976,734		
2	Provide the estimated percentage of the year	r end balance held	as							
а	Board designated or quasi-endowment 🕨									
b	Permanent endowment ► 75 000 %									
c	Term endowment ► 25 000 %									
За	Are there endowment funds not in the posses	ssion of the organiz	atıon t	that ar	e held ar	nd administered	d for	the		
	organization by (i) unrelated organizations							3a(i)	Yes	No No
	(ii) related organizations			•			•	3a(ii)	_	No
ь	If "Yes" to 3a(II), are the related organization			chedul	e R? .		•	Su(1)	1	1
4	Describe in Part XIV the intended uses of th						·			
Par	t VI Land, Buildings, and Equipme	ent. See Form 99	0, Pa	rt X, l	ıne 10.					
	<u> </u>				ost or oth		her	(c) Accumulated		
	Description of property				ınvestmei			depreciation	(d) Bo	ook value
	and									
	Buildings		•							
	_easehold improvements		•			14,674		2,138,696	1	12,535,311
	Equipment		•			5,041	_	3,066,643		1,974,820
	Other			<u> </u>	0(-))	5,443		967,174		4,476,776
ıota	I. Add lines 1a-1e <i>(Column (d) should equal Fo</i>	orm 990, Part X, colui	mn (B)	, iine 1	υ(c).) .		•			18,986,907
								Schedule D (Form 9	∌90) 201 :

Part VII Investments—Other Securities. See	Form 990, Part X, line 13	
(a) Description of security or category (including name of security)	(b)Book value	(c) Method of valuation Cost or end-of-year market value
(1)Financial derivatives		Cost of the of year market value
(2)Closely-held equity interests		
Other		
See Additional Data Table		
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	31,184,851	
Part VIII Investments—Program Related. Se	•	
(a) Description of investment type	(b) Book value	(c) Method of valuation
(a) Bescription of investment type	(B) Book Value	Cost or end-of-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)	•	
Part IX Other Assets. See Form 990, Part X, I	ne 15.	
(a) Descri	ption	(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line	15.)	
Part X Other Liabilities. See Form 990, Part	X, line 25.	
1 (a) Description of Liability	(b) A mount	
Federal Income Taxes	0	
	+	
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	0	

Total revenue (Form 990, Part VIII, column (A), line 12) Total expenses (Form 990, Part IX, column (A), line 25) Excess or (deficit) for the year Subtract line 2 from line 1 Net unrealized gains (losses) on investments Donated services and use of facilities Investment expenses Prior period adjustments Other (Describe in Part XIV) Total adjustments (net) Add lines 4 - 8 Excess or (deficit) for the year per financial statements Combine lines 3 and 9 Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue Total revenue, gains, and other support per audited financial statements Amounts included on line 1 but not on Form 990, Part VIII, line 12 Net unrealized gains on investments Recoveries of prior year grants Check (Describe in Part XIV) Add lines 2a through 2d Subtract line 2e from line 1 Investment expenses not included on Form 990, Part VIII, line 12 Add lines 2a through 2d Investment expenses not included on Form 990, Part VIII, line 7b Add lines 4a and 4b Add lines 4a and 4b	1 2 3 4 5	107,433,968 102,805,172 4,628,796 -2,641,435
3 Excess or (deficit) for the year Subtract line 2 from line 1 4 Net unrealized gains (losses) on investments 5 Donated services and use of facilities 6 Investment expenses 7 Prior period adjustments 8 Other (Describe in Part XIV) 9 Total adjustments (net) Add lines 4 - 8 10 Excess or (deficit) for the year per financial statements Combine lines 3 and 9 Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue 1 1 Total revenue, gains, and other support per audited financial statements	3 4 5	4,628,796
4 Net unrealized gains (losses) on investments 5 Donated services and use of facilities 6 Investment expenses 7 Prior period adjustments 8 Other (Describe in Part XIV) 9 Total adjustments (net) Add lines 4 - 8 10 Excess or (deficit) for the year per financial statements Combine lines 3 and 9 Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue 1 Total revenue, gains, and other support per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12 a Net unrealized gains on investments	4 5	
Net unrealized gains (losses) on investments Donated services and use of facilities Investment expenses Prior period adjustments Other (Describe in Part XIV) Total adjustments (net) Add lines 4 - 8 Excess or (deficit) for the year per financial statements Combine lines 3 and 9 Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue Amounts included on line 1 but not on Form 990, Part VIII, line 12 Net unrealized gains on investments	5	-2,641,435
5 Donated services and use of facilities 6 Investment expenses 7 Prior period adjustments 8 Other (Describe in Part XIV) 9 Total adjustments (net) Add lines 4 - 8 10 Excess or (deficit) for the year per financial statements Combine lines 3 and 9 Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue 1 Total revenue, gains, and other support per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12 a Net unrealized gains on investments		
7 Prior period adjustments 8 Other (Describe in Part XIV) 9 Total adjustments (net) Add lines 4 - 8 10 Excess or (deficit) for the year per financial statements Combine lines 3 and 9 Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue 1 Total revenue, gains, and other support per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12 a Net unrealized gains on investments	6	
7 Prior period adjustments 8 Other (Describe in Part XIV) 9 Total adjustments (net) Add lines 4 - 8 10 Excess or (deficit) for the year per financial statements Combine lines 3 and 9 Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue 1 Total revenue, gains, and other support per audited financial statements	•	
Other (Describe in Part XIV) Total adjustments (net) Add lines 4 - 8 Excess or (deficit) for the year per financial statements. Combine lines 3 and 9 Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue Total revenue, gains, and other support per audited financial statements	7	
Total adjustments (net) Add lines 4 - 8 Excess or (deficit) for the year per financial statements. Combine lines 3 and 9 Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue 1. Total revenue, gains, and other support per audited financial statements	8	
Excess or (deficit) for the year per financial statements. Combine lines 3 and 9 Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue 1 Total revenue, gains, and other support per audited financial statements	9	-2,641,435
Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue 1 Total revenue, gains, and other support per audited financial statements	10	1,987,361
Total revenue, gains, and other support per audited financial statements Amounts included on line 1 but not on Form 990, Part VIII, line 12 Net unrealized gains on investments		
a Net unrealized gains on investments	1	137,095,261
b Donated services and use of facilities		
c Recoveries of prior year grants	35	
d Other (Describe in Part XIV)	15	
e Add lines 2a through 2d		
Subtract line 2e from line 1		
A mounts included on Form 990, Part VIII, line 12, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b . 4a 76,6 b Other (Describe in Part XIV) 4b	. 2e	29,737,980
a Investment expenses not included on Form 990, Part VIII, line 7b . 4a 76,6 b Other (Describe in Part XIV) 4b	. 3	107,357,281
b Other (Describe in Part XIV) 4b		
	87	
a Andrius Annual Alb		
c Add lines 4a and 4b	. 4c	76,687
5 Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)		107,433,968
Part XIII Reconciliation of Expenses per Audited Financial Statements With Expen	ses per R	
1 Total expenses and losses per audited financial statements	1	135,107,900
2 Amounts included on line 1 but not on Form 990, Part IX, line 25		
a Donated services and use of facilities	415	
b Prior year adjustments	-	
c Other losses	\neg	
d Other (Describe in Part XIV) 2d	\neg	
e Add lines 2a through 2d	. 2e	32,379,415
3 Subtract line 2e from line 1	. 3	102,728,485
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b 4a 76,	687	
b Other (Describe in Part XIV) 4b		
c Add lines 4a and 4b	. 4c	76,687
Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	. 5	102,805,172
Part XIV Supplemental Information		

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b,

Identifier	Return Reference	Explanation
Part III - QUESTION 1A		THE LIBRARY HAS COLLECTIONS OF NON-CIRCULATING LIBRARY MATERIALS, INCLUDING BOOKS, PERIODICALS AND OTHER ITEMS THESE COLLECTIONS ARE MAINTAINED BY THE LIBRARY UNDER CURATORIAL CARE AND ARE HELD FOR RESEARCH, EDUCATION AND PUBLIC EXHIBITION IN FURTHERANCE OF PUBLIC SERVICE PROCEEDS FROM THE SALES OF COLLECTIONS ARE USED TO ACQUIRE OTHER ITEMS FOR COLLECTIONS THE COST OF COLLECTIONS PURCHASED BY THE LIBRARY IS EXPENSED IN THE YEAR OF PURCHASE THE VALUE OF THE LIBRARY'S COLLECTIONS, FOR FINANCIAL STATEMENT PURPOSES CANNOT BE DETERMINED THE COST OF CIRCULATING BOOKS AND OTHER LIBRARY MATERIALS ARE NOT RECORDED AS COLLECTIONS, BUT ARE RECORDED AS AN EXPENSE IN THE YEAR PURCHASED, AS THE USEFUL LIVES OF SUCH ITEMS ARE RELATIVELY SHORT
PART III - QUESTION 4		Brooklyn Public Library owns and has made accessible several important special collections that include the Hunt Collection of Children's Literature - 7000 juvenile books dating back to the mid 18th century, the Civil War Collection - a 6000 volume collection purchased in 1908, and a circulating orchestral score collections Moreover, the Library's local history unit, the Brooklyn Collection, maintains numerous important collections, none more important that the entire Brooklyn Daily Eagle photography archives over 200,000 images of newsworthy local, national, and international events. The Brooklyn Collection's general photography collection comprise 19th and 20th century photographs, photogravures, portfolios, photo albums, stereo views, and cyanotypes. The collection includes photographs taken by well-known photographers such as Berenice Abbott, Alvin Langdon Coburn, Thomas Roma, Alfred Stieglitz, Irving Underhill, and Underhill and Underhill. In addition, the Brooklyn Collection maintains a number of smaller collections, including some ephemeral collections such as the Brooklyn Dodgers memorabilia collection. The Library's special collections further its exempt purpose in that they provide the people of Brooklyn free and open access to a well-preserved record of society's knowledge, history, and culture
PART V	LINE 4	PART V LINE 4 THE INTENDED USES OF THE ENDOWMENT FUNDS ARE AS FOLLOWS 1 Books - Income from these endowments are to be used to buy books that further the mission of the Library 2 Branch Humanities Programs 3 Staff Welfare 4 Youth and Children's program 5 Willendorf Lecture series 6 Plaza and Auditorium capital campaign 7 The upkeep of technology equipment and ongoing maintenance of the Central Library Information Commons
PART X	LINE 2	The Library is subject to the provisions of Financial Accounting Standards Board's ("FASB") Accounting Standards Codification ("ASC") Topic 740-10-05 relating to the accounting and reporting for uncertainty in income taxes. For the Library, ASC Topic 740-10-05 is potentially applicable to the incurrence of unrelated business income, attributable to passport services provided to the public. However, ASC Topic 740-10-05 has not had, and is not anticipated to have a material impact on the Library's financial statements.

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-STRAT COMMOD FUND	1,170,130	F
MULTI-STRATEGY EQUITY INVESTOR	10,770,086	F
ALL CAP FUND	971,290	F
CORE EQUITY FUND	2,381,265	F
INTERNATIONAL EQUITY FUND	1,786,935	F
EMERGING MARKETS INVESTORS CO	0	F
MSCI EMERGING MARKETS FUND	1,299,138	F
MULTI-STRATEGY BOND INVESTORS	8,091,221	F
REAL RETURN BOND FUND	342,774	F
SSG DIVERSIFYING COMPANY	923,728	F
SSG GLOBAL HEDGED EQUITY	981,284	F
HIGH QUALITY BOND FUND	477,856	F
STRATEGIC SOLUTIONS EQUITY FD	1,671,087	
S&P 500 INDEX NON-LENDING QP	318,057	F

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As Filed Data -

DLN: 93493352004022

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

SCHEDULE G

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.

Supplemental Information Regarding

Fundraising or Gaming Activities

Open to Public Inspection

Name of the organization BROOKLYN PUBLIC LIBRARY						Employer identification number		
					11-1904261			
tivities. Complet	e if the o	organizat	tion answered "Yes"	to Form	990, Part IV	, line 17.		
nızatıon raısed funds	through	any of the	following activities Ch	eck all th	at apply			
	☐ Solicitation of nor	n-government grants						
olicitations		=						
		g	Special fundraisir	ng events				
S								
n Form 990, Part VII st paid individuals or) or entity entities	/ in conne (fundraise	ection with professional ers) pursuant to agreem	fundraısır ents unde	ng services? er which the fui			
(ii) Activity	fundrais custo cont	ser have ody or crol of	(iv) Gross receipts from activity	(or re fundraı	tained by) ser listed in	(vi) A mount paid to (or retained by) organization		
organization is regis	stered or	▶	o solicit funds or has be	een notific	ed it is exempt	from registration or		
	nization raised funds plicitations a written or oral agree Form 990, Part VII st paid individuals or st \$5,000 by the org (ii) Activity	nization raised funds through a collicitations a written or oral agreement win Form 990, Part VII) or entities at \$5,000 by the organization (ii) Activity (iii) fundraise cust contact contribe yes	nization raised funds through any of the e plicitations f g s a written or oral agreement with any income Form 990, Part VII) or entity in connect \$5,000 by the organization Form 99 (iii) Activity (iii) Did fundraiser have custody or control of contributions? Yes No	nization raised funds through any of the following activities. Che Solicitation of noise Solicitations of Solicitation of good Special fundraising Special fundraising Solicitation of good Special fundraising Special fundraising Special fundraising State Solicitation of good Special fundraising Spec	nization raised funds through any of the following activities. Check all the Solicitation of non-government of Solicitations of Solicitation of government of Special fundraising events o	tivities. Complete if the organization answered "Yes" to Form 990, Part IV nization raised funds through any of the following activities. Check all that apply e Solicitation of non-government grants f Solicitation of government grants g Special fundraising events s a written or oral agreement with any individual (including officers, directors, trustees in Form 990, Part VII) or entity in connection with professional fundraising services? st paid individuals or entities (fundraisers) pursuant to agreements under which the function of the fundraiser have custody or control of contributions? (iii) Activity (iiii) Did fundraiser have custody or control of contributions? Yes No (iv) Gross receipts from activity (v) Amount paid to (or retained by) fundraiser listed in col (i)		

	t II	Fundraising Events. Com more than \$15,000 on Form								
			(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events (Add col (a) through				
			ANNUAL GALA (event type)	(event type)	(total number)	col (c))				
⊕ E	1	Gross receipts	435,505		,	435,505				
Revenue	2	Less Charitable contributions	385,225			385,225				
	3	Gross income (line 1 minus line 2)	50,280			50,280				
	4	Cash prizes								
မွှ	5	Non-cash prizes								
Expenses	6	Rent/facility costs								
	7	Food and beverages								
Direct	8	Entertainment								
בֿ	9	Other direct expenses .	54,257			54,257				
	10	Direct expense summary Add lin	es 4 through 9 ın column	(d)	🛌	(54,257)				
	11	Net income summary Combine Ii	nes 3 and 10 ın column (d)		-3,977				
ar	HII	Gaming. Complete if the or \$15,000 on Form 990-EZ, lii		"Yes" to Form 990, Pa	rt IV, line 19, or repo	orted more than				
Кеуелие			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col (a) through col (c))				
	1	Gross revenue								
မ	2	Cash prizes								
Expenses	3	Non-cash prizes								
	4	Rent/facility costs								
Direa	5	Other direct expenses								
	6	Volunteer labor	Г Yes	Г Yes Г No	Г Yes Г No	1				
	7	Direct expense summary Add line	s 2 through 5 ın column (d)		()				
	8	Net gaming income summary Com	bine lines 1 and 7 in colu	mn (d)	<u> ▶</u>					
9										
a										
b										
b										

Sche	dule G (Form 990 or 990-EZ) 20	11			Page 3
11	Does the organization operate ga	aming activities with nonmembers? .		Г _{Yes} Г	- No
12	Is the organization a grantor, be	neficiary or trustee of a trust or a mem	per of a partnership or other entity		
	formed to administer charitable (gamıng?		· · · · F Yes F	- No
13	Indicate the percentage of gamii	ag activity operated in		1 1	
a				13a	
b					
14		f the person who prepares the organiza		<u> </u>	
	Name ►				
	Address ►				
	revenue?	ntract with a third party from whom the			_ No
		ed by the third party 🟲 \$			
С	If "Yes," enter name and address	S			
	Name 🟲				
	Address ►				
16	Gaming manager information				
	Name 🟲				
	Gaming manager compensation I	\$ \$			
	Description of services provided	>			
17 a		Employee er state law to make charitable distribu		· · ·	- No
b	Enter the amount of distributions	required under state law distributed to	o other exempt organizations or sp		-
_		activities during the tax year > \$		hadala C /	
Par	t IV Complete this part to property instructions.)	provide additional information for	responses to quuestion on Sc	nedule G (see	
	Identifier	ReturnReference	Explana	tion	
		•	•		

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DLN: 93493352004022

Employer identification number

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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

BROOKLYN PUBLIC LIBRARY 11-1904261 **Questions Regarding Compensation** Yes Νo Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax idemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e g, maid, chauffeur, chef) If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement orprovision of all the expenses described above? If "No." complete Part III to explain Yes Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? 2 Yes Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply Compensation committee ✓ Written employment contract Compensation survey or study Independent compensation consultant Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization Receive a severance payment or change-of-control payment? 4a Nο 4h Participate in, or receive payment from, a supplemental nonqualified retirement plan? Νo **4**c Participate in, or receive payment from, an equity-based compensation arrangement? Νo If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9. For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of The organization? **5**a Νo 5b Any related organization? Νo If "Yes," to line 5a or 5b, describe in Part III For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of The organization? Νo 6b Any related organization? Νo If "Yes," to line 6a or 6b, describe in Part III For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III 7 Νo Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe ın Part III 8 Νo If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described 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) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, columns (D) and (E) for that individual

(A) Name	,	(B) Breakdown of														
		(i) Base compensation	(ii) Bonus & ıncentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ								
(1) LINDA E JOHNSON	(ı) (ıı)	289,630 0	0	0	0	43,479	9 333,109 0 0	,								
(2) RICHARD REYES- GAVILAN	(ı) (ıı)	132,135 0	0	0	0	36,533	3 168,668 0 0	,								
(3) JOHN VITALI	(ı) (ıı)	196,169 0	0	1 -,, .,,	0 0		8 247,585 0 0	,								
(4) LA WRENCE JENNINGS	(ı) (ıı)	175,560 0	0	·	0	34,566	6 210,126 0 0	,								
(5) SELVON SMITH	(ı) (ıı)	147,862	0	0	0	40,132	187,994									
(6) VINTRESS BROWN	(I) (II)	141,983 0	0	- 1	0	·	3 172,106 0 0	ı								
(7) LAY CHENG LEE	(ı) (ıı)	140,892 0	0	- 1	0	1	9 178,791 0 0	J								
(8) LINDA PORTERA	(I) (II)	138,700	0 0	0	0 0	28,816	6 167,516 0 0	,								
	'			 	 	 		 								
				<u> </u>												
	'			<u> </u>	<u> </u>	<u> </u>										
	'					 		<u> </u>								
	+-'															

Schedule J (Form 990) 2011

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	Return Reference	Explanation
PART I		THE LIBRARY REIMBURSES ALL TRUSTEES, OFFICERS AND EMPLOYEES FOR ALLOWABLE EXPENSES INCURRED IN CARRYING OUT THE MISSION OF THE LIBRARY EXPENSES ARE REIMBURSED IN ACCORDANCE WITH THE LIBRARY'S TRAVEL AND EXPENSE REIMBURSEMENT POLICY

Schedule J (Form 990) 2011

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DLN: 93493352004022

OMB No 1545-0047

Open to Public

Inspection

Department of the Treasury Internal Revenue Service

SCHEDULE M

(Form 990)

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

NonCash Contributions

Name of the organization BROOKLYN PUBLIC LIBRARY

Employer identification number

Рa	rt I Types of Property				11-1904261			
<u> </u>	Types of Floperty	(a) Check If applicable	(b) Number of Contributions or items contributed	(c) Contribution amounts reported on Form 990, Part VIII, line	(d Method of d contributio	etermı	_	
		applicable		1g				
1	Art—Works of art			- "				
	Art—Historical treasures .							
3	Art—Fractional interests							
4	Books and publications	Х		237,600	FMV			
	Clothing and household			,				
	goods							
6	Cars and other vehicles							
	Boats and planes							
	Intellectual property							
	Securities—Publicly traded .							
	Securities—Closely held stock .							
11	Securities—Partnership, LLC, or trust interests							
12	Securities—Miscellaneous							
	Qualified conservation							
-5	contribution—Historic							
14	Qualified conservation contribution—Other							
15	Real estate—Residential .							
16	Real estate—Commercial							
	Real estate—O ther							
	Collectibles							
	Food inventory							
	Drugs and medical supplies .							
21	Taxıdermy							
	Historical artifacts							
	Scientific specimens							
	Archeological artifacts							
	O ther ► ()							
	O ther ►()							
	O ther ►()							
	O ther ► ()							
29	Number of Forms 8283 received for which the organization comp				29			0
	for which the organization comp	eteu Form (5265, Part IV, Dollee ACKI	iowiedgement			Yes	No
30a	During the year, did the organiza	ation receiv	e by contribution any prope	erty reported in Part I lines	1-28 that it		163	140
Jou	must hold for at least three year							
	for exempt purposes for the enti			on, and which is not require	a to be asea	200		No
L	If "Yes," describe the arrangem					30a		
	· -							
31	Does the organization have a gi	ft acceptan	ce policy that requires the	review of any non-standard	contributions?	31	Yes	
32a	Does the organization hire or us contributions?	e third part	es or related organizations	to solicit, process, or sell	non-cash	32a		No
ь	If "Yes," describe in Part II							
33	If the organization did not report describe in Part II	t revenues i	n column (c) for a type of p	roperty 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) 2011

OMB No 1545-0047

2011

Open to Public Inspection

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

Name of the organization BROOKLYN PUBLIC LIBRARY

Employer identification number

11-1904261

	Return Reference	Explanation
PART VI- SECTIONS A AND B AND FORM 8868	PART XI,	LNE4 At its February 21, 2012 meeting, the Board of Trustees of the Library unanimously voted to amend its bylaws to change the length of terms erved by Officers of the Board of Trustees and members of the Executive Committee, and create a new Board Officer (a second Vice-Charperson) position. Under the former bylaws, the Officers of the Board were the Charperson, the Vice-Charperson, the Treasurer, and the Secretary. The Executive Committee included all Board Officers of the Board and Officers of the Board served three one-year terms, and at-large members of the Executive Committee served one one-year term. Under the new bylaws, the Board officers are now the Charperson the Vice Charperson, the Treasurer, and the Secretary. The Executive Committee now includes all Board Officers (including the newly created Vice-Charperson and two "at large" members of the Board. The Charperson will now serve for three two-year terms, the Vice-Charpersons. Treasurer, and Secretary will each serve for two two-year terms, and the at-large members of the Executive Committee will each serve on two-year terms, and the at-large members of the Executive Committee will each serve on two-year terms and the at-large members of the Executive Committee will each serve on two-year terms and the serve and provide greater stability among leadership, entrace a wider range of professional expertise among members, and provide Trustees with additional leadership opportunites LINE 7A in accordance with the Library's by-laws the governing board (Trustees) has the authority to manage and control the affairs of the Library's by-laws the governing board (Trustees) has the authority to manage and control the affairs of the Library's by-laws the governing board (Trustees) has the authority to manage and control the affairs of the Library's by-laws the Governing of the Chy of New York and the President of the Borough of Brooklyn are Ex-Officion system of the Chy Council of the Chy of New York and the President of the Borough of Brooklyn are Ex-Officion
	LINE 5	LOSSES ON INVESTMENTS

Software ID: Software Version:

EIN: 11-1904261

Name: BROOKLYN PUBLIC LIBRARY

Form 990, Special Condition Description:

Special Condition Description

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

(A) Name and Title	(B) A verage		ition		_ _		(D) Reportable	(E) Reportable	(F) Estimated
	hours per week	Individual trustee or director	a Institutional Trustee	officel	 Highest compensated employee	Former	compensation from the organization (W- 2/1099-MISC)	compensation from related organizations (W- 2/1099- MISC)	amount of other compensation from the organization and related organizations
ANTHONY W CROWELL ESQ CHAIRMAN	2 0	Х		х			0	0	0
LAURA ENSLER VICE CHAIR	2 0	×		х			0	0	0
MIRIAM E KATOWITZ VICE-CHAIR	2 0	Х		х			0	0	0
NICHOLAS A GRAVANTE JR VICE-CHAIR	2 0	Х		х			0	0	0
PETER ASCHKENASY TREASURER	2 0	Х		х			0	0	0
ANTONIA YUILLE WILLIAMS SECRETARY	2 0	Х		х			0	0	0
JORDAN D BAROWITZ TRUSTEE	2 0	Х					0	0	0
BONNIE A BELLAMY WATKINS TRUSTEE	2 0	Х					0	0	0
DR ELAINE BUCKBERG TRUSTEE	2 0	Х					0	0	0
KWANZA BUTLER TRUSTEE	2 0	Х					0	0	0
IRIS Y CHIU TRUSTEE	2 0	Х					0	0	0
NINA COLLINS TRUSTEE	2 0	Х					0	0	0
NINA CREWS TRUSTEE	2 0	Х					0		0
JOSEPH I DOUEK TRUSTEE	2 0	Х					0	0	0
ERIC V EVE TRUSTEE	2 0	х					0	0	0
HONORABLE ALICE FISHER RUBIN TRUSTEE	2 0	Х					0	0	0
JERRY GARCIA TRUSTEE	2 0	Х					0	0	0
JEFFREY GENNETTE TRUSTEE	2 0	Х					0	0	0
CAROLYN GREER TRUSTEE	2 0	Х					0	0	0
HONORABLE IRA B HARKAVY TRUSTEE	2 0	Х					0	0	0
BETTY KAHN TRUSTEE	2 0	Х					0	0	0
KYE KIMBALL TRUSTEE	2 0	Х					0	0	0
MICHAEL LIBURD TRUSTEE	2 0	Х					0	0	0
GINO P MENCHINI TRUSTEE	2 0	Х					0	0	0
CARLO A SCISSURA TRUSTEE	2 0	Х				_	0	0	0

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

Compensated Employees, and Independent Contractors											
(A) Name and Title	Name and Title A verage hours		tion (that a		y)			(D) Reportable compensation from the	(E) Reportable compensation	(F) Estimated amount of other	
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations	
SANDRA J SCHUBERT TRUSTEE	2 0	Х						0	0	0	
ROBIN SHANUS TRUSTEE	2 0	Х						0	0	0	
HOWARD SMITH TRUSTEE	2 0	Х						0	0	0	
CHRISTINA TETTONIS TRUSTEE	2 0	Х						0	0	0	
DR LUCILLE COLE THOMAS TRUSTEE	2 0	Х						0	0	0	
LETICIA THEODORE-GREEN TRUSTEE	2 0	Х						0	0	0	
LINDA E JOHNSON PRESIDENT & CEO	35 0			х				289,630	0	43,479	
RICHARD REYES-GAVILAN CHIEF LIBRARIAN	35 0			Х				132,135	0	36,533	
JOHN VITALI EXECUTIVE VP, BUS ADM / CFO	35 0				х			199,917	0	47,668	
LAWRENCE JENNINGS VICE PRES , HUMAN RESOURCES	35 0					х		175,560	0	34,566	
SELVON SMITH VP, INFORMATION TECHNOLOGY	35 0					Х		147,862		40,132	
VINTRESS BROWN VP, FINANCE & CIO	35 0					Х		141,983	0	30,123	
LAY CHENG LEE VP, CAP PLAN & FAC MGMT	35 0					Х		140,892	0	37,899	
LINDA PORTERA DIRECTOR OF NEIGHBORHOOD SVCS	35 0					Х		138,700	0	28,816	