

Return of Organization Exempt From Income Tax

2017

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information.

A For the 2017 calendar year, or tax year beginning 07/01, 2017, and ending 06/30, 2018

Form header section containing organization name (BROOKLYN PUBLIC LIBRARY), address (10 GRAND ARMY PLAZA, BROOKLYN, NY 11238), principal officer (LINDA E. JOHNSON), and tax-exempt status (501(c)(3)).

Part I Summary

Summary table with columns for line number, description, Prior Year, Current Year, and Net Assets or Fund Balances. Includes rows for mission, revenue, expenses, and net assets.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.

Signature block section with fields for officer signature (LINDA E. JOHNSON), preparer name (CANDICE METH), and firm information (EISNERAMPER LLP).

May the IRS discuss this return with the preparer shown above? (see instructions) [X] Yes [] No

For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2017)

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III Yes No

1 Briefly describe the organization's mission:

IT IS THE MISSION OF THE LIBRARY TO ENSURE THE PRESERVATION AND TRANSMISSION OF SOCIETY'S KNOWLEDGE, HISTORY AND CULTURE, AND TO PROVIDE THE PEOPLE OF BROOKLYN WITH FREE AND OPEN ACCESS TO INFORMATION FOR EDUCATION, RECREATION AND REFERENCE.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No
If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No
If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 25,631,146. including grants of \$) (Revenue \$ 690,885.)

ATTACHMENT 1

4b (Code:) (Expenses \$ 89,099,682. including grants of \$) (Revenue \$ 2,401,647.)

ATTACHMENT 2

4c (Code:) (Expenses \$ 7,323,530. including grants of \$) (Revenue \$ 197,396.)

ATTACHMENT 3

4d Other program services (Describe in Schedule O.)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses ▶ 122,054,358.

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A.</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I.</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II.</i>	X	
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? <i>If "Yes," complete Schedule C, Part III.</i>		X
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? <i>If "Yes," complete Schedule D, Part I.</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II.</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III.</i>	X	
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV.</i>		X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V.</i>	X	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI.</i>	X	
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? <i>If "Yes," complete Schedule D, Part VII.</i>		X
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? <i>If "Yes," complete Schedule D, Part VIII.</i>		X
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? <i>If "Yes," complete Schedule D, Part IX.</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X.</i>		X
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)? <i>If "Yes," complete Schedule D, Part X.</i>	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII.</i>	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional.</i>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E.</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
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 "Yes," complete Schedule F, Parts I and IV.</i>	X	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV.</i>		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV.</i>		X
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? <i>If "Yes," complete Schedule G, Part I</i> (see instructions).		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II.</i>	X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III.</i>		X

Part IV Checklist of Required Schedules (continued)

	Yes	No
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H.</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II.</i>		X
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III.</i>		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J.</i>	X	
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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a.</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I.</i>		X
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? <i>If "Yes," complete Schedule L, Part I.</i>		X
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II.</i>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III.</i>		X
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):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV.</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV.</i>		X
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 direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV.</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M.</i>	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M.</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I.</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II.</i>		X
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 "Yes," complete Schedule R, Part I.</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1.</i>		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2.</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2.</i>		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI.</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V [X]

Table with columns for question number, description, sub-questions (1a-14b), Yes, and No. Includes questions about Form 1096, Form W-2G, Form W-3, Form 990-T, Form 8886-T, Form 8282, Form 8899, Form 1098-C, Form 4966, Form 720, and Form 702.

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

Check if Schedule O contains a response or note to any line in this Part VI [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include 1a (34), 1b (34), 2, 3, 4, 5, 6, 7a, 7b, 8a, 8b, 9.

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include 10a, 10b, 11a, 11b, 12a, 12b, 12c, 13, 14, 15a, 15b, 16a, 16b.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed NY,
18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
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 during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records: AMADU WAGIE, VP OF FINANCE 10 GRAND ARMY PLAZA BROOKLYN, NY 11238 718-230-2165

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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 organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) NICHOLAS A. GRAVANTE, JR. TRUSTEE	2.00 0.	X						0.	0.	0.
(2) SUSAN MARCINEK CHAIR	2.00 0.	X		X				0.	0.	0.
(3) MIRIAM KATOWITZ TREASURER	2.00 0.	X		X				0.	0.	0.
(4) PETER ASCHKENASY VICE CHAIR	2.00 0.	X		X				0.	0.	0.
(5) JORDAN BAROWITZ VICE CHAIR	2.00 0.	X		X				0.	0.	0.
(6) ANTHONY CROWELL, ESQ VICE CHAIR	2.00 0.	X		X				0.	0.	0.
(7) NINA COLLINS VICE CHAIR	2.00 0.	X		X				0.	0.	0.
(8) ROBIN SHANUS SECRETARY	2.00 0.	X		X				0.	0.	0.
(9) JOSEPH I. DOUEK TRUSTEE	2.00 0.	X						0.	0.	0.
(10) HONORABLE ALICE FISHER RUBIN TRUSTEE	2.00 0.	X						0.	0.	0.
(11) MICHAEL LIBURD TRUSTEE	2.00 0.	X						0.	0.	0.
(12) GINO P MENCHINI TRUSTEE	2.00 0.	X						0.	0.	0.
(13) SANDRA SCHUBERT TRUSTEE	2.00 0.	X						0.	0.	0.
(14) CHRISTINA TETTONIS TRUSTEE	2.00 0.	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15) DR. LUCILLE C. THOMAS ----- TRUSTEE	2.00 ----- 0.	X						0.	0.	0.
(16) CINDI LEIVE ----- TRUSTEE	2.00 ----- 0.	X						0.	0.	0.
(17) GREGORY DAVIDZON ----- TRUSTEE	2.00 ----- 0.	X						0.	0.	0.
(18) HANK GUTMAN ----- TRUSTEE	2.00 ----- 0.	X						0.	0.	0.
(19) INGRID LEWIS-MARTIN ----- TRUSTEE	2.00 ----- 0.	X						0.	0.	0.
(20) KIM-THU POSNETT ----- TRUSTEE	2.00 ----- 0.	X						0.	0.	0.
(21) MICHAEL BEST ----- TRUSTEE	2.00 ----- 0.	X						0.	0.	0.
(22) LISA PRICE ----- TRUSTEE	2.00 ----- 0.	X						0.	0.	0.
(23) KYLE KIMBALL ----- TRUSTEE	2.00 ----- 0.	X						0.	0.	0.
(24) PATRICK TRAIN-GUTIERREZ ----- TRUSTEE	2.00 ----- 0.	X						0.	0.	0.
(25) BLAKE FOOTE ----- TRUSTEE	2.00 ----- 0.	X						0.	0.	0.
1b Sub-total								0.	0.	0.
c Total from continuation sheets to Part VII, Section A								2,040,395.	0.	360,207.
d Total (add lines 1b and 1c)								2,040,395.	0.	360,207.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ► 59

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

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
ATTACHMENT 4		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ► 41

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(26) ABE GEORGE ----- TRUSTEE	2.00 ----- 0.	X						0.	0.	0.
(27) CASSANDRA METZ ----- TRUSTEE	2.00 ----- 0.	X						0.	0.	0.
(28) BRIAN O'NEIL ----- TRUSTEE	2.00 ----- 0.	X						0.	0.	0.
(29) ROSEANN PARADISO-FODERA ----- TRUSTEE	2.00 ----- 0.	X						0.	0.	0.
(30) LISA PULEO ----- TRUSTEE	2.00 ----- 0.	X						0.	0.	0.
(31) BARATUNDE THURSTON ----- TRUSTEE	2.00 ----- 0.	X						0.	0.	0.
(32) TIMOTHY J. INGRASSIA ----- TRUSTEE	2.00 ----- 0.	X						0.	0.	0.
(33) DAVID WOMACK ----- TRUSTEE	2.00 ----- 0.	X						0.	0.	0.
(34) CAROLEE FINK ----- TRUSTEE	2.00 ----- 0.	X						0.	0.	0.
(35) ANTONIA YUILLE WILLIAMS ----- TRUSTEE (UNTIL 5/22/2018)	2.00 ----- 0.	X						0.	0.	0.
(36) RACHEL LAUTER ----- TRUSTEE (UNTIL 3/31/2018)	2.00 ----- 0.	X						0.	0.	0.
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **▶** 59

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

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(37) REGINALD SHELL ----- TRUSTEE (UNTIL 6/26/2018)	2.00 ----- 0.	X						0.	0.	0.
(38) LINDA E. JOHNSON ----- PRESIDENT & CEO	35.00 ----- 0.			X				429,119.	0.	42,998.
(39) LISA ROSENBLUM ----- CHIEF LIBRARIAN (UNTIL 1/3/18)	35.00 ----- 0.			X				228,924.	0.	28,959.
(40) BRETT D. ROBINSON ----- EVP FINANCE/CFO	35.00 ----- 0.			X				235,588.	0.	58,513.
(41) DAVID WOLOCH ----- EVP OF EXTERNAL AFFAIRS	35.00 ----- 0.				X			201,846.	0.	39,552.
(42) LAWRENCE JENNINGS ----- VP OF HUMAN RESOURCES	35.00 ----- 0.					X		206,631.	0.	37,247.
(43) LASZLO J. ORSOS ----- VP OF ARTS AND CULTURE	35.00 ----- 0.					X		195,564.	0.	34,043.
(44) AMADU WAGIE ----- VP OF FINANCE	35.00 ----- 0.					X		187,081.	0.	31,299.
(45) SELVON SMITH ----- VP OF INFORMATION TECHNOLOGY	35.00 ----- 0.					X		180,896.	0.	51,666.
(46) STEVEN R. GOLD ----- VP OF SAFETY AND SECURITY	35.00 ----- 0.					X		174,746.	0.	35,930.
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **▶** 59

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

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

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

Part VIII Statement of Revenue

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

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a						
	b Membership dues	1b						
	c Fundraising events	1c	1,101,050.					
	d Related organizations	1d						
	e Government grants (contributions)	1e	129,592,859.					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	5,636,012.					
	g Noncash contributions included in lines 1a-1f: \$		82,171.					
	h Total. Add lines 1a-1f ▶			136,329,921.				
Program Service Revenue	2a FINES AND FEES	Business Code	519100	2,096,773.	2,096,773.			
	b DUPLICATE CARDS		519100	19,869.	19,869.			
	c BOOK SALES		519100	54,428.	54,428.			
	d PRINT AND COPY		519100	469,619.	469,619.			
	e MISCELLANEOUS		519100	649,239.	649,239.			
	f All other program service revenue							
	g Total. Add lines 2a-2f ▶			3,289,928.				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts). ▶			1,480,445.			1,480,445.	
	4 Income from investment of tax-exempt bond proceeds . ▶			0.				
	5 Royalties ▶			0.				
	6a Gross rents	(i) Real	(ii) Personal					
		b Less: rental expenses						
	c Rental income or (loss)							
	d Net rental income or (loss) ▶				0.			
	7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other					
		19,138,391.						
	b Less: cost or other basis and sales expenses				18,303,779.			
	c Gain or (loss)				834,612.			
	d Net gain or (loss) ▶				834,612.		834,612.	
	8a Gross income from fundraising events (not including \$ 1,101,050. of contributions reported on line 1c). See Part IV, line 18 a				110,775.			
	b Less: direct expenses b				187,309.			
	c Net income or (loss) from fundraising events. ▶				-76,534.		-76,534.	
9a Gross income from gaming activities. See Part IV, line 19 a								
b Less: direct expenses b								
c Net income or (loss) from gaming activities. ▶				0.		0.		
10a Gross sales of inventory, less returns and allowances a								
b Less: cost of goods sold b								
c Net income or (loss) from sales of inventory. ▶				0.		0.		
Miscellaneous Revenue			Business Code					
11a CAFE INCOME			900099	39,354.	39,354.			
b PASSPORT INCOME			900099	1,068,083.		1,068,083.		
c _____								
d All other revenue								
e Total. Add lines 11a-11d ▶				1,107,437.				
12 Total revenue. See instructions. ▶				142,965,809.	3,329,282.	1,068,083.	2,238,523.	

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 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 domestic organizations and domestic governments. See Part IV, line 21	0.			
2 Grants and other assistance to domestic individuals. See Part IV, line 22	0.			
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. 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	1,195,869.	200,459.	778,611.	216,799.
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	60,978,067.	56,032,259.	3,384,127.	1,561,681.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	9,819,160.	8,880,861.	657,423.	280,876.
9 Other employee benefits	19,651,307.	17,773,467.	1,315,716.	562,124.
10 Payroll taxes	5,987,468.	5,415,315.	400,881.	171,272.
11 Fees for services (non-employees):				
a Management	0.			
b Legal	202,318.	106,393.	95,914.	11.
c Accounting	94,395.		94,395.	
d Lobbying	120,000.		120,000.	
e Professional fundraising services. See Part IV, line 17.	0.			
f Investment management fees	200,324.		200,324.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	8,201,236.	6,375,837.	1,304,081.	521,318.
12 Advertising and promotion	425,317.	360,712.	36,491.	28,114.
13 Office expenses	208,052.	161,631.	31,369.	15,052.
14 Information technology	3,427,799.	3,277,928.	133,960.	15,911.
15 Royalties	0.			
16 Occupancy	3,253,863.	1,747,118.	1,506,575.	170.
17 Travel	310,920.	274,670.	24,010.	12,240.
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	4,010,098.	4,010,098.		
23 Insurance	885,290.	793,023.	92,267.	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a BOOKS AND LIBRARY MATERIALS	9,627,733.	9,627,733.		
b SUPPLIES	2,978,648.	2,605,728.	165,400.	207,520.
c STAFF DEVELOPMENT & TRAINING	211,705.	185,680.	18,754.	7,271.
d REPAIRS AND MAINTENANCE	4,154,482.	3,750,224.	342,681.	61,577.
e All other expenses	772,003.	475,222.	252,688.	44,093.
25 Total functional expenses. Add lines 1 through 24e	136,716,054.	122,054,358.	10,955,667.	3,706,029.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)	0.			

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	43,569.	1	44,500.
	2 Savings and temporary cash investments	42,908,051.	2	17,224,940.
	3 Pledges and grants receivable, net	8,834,076.	3	11,875,467.
	4 Accounts receivable, net	0.	4	0.
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	0.	5	0.
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L	0.	6	0.
	7 Notes and loans receivable, net	0.	7	0.
	8 Inventories for sale or use	0.	8	0.
	9 Prepaid expenses and deferred charges	263,997.	9	360,490.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 58,425,721.		
	b Less: accumulated depreciation	10b 15,866,762.	38,540,416.	10c 42,558,959.
	11 Investments - publicly traded securities	44,071,383.	11	63,661,322.
	12 Investments - other securities. See Part IV, line 11	0.	12	1,672,427.
	13 Investments - program-related. See Part IV, line 11	0.	13	0.
	14 Intangible assets	0.	14	0.
	15 Other assets. See Part IV, line 11	133,009.	15	3,348.
16 Total assets. Add lines 1 through 15 (must equal line 34)	134,794,501.	16	137,401,453.	
Liabilities	17 Accounts payable and accrued expenses	23,800,243.	17	23,018,389.
	18 Grants payable	0.	18	0.
	19 Deferred revenue	1,750,142.	19	2,295,060.
	20 Tax-exempt bond liabilities	0.	20	0.
	21 Escrow or custodial account liability. Complete Part IV of Schedule D	0.	21	0.
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L	0.	22	0.
	23 Secured mortgages and notes payable to unrelated third parties	0.	23	0.
	24 Unsecured notes and loans payable to unrelated third parties	0.	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 D	0.	25	0.
	26 Total liabilities. Add lines 17 through 25	25,550,385.	26	25,313,449.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	79,050,142.	27	83,045,692.
	28 Temporarily restricted net assets	27,578,970.	28	26,421,803.
	29 Permanently restricted net assets	2,615,004.	29	2,620,509.
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	109,244,116.	33	112,088,004.
	34 Total liabilities and net assets/fund balances	134,794,501.	34	137,401,453.

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	142,965,809.
2	Total expenses (must equal Part IX, column (A), line 25)	2	136,716,054.
3	Revenue less expenses. Subtract line 2 from line 1	3	6,249,755.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	109,244,116.
5	Net unrealized gains (losses) on investments	5	393,635.
6	Donated services and use of facilities	6	0.
7	Investment expenses	7	0.
8	Prior period adjustments	8	0.
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-3,799,502.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	112,088,004.

Part XII Financial Statements and Reporting

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

- 1** Accounting method used to prepare the Form 990: Cash Accrual Other _____
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- b** Were the organization's financial statements audited by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- c** If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.
- 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?
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

	Yes	No
2a		X
2b	X	
2c	X	
3a	X	
3b	X	

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2017

Open to Public Inspection

Name of the organization

BROOKLYN PUBLIC LIBRARY

Employer identification number

11-1904261

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

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

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

g Provide the following information about the supported organization(s).

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

Part II Support Schedule for Organizations Described in Sections 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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	102,484,943.	116,196,465.	125,288,677.	148,948,797.	136,329,921.	629,248,803.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
3 The value of services or facilities furnished by a governmental unit to the organization without charge						0.
4 Total. Add lines 1 through 3.	102,484,943.	116,196,465.	125,288,677.	148,948,797.	136,329,921.	629,248,803.
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).						0.
6 Public support. Subtract line 5 from line 4						629,248,803.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
7 Amounts from line 4.	102,484,943.	116,196,465.	125,288,677.	148,948,797.	136,329,921.	629,248,803.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	978,113.	952,478.	1,269,062.	1,070,953.	1,480,445.	5,751,051.
9 Net income from unrelated business activities, whether or not the business is regularly carried on	169,297.	345,667.	444,178.	490,255.	366,808.	1,816,205.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	178,232.	47,115.	39,354.	39,353.	39,354.	343,408.
11 Total support. Add lines 7 through 10						637,159,467.
12 Gross receipts from related activities, etc. (see instructions)					12	14,964,028.
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f)).	14	98.76%
15 Public support percentage from 2016 Schedule A, Part II, line 14	15	98.34%
16a 33 1/3% support test - 2017. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here . The organization qualifies as a publicly supported organization. ▶ <input checked="" type="checkbox"/>		
b 33 1/3% support test - 2016. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here . The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
17a 10%-facts-and-circumstances test - 2017. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here . Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization. ▶ <input type="checkbox"/>		
b 10%-facts-and-circumstances test - 2016. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here . Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ <input type="checkbox"/>		

Part III Support Schedule for Organizations Described in Section 509(a)(2)
 (Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II.
 If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5.						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b.						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9 Amounts from line 6.						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources.						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2017 (line 8, column (f) divided by line 13, column (f)).	15	%
16 Public support percentage from 2016 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2017 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2016 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2017. 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 more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization .

b 33 1/3% support tests - 2016. 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 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

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

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>	1	

Section D. All Type III Supporting Organizations

		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>	2	
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>	3	

Section E. Type III Functionally Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
a	<input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c	<input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2	Activities Test. Answer (a) and (b) below.		
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>	2a	
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>	2b	
3	Parent of Supported Organizations. Answer (a) and (b) below.		
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a	
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>	3b	

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

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4).	8		

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		

Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

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

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions.	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2017 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1 Distributable amount for 2017 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2017 (reasonable cause required-explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2017			
a			
b From 2013			
c From 2014			
d From 2015			
e From 2016			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2017 distributable amount			
i Carryover from 2012 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2017 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2017 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2017, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2017. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2018. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2013			
b Excess from 2014			
c Excess from 2015			
d Excess from 2016			
e Excess from 2017			

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

SCHEDULE A, PART II, LINE 10

THE AMOUNT REPORTED INCLUDES INSURANCE PROCEEDS RECEIVED IN FY 2013 AND
FY 2014 AS REIMBURSEMENT FOR LOSSES SUFFERED BY THE LIBRARY DURING
SUPER-STORM SANDY, AND REVENUE GENERATED FROM A CAFETERIA OPERATED AT THE
CENTRAL LIBRARY FOR THE BENEFIT OF PATRONS AND STAFF.

Schedule of Contributors

2017

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
▶ Go to www.irs.gov/Form990 for the latest information.

Name of the organization

BROOKLYN PUBLIC LIBRARY

Employer identification number

11-1904261

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization <u>BROOKLYN PUBLIC LIBRARY</u>	Employer identification number <u>11-1904261</u>
------------------------------------------------------------	------------------------------------------------------------

Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	<u>CITY OF NEW YORK</u> <u>C/O BROOKLYN PUBLIC LIBRARY</u> <u>BROOKLYN, NY 11238</u>	\$ <u>117,268,908.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	<u>NYS DEPARTMENT OF EDUCATION</u> <u>C/O BROOKLYN PUBLIC LIBRARY</u> <u>BROOKLYN, NY 11238</u>	\$ <u>10,210,150.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization **BROOKLYN PUBLIC LIBRARY**

Employer identification number

11-1904261

Part II **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
_____	_____ _____ _____	\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
_____	_____ _____ _____	\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
_____	_____ _____ _____	\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
_____	_____ _____ _____	\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
_____	_____ _____ _____	\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
_____	_____ _____ _____	\$ _____	_____

Name of organization **BROOKLYN PUBLIC LIBRARY**

Employer identification number
11-1904261

Part III *Exclusively* religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ► \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_____	_____ _____ _____	_____ _____ _____	_____ _____ _____

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
_____ _____ _____	_____ _____ _____

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_____	_____ _____ _____	_____ _____ _____	_____ _____ _____

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
_____ _____ _____	_____ _____ _____

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_____	_____ _____ _____	_____ _____ _____	_____ _____ _____

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
_____ _____ _____	_____ _____ _____

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_____	_____ _____ _____	_____ _____ _____	_____ _____ _____

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
_____ _____ _____	_____ _____ _____

SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

For Organizations Exempt From Income Tax Under section 501(c) and section 527

2017

Department of the Treasury
Internal Revenue Service

▶ **Complete if the organization is described below.** ▶ **Attach to Form 990 or Form 990-EZ.**
▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

Open to Public Inspection

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

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

If the organization answered "Yes," on 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," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization BROOKLYN PUBLIC LIBRARY	Employer identification number 11-1904261
-------------------------------------------------	----------------------------------------------

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. (see instructions for definition of "political campaign activities")
- 2 Political campaign activity expenditures (see instructions) ▶ \$ _____
- 3 Volunteer hours for political campaign activities (see instructions)

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

- 1 Enter the amount of any excise tax incurred by the organization under section 4955. ▶ \$ _____
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ _____
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
- 4a Was a correction made? Yes No
- b If "Yes," describe in Part IV.

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

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities. ▶ \$ _____
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$ _____
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ▶ \$ _____
- 4 Did the filing organization file **Form 1120-POL** for this year? Yes No
- 5 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.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

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

Schedule C (Form 990 or 990-EZ) 2017

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

A Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).

B 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.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a 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.															
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	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 \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
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 \$17,000,000	\$1,000,000.														
g Grassroots nontaxable amount (enter 25% of line 1f)															
h 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?			<input type="checkbox"/> Yes <input type="checkbox"/> No												

4-Year Averaging Period Under section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

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

Table with 3 main columns: Description, (a) Yes/No, and (b) Amount. Rows include: 1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation...; a Volunteers?; b Paid staff or management...; c Media advertisements?; d Mailings to members...; e Publications...; f Grants to other organizations...; g Direct contact with legislators...; h Rallies, demonstrations...; i Other activities?; j Total...; 2a Did the activities in line 1 cause the organization to be not described...; b If "Yes," enter the amount of any tax incurred...; c If "Yes," enter the amount of any tax incurred...; d If the filing organization incurred a section 4912 tax, did it file Form 4720...?

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

Table with 3 columns: Question, Yes, No. Rows include: 1 Were substantially all (90% or more) dues received nondeductible by members?; 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?; 3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?

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

Table with 2 main columns: Description and Amount. Rows include: 1 Dues, assessments and similar amounts from members; 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid); a Current year; b Carryover from last year; c Total; 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues; 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...; 5 Taxable amount of lobbying and political expenditures (see instructions)

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

SEE PAGE 4

Part IV Supplemental Information (continued)

PART II B- LINE 1A

THE LIBRARY'S LOBBYING CONSISTS 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 TO 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.

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

2017

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Attach to Form 990.

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

Name of the organization

BROOKLYN PUBLIC LIBRARY

Employer identification number

11-1904261

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

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

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 1 Total number at end of year, 2 Aggregate value of contributions to (during year), 3 Aggregate value of grants from (during year), 4 Aggregate value at end of year, 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?, 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

Part II Conservation Easements.

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

Table with 2 columns: Held at the End of the Tax Year. Rows include: 1 Purpose(s) of conservation easements held by the organization (check all that apply), 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year, 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year, 4 Number of states where property subject to conservation easement is located, 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?, 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year, 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year, 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?, 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

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

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

Table with 2 columns: Revenue, Assets. Rows include: 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items., 1b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1., (ii) Assets included in Form 990, Part X., 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part VIII, line 1., b Assets included in Form 990, Part X.

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

Schedule D (Form 990) 2017

JSA 7E1268 2.000

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a** Public exhibition
 - b** Scholarly research
 - c** Preservation for future generations
 - d** Loan or exchange programs
 - e** Other _____
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5** During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b** If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|----------------------------------------|-----------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds.

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	3,935,809.	3,796,364.	3,914,090.	4,001,567.	3,601,049.
b Contributions	5,505.	20,303.	77,787.	8,476.	5,420.
c Net investment earnings, gains, and losses	233,149.	301,112.	-50,815.	72,026.	552,011.
d Grants or scholarships					
e Other expenditures for facilities and programs	190,952.	181,970.	144,698.	167,979.	156,913.
f Administrative expenses					
g End of year balance	3,983,511.	3,935,809.	3,796,364.	3,914,090.	4,001,567.

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a** Board designated or quasi-endowment _____ %
- b** Permanent endowment 65.7800 %
- c** Temporarily restricted endowment 34.2200 %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

	Yes	No
(i) unrelated organizations	<input type="checkbox"/>	<input checked="" type="checkbox"/>
(ii) related organizations	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?	<input type="checkbox"/>	<input type="checkbox"/>

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		31,643,962.	5,748,441.	25,895,521.
d Equipment		6,872,536.	3,960,106.	2,912,430.
e Other		19,909,223.	6,158,215.	13,751,008.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				42,558,959.

Part VII Investments - Other Securities.

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

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

Part VIII Investments - Program Related.

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

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

Part IX Other Assets.

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

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

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value	
(1) Federal income taxes		
(2) _____		
(3) _____		
(4) _____		
(5) _____		
(6) _____		
(7) _____		
(8) _____		
(9) _____		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ►		

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	177,663,368.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	393,635.
b	Donated services and use of facilities	2b	34,504,248.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	34,897,883.
3	Subtract line 2e from line 1	3	142,765,485.
4	Amounts 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	200,324.
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	200,324.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	142,965,809.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	174,819,480.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	34,504,248.
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	3,799,502.
e	Add lines 2a through 2d	2e	38,303,750.
3	Subtract line 2e from line 1	3	136,515,730.
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	200,324.
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	200,324.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	136,716,054.

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

SEE PAGE 5

Part XIII Supplemental Information (continued)

SCHEDULE D, PART III- LINE A

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.

SCHEDULE D, PART III - LINE 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 COLLECTION. 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

Part XIII Supplemental Information (continued)

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.

SCHEDULE D, 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

SCHEDULE D, PART X - LINE 2

THE LIBRARY IS SUBJECT TO THE PROVISIONS OF THE FINANCIAL ACCOUNTING STANDARDS BOARD'S ("FASB") ACCOUNTING STANDARDS CODIFICATION ("ASC") TOPIC 740, "INCOME TAXES", RELATING TO ACCOUNTING AND REPORTING FOR UNCERTAINTY IN INCOME TAXES. FOR THE LIBRARY, ASC TOPIC 740 IS POTENTIALLY APPLICABLE TO THE INCURRENCE OF UNRELATED BUSINESS INCOME,

Part XIII Supplemental Information (continued)

ATTRIBUTABLE TO PASSPORT SERVICES PROVIDED TO THE PUBLIC. BECAUSE THE LIBRARY HAS ALWAYS ACCRUED A TAX LIABILITY FOR THESE ITEMS AND BECAUSE OF THE LIBRARY'S GENERAL TAX-EXEMPT STATUS, MANAGEMENT BELIEVES ASC TOPIC 740 HAS NOT HAD, AND IS NOT ANTICIPATED TO HAVE, A MATERIAL IMPACT ON THE LIBRARY'S FINANCIAL STATEMENTS.

SCHEDULE D, PART XII, LINE 2D

THE \$3,799,502 INCLUDED IN EXPENSES FOR THE FINANCIAL STATEMENT PURPOSES BUT TREATED AS OTHER RECONCILING ITEMS TO THE NET ASSETS FOR TAX RETURN PURPOSE INCLUDE LOSSES ON DISPOSAL OF PROPERTY AND EQUIPMENT OF \$354,205 AND REIMBURSABLE CAPITAL GRANT TOWARDS THE CONSTRUCTION OF THE NEW GREENPOINT LIBRARY AND ENVIRONMENTAL EDUCATION CENTER IN THE AMOUNT OF \$3,445,297.

**SCHEDULE F
(Form 990)**

Statement of Activities Outside the United States

OMB No. 1545-0047

2017

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

- ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.
- ▶ Attach to Form 990.
- ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization

BROOKLYN PUBLIC LIBRARY

Employer identification number

11-1904261

Part I **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
(1) CENTRAL AMERICA/CARIBBEAN	0.	0.	INVESTMENTS		1,672,427.
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					
(11)					
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
3a Sub-total					1,672,427.
b Total from continuation sheets to Part I					
c Totals (add lines 3a and 3b)					1,672,427.

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

Schedule F (Form 990) 2017

JSA
7E1274 1.000

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ▶ _____

3 Enter total number of other organizations or entities ▶ _____

Part III **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 16.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* Yes No
- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)* Yes No
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471)* Yes No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)* Yes No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* Yes No
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)* Yes No

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

PART I, LINE 3, COLUMN F

THE LIBRARY HAD INVESTMENTS IN CAYMAN ISLAND-BASED FUND OF \$1,672,427 AS
OF JUNE 30, 2018.

SCHEDULE G
(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No. 1545-0047

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

2017

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

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

Name of the organization

Employer identification number

BROOKLYN PUBLIC LIBRARY

11-1904261

Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

- 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- a Mail solicitations
 - b Internet and email solicitations
 - c Phone solicitations
 - d In-person solicitations
 - e Solicitation of non-government grants
 - f Solicitation of government grants
 - g Special fundraising events
- 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No
- b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total						

- 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		ANNUAL GALA	BRKLYN CLASSIC		(add col. (a) through col. (c))
		(event type)	(event type)	(total number)	
Revenue	1	Gross receipts	1,146,673.	65,152.	1,211,825.
	2	Less: Contributions	1,051,738.	49,312.	1,101,050.
	3	Gross income (line 1 minus line 2)	94,935.	15,840.	110,775.
Direct Expenses	4	Cash prizes			
	5	Noncash prizes			
	6	Rent/facility costs	136,160.	30,628.	166,788.
	7	Food and beverages			
	8	Entertainment			
	9	Other direct expenses	16,325.	4,196.	20,521.
	10	Direct expense summary. Add lines 4 through 9 in column (d) ▶			
11	Net income summary. Subtract line 10 from line 3, column (d) ▶				-76,534.

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
		1	Gross revenue		
Direct Expenses	2	Cash prizes			
	3	Noncash prizes			
	4	Rent/facility costs			
	5	Other direct expenses			
	6	Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No
7	Direct expense summary. Add lines 2 through 5 in column (d) ▶				
8	Net gaming income summary. Subtract line 7 from line 1, column (d) ▶				

9 Enter the state(s) in which the organization conducts gaming activities: _____
 a Is the organization licensed to conduct gaming activities in each of these states? Yes No
 b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No
 b If "Yes," explain: _____

- 11 Does the organization conduct gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13 Indicate the percentage of gaming activity conducted in:

a The organization's facility	13a	%
b An outside facility	13b	%
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ _____

Address ▶ _____

- 15 a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No
- b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____.
- c If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

- Director/officer
- Employee
- Independent contractor

17 Mandatory distributions:

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV **Supplemental Information.** Provide the explanation required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

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

- ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
- ▶ Attach to Form 990.
- ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2017

**Open to Public
Inspection**

Name of the organization

BROOKLYN PUBLIC LIBRARY

Employer identification number

11-1904261

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--------------------------------------------------------------------|-----------------------------------------------------------------------------|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input checked="" type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (such as, maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|--------------------------------------------------------------|-------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> Compensation committee | <input checked="" type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
 - b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
 - c** Participate in, or receive payment from, an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
 - b** Any related organization?
- If "Yes" on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
 - b** Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III.

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b	X	
2	X	
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

Schedule J (Form 990) 2017

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1	LINDA E. JOHNSON PRESIDENT & CEO	(i) 374,511.	(ii) 50,000.	(iii) 4,608.	33,800.	9,198.	472,117.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
2	LISA ROSENBLUM CHIEF LIBRARIAN (UNTIL 1/3/18)	(i) 228,924.	(ii) 0.	(iii) 0.	18,314.	10,645.	257,883.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
3	BRETT D. ROBINSON EVP FINANCE/CFO	(i) 235,588.	(ii) 0.	(iii) 0.	37,223.	21,290.	294,101.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
4	DAVID WOLOCH EVP OF EXTERNAL AFFAIRS	(i) 201,846.	(ii) 0.	(iii) 0.	16,468.	23,084.	241,398.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
5	LAWRENCE JENNINGS VP OF HUMAN RESOURCES	(i) 206,631.	(ii) 0.	(iii) 0.	32,648.	4,599.	243,878.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
6	LASZLO J. ORSOS VP OF ARTS AND CULTURE	(i) 195,564.	(ii) 0.	(iii) 0.	24,844.	9,199.	229,607.	0.
	(ii)	0.	0.	0.				
7	AMADU WAGIE VP OF FINANCE	(i) 187,081.	(ii) 0.	(iii) 0.	29,559.	1,740.	218,380.	0.
	(ii)	0.	0.	0.				
8	SELVON SMITH VP OF INFORMATION TECHNOLOGY	(i) 180,896.	(ii) 0.	(iii) 0.	28,582.	23,084.	232,562.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
9	STEVEN R. GOLD VP OF SAFETY AND SECURITY	(i) 169,185.	(ii) 0.	(iii) 5,561.	26,731.	9,199.	210,676.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
10		(i)						
	(ii)							
11		(i)						
	(ii)							
12		(i)						
	(ii)							
13		(i)						
	(ii)							
14		(i)						
	(ii)							
15		(i)						
	(ii)							
16		(i)						
	(ii)							

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

SCHEDULE J, PART I, LINE 1A

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, PART II

SCHEDULE J, PART II (COLUMN B, II):THE LIBRARY'S PRESIDENT & CEO, LINDA E. JOHNSON, RECEIVED A PERFORMANCE BONUS OF \$50,000 (\$25,000 FOR EACH OF THE LAST TWO FISCAL YEARS)PER THE EMPLOYMENT AGREEMENT. HER BONUS WAS DEPENDENT TO A SATISFACTORY REVIEW OF HER JOB PERFORMANCE BY THE LIBRARY'S BOARD OF TRUSTEES.

SCHEDULE J, PART II (COLUMN B, III):THE LIBRARY PROVIDES LINDA E. JOHNSON (PRESIDENT & CEO), AND STEVEN R. GOLD (VICE PRESIDENT OF SAFETY AND SECURITY) WITH BPL VEHICLES FOR OFFICIAL BUSINESS. THE AMOUNTS REPRESENT THE VALUE ASSESSED FOR THE PERSONAL USE OF THESE VEHICLES.

SCHEDULE J, PART II (COLUMN C):RETIREMENT AND OTHER DEFERRED COMPENSATION

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

VALUE OF CONTRIBUTIONS TO NEW YORK STATE AND LOCAL RETIREMENT SYSTEM

(NYSLRS) OR NEW YORK VOLUNTARY DEFINED CONTRIBUTION (VDC) PENSION PLANS.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2017

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

Name of the organization BROOKLYN PUBLIC LIBRARY	Employer identification number 11-1904261
------------------------------------------------------------	-----------------------------------------------------

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	12 .	82,171 .	FMV
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (_____)				
26 Other ▶ (_____)				
27 Other ▶ (_____)				
28 Other ▶ (_____)				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29**

		Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?	30a		X
b If "Yes," describe the arrangement in Part II.			
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	31	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	32a	X	
b If "Yes," describe in Part II.			
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.			

Part II **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE M, PART I, LINE 32

THE BROKER HIRED BY THE LIBRARY SELLS ALL THE DONATED STOCKS UPON
RECEIPT.

**SCHEDULE O
(Form 990 or 990-EZ)**

Department of the Treasury
Internal Revenue Service

Name of the organization

BROOKLYN PUBLIC LIBRARY

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2017

**Open to Public
Inspection**

Employer identification number

11-1904261

FORM 990, PART VI, SECTION A, LINE 7A

IN ACCORDANCE WITH THE LIBRARY'S BY-LAWS, THE GOVERNING BOARD OF TRUSTEES HAS THE AUTHORITY TO MANAGE AND CONTROL THE AFFAIRS OF THE LIBRARY. THE BOARD OF TRUSTEES SHALL CONSIST OF NO MORE THAN THIRTY-EIGHT MEMBERS. BY VIRTUE OF THEIR RESPECTIVE OFFICES, THE MAYOR OF THE CITY OF NEW YORK, THE COMPTROLLER OF THE CITY OF NEW YORK, THE SPEAKER OF THE CITY COUNCIL OF THE CITY OF NEW YORK AND THE PRESIDENT OF THE BOROUGH OF BROOKLYN ARE EX-OFFICIO TRUSTEES OF THE LIBRARY. EACH EX-OFFICIO MAY APPOINT A REPRESENTATIVE TO SERVE ON HIS OR HER BEHALF AS A MEMBER OF THE BOARD. EACH REPRESENTATIVE APPOINTED BY AN EX-OFFICIO SHALL BE COUNTED AS PART OF THE QUORUM, MAY VOTE AND HAVE ALL THE SAME RIGHTS AND PRIVILEGES OF THE EX-OFFICIO OR ANY OTHER MEMBER OF THE BOARD, EXCEPT IN CASES WHERE THIS IS PROHIBITED BY LAW. THE MAYOR OF THE CITY OF NEW YORK AND THE PRESIDENT OF THE BOROUGH OF BROOKLYN MAY EACH APPOINT ELEVEN TRUSTEES TO HOLD OFFICES FOR A TERM OF THREE YEARS OR UNTIL THEIR RESIGNATION OR THEIR SUCCESSOR IS APPOINTED.

FORM 990, PART VI, SECTION B, LINE 11A

THE FORM 990 IS PREPARED BY MANAGEMENT, WITH THE ASSISTANCE OF OUR AUDITORS, EISNERAMPER LLP. ONCE A FINAL DRAFT OF THE FORM 990 IS RECEIVED FROM THE EXTERNAL AUDITORS, THE VICE PRESIDENT OF FINANCE CONDUCTS A FIRST LEVEL REVIEW WITH THE EXECUTIVE VICE PRESIDENT OF FINANCE AND ADMINISTRATION AND CHIEF FINANCIAL OFFICER (CFO). PENDING ANY AMENDMENTS OR CORRECTIONS, THE CFO AND VICE PRESIDENT OF FINANCE THEN REVIEWS THE

Name of the organization BROOKLYN PUBLIC LIBRARY	Employer identification number 11-1904261
-----------------------------------------------------	----------------------------------------------

DRAFT RETURNS WITH THE PRESIDENT AND CEO. AFTER REVIEWING THE DRAFT WITH THE PRESIDENT AND CEO, THE DRAFT FORM 990 IS FORWARDED TO THE MEMBERS OF AUDIT COMMITTEE IN PREPARATION FOR FORMAL REVIEW MEETING OF THE AUDIT AND FINANCE COMMITTEES ATTENDED BY THE EXTERNAL AUDITORS, SENIOR MEMBERS OF THE LIBRARY'S EXECUTIVE TEAM ALONG WITH THE CFO AND VICE PRESIDENT OF FINANCE. AT THIS MEETING, STAFF REVIEW THE REPORTS WITH THE ATTENDEES. QUESTIONS ARE FIELDERD AND IF NECESSARY, CORRECTIONS ARE MADE. ONCE THE REVIEW IS COMPLETED, THE MEMBERS OF THE AUDIT COMMITTEE VOTE TO ACCEPT THE REPORT FOR FILING BY THE LIBRARY'S EXTERNAL AUDITORS. PRIOR TO FILING THE RETURN (AMENDED IF REQUIRED) IT IS FORWARDED TO THE FULL BOARD FOR THEIR REVIEW.

FORM 990, PART VI, SECTION B, LINE 12C

THE LIBRARY HAS A CONFLICT OF INTEREST POLICY WHICH IS SIGNED ANNUALLY BY EVERY MEMBER OF THE BOARD OF TRUSTEES AND KEY (SENIOR) MEMBERS OF THE LIBRARY'S MANAGEMENT TEAM. A COPY OF THE LIBRARY'S CONFLICT OF INTEREST POLICY CAN BE OBTAINED FROM THE LIBRARY'S WEBSITE AT:

[HTTPS://WWW.BKLYNLIBRARY.ORG/SITES/DEFAULT/FILES/DOCUMENTS/TRUSTEES/CONFLICTINTEREST.PDF](https://www.bklynlibrary.org/sites/default/files/documents/trustees/conflictinterest.pdf)

FORM 990, PART VI, SECTION B, LINE 15A

THE SALARY OF THE PRESIDENT & CEO IS BASED ON A NEGOTIATED WRITTEN EMPLOYMENT CONTRACT, WHICH INCLUDES A YEARLY ADJUSTMENT FOR COST OF LIVING INCREASES. IT ALSO INCLUDES A PROVISION FOR A DISCRETIONARY BONUS

Name of the organization BROOKLYN PUBLIC LIBRARY	Employer identification number 11-1904261
-----------------------------------------------------	----------------------------------------------

DECIDED BY THE BOARD OF TRUSTEES' EXECUTIVE COMMITTEE. THE CONTRACT IS RENEWABLE EVERY THREE YEARS. THE SALARIES OF THE OTHER OFFICERS AND KEY EMPLOYEES ARE BASED ON A COMPENSATION PROGRAM DESIGNED BY AN INDEPENDENT CONSULTANT, ERNST AND YOUNG, AND A REVIEW OF COMPARABLE SALARIES FROM SIMILAR SIZED NOT-FOR-PROFIT ORGANIZATIONS AND CULTURAL INSTITUTIONS. IT IS REVIEWED REGULARLY AND UPDATED, AS NEEDED, TO ADJUST THE SALARY STRUCTURE AND RANGES TO ENSURE COMPETITIVE SALARY RANGES.

FORM 990, PART VI, SECTION C, LINE 19

CONFLICT OF INTEREST POLICY: THE LIBRARY HAS A CONFLICT OF INTEREST POLICY FOR MEMBERS OF THE BOARD OF TRUSTEES AND KEY MEMBERS OF STAFF. THIS POLICY IS AVAILABLE FOR REVIEW ON THE LIBRARY'S INTRANET AND TRUSTEE WEBSITE. THIS POLICY IS ALSO MADE AVAILABLE FOR REVIEW BY THE GENERAL PUBLIC ON THE LIBRARY'S WEBSITE.

FINANCIAL STATEMENTS: IT IS THE POLICY OF BROOKLYN PUBLIC LIBRARY TO MAKE ITS FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC. COPIES OF ITS MOST RECENT AUDITED FINANCIAL STATEMENTS ARE POSTED ON ITS WEBSITE AND AVAILABLE TO THE PUBLIC AT THE FOLLOWING LINK:

[HTTPS://WWW.BKLYNLIBRARY.ORG/ABOUT/REPORTS-PUBLICATIONS](https://www.bklynlibrary.org/about/reports-publications) COPIES ARE ALSO AVAILABLE UPON REQUEST FROM THE FINANCE DEPARTMENT.

FORM 990, PART XI, LINE 9

OTHER CHANGES IN NET ASSETS REPRESENTS REIMBURSABLE CAPITAL EXPENDITURE INCURRED BY THE LIBRARY TOWARDS THE CONSTRUCTION OF THE NEW GREENPOINT LIBRARY AND ENVIRONMENTAL EDUCATION CENTER IN THE AMOUNT OF \$3,445,297. AND LOSS ON DISPOSAL OF VARIOUS PROPERTY AND EQUIPMENT IN THE AMOUNT OF

Name of the organization BROOKLYN PUBLIC LIBRARY	Employer identification number 11-1904261
-----------------------------------------------------	----------------------------------------------

\$354,205.

ATTACHMENT 1

FORM 990, PART III - PROGRAM SERVICE, LINE 4A

CENTRAL LIBRARY IS THE LARGEST PUBLIC LIBRARY IN BROOKLYN. AT 352,000 SQUARE FEET, THE BUILDING ACCOUNTS FOR ONE-THIRD OF BROOKLYN PUBLIC LIBRARY'S TOTAL PHYSICAL PLANT.

CENTRAL PROVIDES TRADITIONAL LIBRARY SERVICES, INCLUDING A COLLECTION OF APPROXIMATELY 900,000 MATERIALS IN WINGS DEDICATED TO FICTION, HISTORY, SCIENCE AND TECHNOLOGY, CHILDREN'S AND YOUNG ADULT LITERATURE, AND THE ARTS. THE BUSINESS AND CAREER CENTER'S RECENT RELOCATION TO CENTRAL LIBRARY HAS PROVIDED PATRONS WITH CENTRAL ACCESS TO AN EXTENSIVE COLLECTION OF BOOKS, MATERIALS AND SERVICES RELATED TO TEST PREP, BUSINESS AND CAREER RESOURCES, IN ADDITION TO FINANCIAL AND COLLEGE PLANNING. THE BROOKLYN COLLECTION, BROOKLYN PUBLIC LIBRARY'S (BPL'S) LOCAL HISTORY DIVISION, PROVIDES A WEALTH OF INFORMATION ABOUT THE BOROUGH, INCLUDING ACCESS TO RESEARCH MATERIALS SUCH AS THE FULL, DIGITIZED 1841-1955 RUN OF THE BROOKLYN DAILY EAGLE. CENTRAL IS ALSO HOME TO THE SHELBY WHITE AND LEON LEVY INFORMATION COMMONS, A PUBLIC TECHNOLOGY CENTER AND WORKSPACE WITH A RESERVABLE RECORDING STUDIO AND MEETING ROOMS, SOPHISTICATED DESIGN SOFTWARE, AND A DIGITAL TRAINING LAB FOR COMMUNITY CLASSES AND WORKSHOPS.

IN FISCAL YEAR 2018, CENTRAL LIBRARY HOSTED MORE THAN 9,000 PROGRAMS THAT WERE ATTENDED BY APPROXIMATELY 165,000 PEOPLE AND OVER 1.2 MILLION PEOPLE WALKED THROUGH CENTRAL LIBRARY'S MAIN DOORS.

Name of the organization BROOKLYN PUBLIC LIBRARY	Employer identification number 11-1904261
-----------------------------------------------------	----------------------------------------------

ATTACHMENT 2

FORM 990, PART III - PROGRAM SERVICE, LINE 4B

AS MORE THAN HALF OF BROOKLYN'S 2.6 MILLION RESIDENTS LIVE WITHIN A MILE OF A LIBRARY BRANCH, BPL'S NEIGHBORHOOD LIBRARIES WELCOMED NEARLY SEVEN MILLION VISITORS IN FY18. THE LIBRARY'S COLLECTION HELD APPROXIMATELY 3.7 MILLION PRINT AND DIGITAL MATERIALS, WHICH CIRCULATED A TOTAL 13.7 MILLION TIMES. AS THE LARGEST PROVIDER OF FREE WI-FI IN BROOKLYN, BPL HOSTED 508,000 FREE WI-FI SESSIONS IN FY18. THE LIBRARY ALSO HOSTED 1.8 MILLION COMPUTER SESSIONS ON APPROXIMATELY 1,600 DEVICES. APPROXIMATELY 1,864 VOLUNTEERS PROVIDED A TOTAL OF 94,000 HOURS OF SERVICE TO BPL.

EVERY BROOKLYN PUBLIC LIBRARY LOCATION IS OPEN AT LEAST SIX DAYS PER WEEK, AND THE AVERAGE BRANCH IS OPEN APPROXIMATELY 48 HOURS PER WEEK. IN FY18, BPL RECEIVED FUNDING TO UPGRADE THE TECHNOLOGY OFFERINGS IN LIBRARY BRANCHES; DEPENDING ON THE INDIVIDUAL LOCATION'S NEEDS, BRANCHES RECEIVED NEW COMPUTERS, TELEVISIONS, CAMERAS, LITTLE BITS KITS AND MORE. WITH INCREASED OPEN HOURS AND ADDITIONAL TECHNOLOGICAL SUPPORT, BRANCH LIBRARIES HOSTED 69,248 PROGRAMS THAT WERE ATTENDED BY OVER ONE MILLION PEOPLE.

BROOKLYN'S LIBRARY BRANCHES PROVIDE AN EXPANSIVE RANGE OF PROGRAMS AND SERVICES. THE CORE (AND MOST POPULAR) OFFERINGS INCLUDE FIRST FIVE YEARS, A SUITE OF EARLY LITERACY PROGRAMS FOR INFANTS, TODDLERS, AND PRESCHOOLERS; INCLUSIVE PLAY AND LEARNING ENVIRONMENTS FOR CHILDREN WITH DISABILITIES; CREATIVE AGING CLASSES THAT HELP SENIORS LEARN NEW SKILLS AND EXPRESS THEIR CREATIVITY; DIGITAL LITERACY PROGRAMS SUCH AS BASIC COMPUTER CLASSES AND ADVANCED INSTRUCTION IN ANIMATION, AUDIO ENGINEERING,

Name of the organization BROOKLYN PUBLIC LIBRARY	Employer identification number 11-1904261
-----------------------------------------------------	----------------------------------------------

ATTACHMENT 2 (CONT'D)

CODING, AND MORE; AND SUMMER READING, BPL'S BOROUGH-WIDE EFFORT TO PROMOTE RECREATIONAL READING WHILE SCHOOL IS OUT OF SESSION.

ATTACHMENT 3FORM 990, PART III - PROGRAM SERVICE, LINE 4C

BPL OFFERS PROGRAMS FOR PEOPLE FROM EVERY WALK OF LIFE. IN ADDITION TO THE BRANCH PROGRAMS DESCRIBED ABOVE, BPL HOSTS TEEN TECH TIME AND HOMEWORK HELP SESSIONS, CITIZENSHIP AND HSE TEST PREPARATION, CAREER AND BUSINESS DEVELOPMENT RESOURCES, FREE CULTURAL EVENTS, AND MUCH MORE. A REPRESENTATIVE SAMPLE OF OUR SPECIAL PROGRAMS:

1. BOOKMATCH: PROVIDES PATRONS WITH READING LISTS SPECIALLY CURATED FOR THEM BY BPL LIBRARIANS.

2. BKLYN INCUBATOR - SUPPORTS AND FUNDS THE DEVELOPMENT OF NEW INITIATIVES BY LIBRARIANS AND STAFF, WITH TRAINING AND MENTORING ON PROGRAM DESIGN, PARTNERSHIP DEVELOPMENT, COMMUNITY OUTREACH, AND PROJECT MANAGEMENT.

3. BROOKLYN CULTURAL ADVENTURES PROGRAM: AWARD-WINNING SUMMER DAY CAMP FOR CHILDREN 7-12; CULTURAL IMMERSION AT BPL, BROOKLYN BOTANIC GARDEN, BROOKLYN MUSEUM, BROOKLYN CHILDREN'S MUSEUM, PROSPECT PARK, AND PROSPECT PARK ZOO.

4. CULTURE PASS: A LIBRARY-LED, CITY-WIDE INITIATIVE PROVIDING FREE ACCESS TO MYRIAD CULTURAL INSTITUTIONS ACROSS THE FIVE BOROUGHS TO THE MILLIONS OF LIBRARY CARD HOLDERS. THROUGH THE NEW INITIATIVE,

Name of the organization BROOKLYN PUBLIC LIBRARY	Employer identification number 11-1904261
-----------------------------------------------------	----------------------------------------------

 ATTACHMENT 3 (CONT'D)

PATRONS MAY VISIT, AT NO COST, 46 OF THE CITY'S CULTURAL INSTITUTIONS RANGING FROM THE WHITNEY MUSEUM IN MANHATTAN AND THE BROOKLYN BOTANIC GARDEN TO THE NOGUCHI MUSEUM IN QUEENS, WAVE HILL IN THE BRONX, AND HISTORIC RICHMOND TOWN ON STATEN ISLAND.

5.OUR STREETS, OUR STORIES: ORAL HISTORY PROJECT CHRONICLING DECADES OF TRANSFORMATION IN NEIGHBORHOODS THROUGHOUT BROOKLYN.

6.POWERUP: KREYOL, A BUSINESS PLAN COMPETITION FOR MEMBERS OF THE HAITIAN-KREYOL COMMUNITY MODELED ON THE POWERUP COMPETITION THAT HAS HELPED LAUNCH MORE THAN 2100 BROOKLYN BUSINESSES SINCE ITS FOUNDING IN 2003.

7.TODAY'S TEEN'S, TOMORROW'S TECHIES: TEACHES DIGITAL SKILLS TO STUDENTS 14 TO 18 AND PREPARES THEM TO SERVE ON BPL'S VOLUNTEER TEAM, WHERE THEY HELP PATRONS MAKE USE OF THE LIBRARY'S MANY FREE TECHNOLOGY RESOURCES.

THE PROGRAMMING AND EXHIBITION DEPARTMENT PRODUCES HIGH QUALITY CULTURAL PROGRAMMING TO ENCOURAGE PUBLIC ENGAGEMENT WITH THE IDEAS AND CULTURAL EXPRESSIONS OF OUR TIME. ON JANUARY 10, 2018, BPL, IN COLLABORATION WITH THE CULTURAL SERVICES OF THE FRENCH EMBASSY, HOSTED A NIGHT OF PHILOSOPHY & IDEAS, A SUNSET-TO-SUNRISE EVENT BRING PHILOSOPHERS, MUSICIANS, ARTIST, AND AUTHORS FROM AROUND THE WORLD TOGETHER WITH THE BROOKLYN AND GREATER NEW YORK COMMUNITY THROUGH A SERIES OF CONVERSATIONS AND PERFORMANCES.

THE OUTREACH SERVICES DEPARTMENT SERVES BROOKLYNITES WITH UNIQUE AND OFTEN OVERLOOKED NEEDS, INCLUDING VETERANS, IMMIGRANTS, THE

Name of the organization BROOKLYN PUBLIC LIBRARY	Employer identification number 11-1904261
-----------------------------------------------------	----------------------------------------------

ATTACHMENT 3 (CONT'D)

HOMEBOUND, AND PEOPLE TRANSITIONING INTO AND OUT OF THE CITY'S CORRECTIONAL AND SHELTER SYSTEMS. THROUGH A PARTNERSHIP WITH THE MAYOR'S OFFICE OF IMMIGRANT AFFAIRS (MOIA), BPL CONTINUED TO HOST AN IMMIGRATION LAWYER TO ASSIST PATRONS WITH CITIZENSHIP APPLICATIONS AT FOUR LIBRARY BRANCHES. ONE OF THE OUTREACH DEPARTMENT'S SIGNATURE PROGRAMS, TELESTORY, WHICH UTILIZES VIDEO CONFERENCING TECHNOLOGY TO CONNECT INCARCERATED PARENTS WITH THEIR CHILDREN THROUGH BOOKS AND FAMILY ACTIVITIES, IS NOW AVAILABLE IN MORE THAN A DOZEN BPL LOCATIONS. THE NEW TELESTORY BRANCHES ARE LOCATED IN NEIGHBORHOODS WITH PARTICULARLY HIGH RATES OF INCARCERATION.

OUR YOUTH AND FAMILY SERVICES DEPARTMENT CONTINUES TO OFFER INNOVATIVE PROGRAMS AROUND STEM (SCIENCE, TECHNOLOGY, ENGINEERING, AND MATH). DURING FY2018 1,889 ATTENDEES PARTICIPATED IN OUR SCIENCE BABY PROGRAM, A CREATIVE SCIENCE PROGRAM FOR 0-3 YEAR OLDS. THE HEART OF SCIENCE BABY IS EXPLORING THE WONDER OF SCIENCE THROUGH STORY, REPETITION AND PLAY. WE EXPLORE GRAVITY, MOTION, MAGNETS, CHEMICAL REACTIONS, LIGHT, WATER, BUBBLES, SOUND AND MORE. AND THROUGH OUR LIBRARY LAB PROGRAM SERIES, A DYNAMIC LEARNING ENRICHMENT PROGRAM FOR CHILDREN (AGES 6 TO 10) AND THEIR FAMILIES, NEARLY 7,000 PATRONS RECEIVED TIPS ON HOW TO USE LIBRARY RESOURCES TO SPARK CURIOSITY FOR STEM THROUH HANDS-ON EXPERIMENTS AND HOW TO CONTINUE PROJECTS AT HOME.

IN 2015 BROOKLYN PUBLIC LIBRARY LAUNCHED BKLYN INCUBATOR. THE

Name of the organization BROOKLYN PUBLIC LIBRARY	Employer identification number 11-1904261
-----------------------------------------------------	----------------------------------------------

ATTACHMENT 3 (CONT'D)

INITIATIVE SUPPORTS INNOVATIVE PROGRAMS AT THE BROOKLYN PUBLIC LIBRARY BY PROVIDING PROFESSIONAL DEVELOPMENT, MENTORSHIP, AND RESOURCES TO STAFF WITH INNOVATIVE IDEAS. THE PURPOSE OF BKLYN INCUBATOR IS TO EMPOWER OUR STAFF TO BUILD PUBLIC PROGRAMS AND SERVICES FROM THE GROUND UP AND SUPPORT IDEAS THAT ARE RESPONSIVE TO COMMUNITY NEEDS. THROUGHOUT THE 29 INITIATIVES FUNDED BY INCUBATOR, 4,644 PATRONS HAVE ATTENDED AN INCUBATOR PROGRAM, 509 PROGRAMS HAVE BEEN CREATED, AND 50 COMMUNITY PARTNERS HAVE BEEN INVOLVED IN SUPPORTING AND COLLABORATING WITH INCUBATOR INITIATIVES.

LIBRARIANS OF TOMORROW IS AN INNOVATIVE, HANDS-ON INTERNSHIP PROGRAM FOR 10TH-12TH GRADE STUDENTS FROM DIVERSE BACKGROUNDS WITH AN INTEREST IN LIBRARY CAREERS. IN FY18 THERE WERE 60 SCHOOL-YEAR INTERNS WHO CONTRIBUTED 8614.5 VOLUNTEER HOURS, AND 15 SUMMER INTERNS WHO CONTRIBUTED 2008.5 VOLUNTEER HOURS. THE INTERN LANGUAGES SPOKEN OTHER THAN ENGLISH INCLUDED URDU, BANGLA, SPANISH, RUSSIAN, UZBEK, TAJIKI, ARABIC, MANDARIN, WOLOF, FRENCH, HAITIAN CREOLE, JAPANESE, ITALIAN, CANTONESE, PUNJABI, HUNGARIAN, LATIN, YORUBA, IGBO, AND FUJINESE.

Name of the organization BROOKLYN PUBLIC LIBRARY	Employer identification number 11-1904261
-----------------------------------------------------	----------------------------------------------

ATTACHMENT 4

990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

<u>NAME AND ADDRESS</u>	<u>DESCRIPTION OF SERVICES</u>	<u>COMPENSATION</u>
NEW YORK PUBLIC LIBRARY 445 5TH AVENUE NEW YORK, NY 10016	LOGISTICS SERVICE	3,589,753.
NYC ECONOMIC DEVELOPMENT CORP. 110 WILLIAMS STREET NEW YORK, NY 10038	CONSTRUCTION MGMT	1,650,000.
THEATER OF WAR PRODUCTION, LLC 1 HANSON PLACE BROOKLYN, NY 11243	THEATRICAL PROD	1,107,639.
MEDCO ELECTRICAL CONTRACTORS 3309 AVENUE N BROOKLYN, NY 11234	LIGHTING UPGRADE	615,014.
PERFORMANCE MECHANICAL 1215 SECOND AVENUE NEW HYDE PARK, NY 11040	HVAC MAINTENANCE	563,044.

2017 990 Returns Found in Account L161

Total Record Count: 1

Report Date: 5/7/2019

***** - Federal Only**

**** - This indicator is an acknowledgement that the jurisdiction has received direct debit information. Please note that not all jurisdictions send this acknowledgement.**

Locator	Tax Type	Taxpayer Name	Client Code	Alerts	Juris Abbr.	Juris Description	E-File Status	Federal Service Center	Date Sent	Date Ack	Submission ID	DCN	Debts ***	PIN***	EIC***	Direct Debit Ack Rec'd**	Direct Debit In Locator	Create Date
49069D	990	BROOKLYN PUBLIC LIBRARY	301947	N	FED	Federal	Accepted		4/25/2019 10:58:00 AM	4/25/2019 11:26:00 AM	26505220 19115500 0004						N	4/25/2019 10:20:04 AM
				N	NY	New York State CT13	Accepted		4/25/2019 10:58:00 AM	4/26/2019 12:19:00 PM	26505220 19115500 0005						N	4/11/2019 12:49:03 PM