Return of Organization Exempt From Income Tax

Department of the Treasury Internal Revenue Service

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

OMB No. 1545-0047

Open to Public Inspection

▶ Do not enter Social Security numbers on this form as it may be made public.

▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

A F	or th	e 2017 calend	dar year, or tax year begir	nning 0.7	7/01 ,2017	7, and endir	ıg		06/30,2	20 18		
_		C Name	of organization					D Employer ide	entification nu	mber		
Вс	heck if ap	oplicable: THE	QUEENS BOROUGH PUR	BLIC LIBRARY								
	Addre		Business As					11-1904	1262			
	7 1		er and street (or P.O. box if mail is	not delivered to street addre	ess)	Room/suite		E Telephone n	umber			
	Initial	return 89-1	11 MERRICK BOULEVA	RD				(718) 99	0-0700			
	Term	inated City or	town, state or province, country, a	and ZIP or foreign postal coo	de							
	Amer	ded JAMA	AICA, NY 11432-5242	2				G Gross receip	ts \$ 136	,785	,924.	
		F Name	and address of principal officer:	DENNIS WALCO	TT			H(a) Is this a grou		Yes	X No	
	pendi		11 MERRICK BOULEVA	RD JAMAICA, NY	11432-5	5242		subordinates H(b) Are all subord		Yes	No	
$\overline{\Gamma}$	Tax-ex		X 501(c)(3) 501(c) () (insert no.)	4947(a)(1)		7	1	ch a list. (see instr	uctions)		
		· .	UEENSLIBRARY.ORG	, (1 10 11 (0)(1)	*	-	H(c) Group exemp	ption number	•		
_		of organization:		Association Other	-	L Year o	f format	tion: 1907 M			NY	
	art I	Summary	- Corporation Trust	7.0000idilon Cirio		L 10010	Tionna		Otato or rogar a	ommono.		
	1		e the organization's mission of	r most significant activitie	oe: OUEEN	S LIBRAR	Y TR	ANSFORMS	LIVES BY			
ø	l '		ING PERSONAL AND IN									
Š			OMMUNITIES.									
rus	2			incontinued its energic								
Governance	2		if the organization d	•	•				s. 3		16.	
	3		ng members of the governing						4		16.	
ctivities &	4		ependent voting members of t									
<u><</u>	5		of individuals employed in cale						5		, <u>459.</u>	
Λcti	6	Total number of	of volunteers (estimate if necess	sary)					6			
`			business revenue from Part V						7a		- 422	
_	b	Net unrelated b	ousiness taxable income from	Form 990-1, line 34					7b		5,423	
	_						-	Prior Year		rrent Y		
ne	8	Contributions a	nd grants (Part VIII, line 1h)		COP	Y FOR		L22,596,66			,403	
Revenue	9	Program service	e revenue (Part VIII, line 2g)		- BUBUCI	NSPECTION		1,446,46		1,275,826 772,734		
Re	10	mvesiment mc	ome (Part VIII, Column (A), ime	35 3, 4, and 7u)				431,42				
	11		(Part VIII, column (A), lines 5,					169,27			5,847	
	12		add lines 8 through 11 (must				1	124,643,83	_	<u>2,215</u>	810	
	13		nilar amounts paid (Part IX, colu						0.		0	
	14		o or for members (Part IX, colu						0.		0	
es	15		compensation, employee bene					99,218,16		3,414	1,607	
Expenses	16a	Professional fu	ındraising fees (Part IX, column	(A), line 11e)					0.		0	
ă	b	Total fundraisir	ng expenses (Part IX, column (I	D), line 25) ▶	866	5.						
	17	Other expense	s (Part IX, column (A), lines 11	a-11d, 11f-24e)				23,423,38			1,329	
	18	Total expenses	a. Add lines 13-17 (must equal	Part IX, column (A), line	25)		1	122,641,54			3,936	
	19	Revenue less e	expenses. Subtract line 18 from	n line 12				2,002,28	5.	3,336	5,874	
s or							Begin	ning of Current Y	rear En	nd of Yea	ır	
Net Assets or Fund Balances	20	Total assets (Pa	art X, line 16)					87,708,66		2,270	0,052	
t As	21	Total liabilities	(Part X, line 26)					30,921,02			2,552	
SE E	22	Net assets or f	und balances. Subtract line 21	from line 20				56,787,63	7. 59	9,727	7,500	
Pa	rt II	Signature	Block									
			I declare that I have examined the						my knowledg	e and be	elief, it is	
true	e, corre	ct, and complete.	Declaration of preparer (other than	onicer) is based on all inic	ormation of wh	ich preparer na	is any ki	nowledge.				
Sig		Signature	of officer					Date				
He	re											
		Type or pr	rint name and title									
		Print/Type prep	arer's name	Preparer's signature		Date		Check	if PTIN			
Paid		PAUL HAM	MERSCHMIDT	dinlanninghoot		5/3/2	2019	self-employe	,	34178		
	parer	Firm's name	▶ BDO USA, LLP					Firm's EIN	13-53815	90		
Use	Only		▶ 100 PARK AVENUE	NEW YORK, NY 1	0017-500	01		2	212-885-			
May	the I		return with the preparer show							Yes	No	
			on Act Notice, see the separat	`							0 (2017)	

Page 2 Form 990 (2017) Part III **Statement of Program Service Accomplishments**

	Che	ck if Schedule O contains a	response or note to any line in this Par	t III	X
1		oe the organization's mission			
	QUEENS LII	BRARY TRANSFORMS LIV	JES BY CULTIVATING PERSONA	L AND	
			JILDING STRONG COMMUNITIES		
_	511.0				
2			icant program services during the ye		
					Yes X No
		ribe these new services on S			
3			, or make significant changes in I		
	services?				Yes X No
		ribe these changes on Sched			
4	expenses. Se	ection 501(c)(3) and 501(c)(rvice accomplishments for each of it 4) organizations are required to represent program service reported.		•
_	(0 - 1 -	\	· · · · · · · · · · · · · · · · · · ·) (D	
4a	(Code:		517,986. including grants of \$) (Revenue \$1	,363,275.
		**	ERED FREE ACCESS TO A COLI		
			O OTHER MATERIALS IN MULTI		
			OVER 12.4 MILLION TIMES. T		
			AT ITS 65 LOCATIONS ACROS		
			LION PEOPLE USED THE LIBRA		
			-FI NETWORK. THE LIBRARY C		
			, AND CIVIC PROGRAMS WITH	AN	
	ATTENDANCI	E OF MORE THAN 1.5 N	MILLION CUSTOMERS.		
4b	(Code:) (Expenses \$	including grants of \$) (Revenue \$)
	-				
	-				
4-	(Carla:) /F	in all disas superts of fi) /Davage	\
4C	(Code:) (Expenses \$	including grants of \$) (Revenue \$)
	_				
4d	Other program	m services (Describe in Sche	dule O.)		
	(Expenses \$	including gra		e \$)	
_			110 610 006	,	

4e Total program service expenses ► 112,617,986.

Form 990 (2017) Page **3**

Part	V Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		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? If "Yes," complete Schedule C, Part II	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III	5		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? If			
	"Yes," complete Schedule D, Part I	6		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? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		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? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	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? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		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? If "Yes," complete Schedule D, Part IX	11d		X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	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)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			37
	Schedule D, Parts XI and XII.	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If	401	v	
40	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional.	12b	Х	X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13 14a		X
	Did the organization maintain an office, employees, or agents outside of the United States?	144		
Ŋ	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	140		
13	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	"		
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	10		
.,	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	<u> </u>		
10	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	10		
	If "Yes," complete Schedule G, Part III	19		Х

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Part l	V Checklist of Required Schedules (continued)			
			Yes	No
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х
22	$ \ \text{Did the organization report more than $5,000 of grants or other assistance to or for domestic individuals on } \\$			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	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? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	250		х
L	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		21
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any	230		
20	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If "Yes," complete Schedule L, Part II	26		Х
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? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		X
С	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? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	$ \ \text{Did the organization liquidate, terminate, or dissolve and cease operations?} \textit{If "Yes," complete Schedule N,} \\$			
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			Х
	complete Schedule N, Part II	32		Λ
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	33		Х
2.4	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		21
34		34	Х	
35a	or IV, and Part V, line 1	35a	X	
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	33a		
b	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Х	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	200		
30	related organization? If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
٠.	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and	-		
	19? Note. All Form 990 filers are required to complete Schedule O.	38	Х	

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Part V Statements Regarding Other IRS Filings and Tax Compliance Χ Yes Nο 295 1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 0. b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable. <u>1b</u> c Did the organization comply with backup withholding rules for reportable payments to vendors and X 1c reportable gaming (gambling) winnings to prize winners? 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return. . 2a Χ 2b b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) Х 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? Χ **b** If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial Χ **b** If "Yes," enter the name of the foreign country: ▶ _ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts Χ **5a** Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?...... Χ b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5c 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the Χ 6a organization solicit any contributions that were not tax deductible as charitable contributions? b If "Yes," did the organization include with every solicitation an express statement that such contributions or 6b Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods Χ 7a **b** If "Yes," did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was Χ 7с X e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Χ 7f f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7g g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?.. Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the 8 sponsoring organization have excess business holdings at any time during the year?........... Sponsoring organizations maintaining donor advised funds. 9a b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?...... Section 501(c)(7) organizations. Enter: 10 10a a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities. 10b Section 501(c)(12) organizations. Enter: b Gross income from other sources (Do not net amounts due or paid to other sources 12a 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b Section 501(c)(29) qualified nonprofit health insurance issuers. 13a Note. See the instructions for additional information the organization must report on Schedule O. **b** Enter the amount of reserves the organization is required to maintain by the states in which

JSA 7E1040 1.000

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O Х

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Part	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O.	See in	struc	
	Check if Schedule O contains a response or note to any line in this Part VI			Х
Sect	ion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
b	Enter the number of voting members included in line 1a, above, who are independent 1b			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			3,7
	stockholders, or persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:		Х	
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b		
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? <i>If</i> "Yes," provide the names and addresses in Schedule O	9		x
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Revenue	_	``	21
Jecu	on b. I oncies (This Section B requests information about policies not required by the internal Nevenue	Code	Yes	No
40-	Did the expenientian have lead chanters broughed as offiliates?	10a		Х
b	Did the organization have local chapters, branches, or affiliates?	100		
D	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
112	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13 </i>	12a	Х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
b	Other officers or key employees of the organization	15b	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		
	on C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply. X Own website X Upon request Other (explain in Schedule O)	501(0	c)(3)s	only)
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of int	erest	policy	y, and
	financial statements available to the public during the tax year.			

State the name, address, and telephone number of the person who possesses the organization's books and records: ► MICHAEL TRAGALE, 89-11 MERRICK BLVD, JAMAICA, NY 11432-5242 20 JSA 7E1042 1.000 Form **990** (2017)

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. 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.

L	Check this box if neither	r the organization no	r any related organizat	ion compensated any current	officer, director, or trustee.
---	---------------------------	-----------------------	-------------------------	-----------------------------	--------------------------------

	,					<u>'</u>		,	, ,	
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	box, office or direct	unles	Pos neck s pe	rson	e than control Highest compensated employee	an tee)	(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
	,	stee	ustee			ensated				
(1)JUDY BERGTRAUM, ESQ.	10.00									
BOARD CHAIR	2.00	Х		Х				0.	0.	0
(2)MICHAEL RODRIGUEZ, ESQ.	5.00									
VICE CHAIR	0.	Х		Х				0.	0.	0
(3)ELI SHAPIRO, ED. D LCSW.	5.00									
SECRETARY	0.	Х		Х				0.	0.	0
(4)ROBERT SANTOS, ESQ.	5.00									
TREASURER	2.00	Х		Х				0.	0.	0
(5)LYDON SLEEPER-O'CONNELL	5.00									
ASSISTANT TREASURER	0.	Х		Χ				0.	0.	0
(6)HON. AUGUSTUS C. AGATE	5.00									
TRUSTEE, THRU 6/25/18	0.	Х						0.	0.	0
(7)MARTHA BAKER	5.00									
TRUSTEE, THRU 9/15/17	0.	Х						0.	0.	0
(8)MARIA CONCOLINO	5.00									
TRUSTEE	0.	Х						0.	0.	0
(9)MATTHEW M. GORTON	5.00									
TRUSTEE	2.00	Х						0.	0.	0
(10)JULISSA GUTIERREZ	5.00									
TRUSTEE	0.	Х						0.	0.	0
(11)JAMES HADDAD, ESQ.	5.00									
TRUSTEE	2.00	Х						0.	0.	0
(12)JUKAY HSU	5.00									
TRUSTEE, THRU 4/15/18	0.	Х						0.	0.	0
(13)ANDREW JACKSON	5.00									
TRUSTEE	0.	Х						0.	0.	0
(14)CARL S. KOERNER, ESQ.	5.00									
TRUSTEE	2.00	Х						0.	0.	0

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Form 990 (2017) Page **8**

Part VII Section A. Officers, Directors, Tru	ıstees, Ke	y Em	plo	yee	es,	and F	lig	hest Compensat	ed Employees (c	ontinued)
(A) Name and title	(B) Average hours per week (list any hours for related	verage Position ours per (do not check more k (list any ours for officer and a directo						(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the
	organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	y employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1033 WIIOO)	organization and related organizations
15) HAEDA MIHALTSES TRUSTEE	5.00	Х						0.	0.	0.
16) JOHN OTTULICH TRUSTEE	5.00	Х						0.	0.	0.
17) GEORGE RUSSO, ESQ. TRUSTEE, AS OF MAR. 2018	5.00	Х						0.	0.	0.
18) EDWARD SADOWSKY, ESQ TRUSTEE	5.00	Х						0.	0.	0.
19) EARL G. SIMMONS, ED.D. TRUSTEE	5.00	Х						0.	0.	0.
20) DENNIS WALCOTT PRESIDENT & CEO	36.00			х				276,425.	30,714.	3,078.
21) JOHANNA RICHMAN CFO & SVP, THRU 7/31/17	39.20			Х				127,391.	2,600.	23,259.
22) MICHAEL TRAGALE CFO & SVP, AS OF 8/1/17	39.20			Х				79,601.	1,625.	16,608.
23) GITTE PENG COS & SVP	34.00			Х				156,898.	27,688.	39,990.
COO & SVP	40.00			Х				246,443.	0.	26,778.
25) NICK BURON CHIEF LIBRARIAN & SVP	40.00			Х				185,149.	0.	61,193.
1b Sub-total c Total from continuation sheets to Part VII, S d Total (add lines 1b and 1c)							* * *	0. 1,772,548. 1,772,548.	0. 213,652. 213,652.	0. 376,253. 376,253.
Total number of individuals (including but not reportable compensation from the organization)		hose 45		d at	oove	e) who	re	eceived more than	\$100,000 of	
3 Did the organization list any former office employee on line 1a? If "Yes," complete Sched.						•		•	t compensated	Yes No
4 For any individual listed on line 1a, is the socialization and related organizations granizations granizations.	sum of rep	ortab	le c	om	pen	satior	n ai	nd other compens		J

for services rendered to the organization? *If "Yes," complete Schedule J for such person*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 1		

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 ► 5

4

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Part VII Section A. Officers, Directors, Ti (A)	(B)		•	(C				(D)	(E)	(F)	_
Name and title	Average hours per week (list any hours for related organizations	box,	unles	Posit heck r ss per	tion more son irect	e than o is both or/trusto employe	an	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimate amount other compensa from the organizati	of ation e ion
	below dotted line)	Individual trustee or director	tional trustee	7	Key employee	st compensated yee		,		and relate organizatie	
6) SUNG KIM	40.00										
GENERAL COUNSEL & SVP	0.	<u> </u>				Х		184,103.	0.	35,	62
7) LAWRENCE VEDILAGO	40.00	_									
VP, RISK MANAGEMENT	0.					X		175,160.	0.	58,	55
8)	4.00										
EXECUTIVE DIRECTOR, QLF	36.00					Х		16,781.	151,025.	38,	03
9) JACQUELINE MARTINEZ	40.00	-						1.55 .55		2.5	٠,
DIRECTOR OF HUMAN RESOURCES	0.	<u> </u>				Х		165,656.	0.	37,	80
0) HAN KO	40.00	-				3.5		150 041		2.5	٦,
DIRECTOR OF MARKETING	0.					Х		158,941.	0.	35,	
	-+	-									
											_
	-†										
											_
		1									
		<u> </u>									
		-									
											_
Ib Sub-total											_
c Total from continuation sheets to Part VII,	Section A										
d Total (add lines 1b and 1c)									\$4.00.000 of		_
2 Total number of individuals (including but no reportable compensation from the organization)		nose 45		u ab	OVE	e) who	те	ceived more than	\$100,000 01		
repertable compensation from the organization	JII P									Yes	; T
3 Did the organization list any former offi	icar diracto	or or	fri	ictoc	اد	kov o	mn	lovee or highes	t compensated	103	Ť
employee on line 1a? If "Yes," complete Sche										3	Τ
4 For any individual listed on line 1a, is the											T
organization and related organizations g	reater than	\$15	50,0	00?	If	"Yes	,"	complete Schedu	le J for such	4 X	
5 Did any person listed on line 1a receive o											T
for services rendered to the organization? If "										5	T
Section B. Independent Contractors	,										_
Complete this table for your five highest cor	mpensated i	ndep:	ende	ent c	on	tracto	rs t	hat received more	than \$100,000 c	f	
compensation from the organization. Report											

(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 respor	nse or note to an	y line in this Part VI	<u> </u>		
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
និស	10	Federated campaigns 1a					
ra T	1a	. odoratod odmpaigno i i i i i i i i i					
Contributions, Gifts, Grants and Other Similar Amounts	b						
	С	Fundraising events 1c	1 200 224				
n G≡ G	d	Related organizations 1d	1,309,334.				
Sir	е	Government grants (contributions) 1e	128,531,011.				
iğ je	f	All other contributions, gifts, grants,					
흕		and similar amounts not included above . 1f	130,058.				
ng pu	g	Noncash contributions included in lines 1a-1f: \$					
	h	Total. Add lines 1a-1f	▶	129,970,403.			
Jue			Business Code				
Ş.	2a	FINES AND FEES	900099	1,275,826.	1,275,826.		
å	b						
ÿ	C						
Sen	d						
E							
gra	e	All other manner and in any in a					
Program Service Revenue	f	All other program service revenue		1,275,826.			
<u> </u>	g			1,2,3,020.			
	3	Investment income (including dividen		242,046.			242 046
		and other similar amounts)		-			242,046.
	4	Income from investment of tax-exempt bond		0.			
	5	Royalties	(ii) Personal	0.			
		(i) Real	(II) Personal				
	6a	Gross rents					
	b	Less: rental expenses					
	С	Rental income or (loss) 34,398.					
	d	Net rental income or (loss)	▶	34,398.			34,398.
	7a	Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory 5,100,802.					
	b	Less: cost or other basis					
		and sales expenses 4,570,114.					
	С	Gain or (loss)					
	d	Net gain or (loss)		530,688.			530,688.
	1	Gross income from fundraising					
Other Revenue	Оа	events (not including \$					
š		,					
ž		of contributions reported on line 1c).					
he		See Part IV, line 18					
ō	1	Less: direct expenses b		0.			
	C	Net income or (loss) from fundraising events.		0.			
	9a	Gross income from gaming activities.					
		See Part IV, line 19 a					
	b	Less: direct expenses b					
	С	Net income or (loss) from gaming activities.		0.			
	10a	Gross sales of inventory, less					
		returns and allowances a					
	b	Less: cost of goods sold b					
	С	Net income or (loss) from sales of inventory.		0.			
		Miscellaneous Revenue	Business Code				
	11a	BOOKS/OTHER SALES	900099	66,795.	66,795.		
	b	INSURANCE CLAIM PROCEEDS	900099	75,000.			75,000.
	C	OTHER REVENUE	900099	20,654.	20,654.		
	d	All other revenue					
	e	Total. Add lines 11a-11d		162,449.			
	12	Total revenue. See instructions.		132,215,810.	1,363,275.		882,132.
	-						·

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Part IX Statement of Functional Expenses

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

Check if Schedule O contains a resp	onse or note to any line	e 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	1,289,063.	276,010.	1,012,187.	866.
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	67,830,296.	61,018,153.	6,812,143.	
8 Pension plan accruals and contributions (include				
section 401(k) and 403(b) employer contributions)	8,973,161.	8,328,949.	644,212.	
9 Other employee benefits	20,037,216.	18,534,168.	1,503,048.	
10 Payroll taxes	5,284,871.	4,876,140.	408,731.	
11 Fees for services (non-employees):				
a Management	0.			
b Legal	144,170.		144,170.	
c Accounting	101,014.		101,014.	
d Lobbying	113,400.		113,400.	
e Professional fundraising services. See Part IV, line 17	0.			
f Investment management fees	81,567.		81,567.	
9 Other. (If line 11g amount exceeds 10% of line 25, column				
(A) amount, list line 11g expenses on Schedule O.)	4,103,838.	2,336,893.	1,766,945.	
12 Advertising and promotion	254,353.	110,666.	143,687.	
13 Office expenses	641,779.	537,241.	104,538.	
14 Information technology	4,827,749.	3,992,613.	835,136.	
15 Royalties	0.			
16 Occupancy	3,757,927.	3,757,927.		
17 Travel	99,839.	90,538.	9,301.	
18 Payments of travel or entertainment expenses				
for any federal, state, or local public officials	0.			
19 Conferences, conventions, and meetings	230,246.	208,796.	21,450.	
20 Interest	31,935.	28,960.	2,975.	
21 Payments to affiliates	0.			
22 Depreciation, depletion, and amortization	2,110,654.	1,207,760.	902,894.	
23 Insurance	1,018,459.		1,018,459.	
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.)				
aBOOKS & LIBRARY MATERIALS	5,771,580.	5,771,580.		
bLIBRARY SUPPLIES & EQUIPMENT	1,981,669.	1,365,471.	616,198.	
cASSESSMENTS AND FEES	99,265.	90,017.	9,248.	
dOTHER EXPENSES	94,885.	86,104.	8,781.	
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	128,878,936.	112,617,986.	16,260,084.	866.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and				
fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)	0.			

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Part X Balance Sheet

	III	01 1 1 0 1 1 1 0					
		Check if Schedule O contains a response o	or note t	to any line in this Pa			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			0.	1	39,844.
	2	Savings and temporary cash investments			4,899,593.	2	9,646,363.
	3	Pledges and grants receivable, net	33,123,805.	3	32,408,011.		
	4	Accounts receivable, net		[35,396.	4	93,221.
	5	Loans and other receivables from current and f	former	officers, directors,			
		trustees, key employees, and highest co	ompens	ated employees.			
	6	Complete Part II of Schedule L Loans and other receivables from other disqualified personal schedule.	ons (as d	efined under section	0.	5	0.
		4958(f)(1)), persons described in section 4958(c)(3)(B), and sponsoring organizations of section 501(c)(9) volu organizations (see instructions). Complete Part II of Sche	ıntary em	ployees' beneficiary	0.	6	0.
ets	7	Notes and loans receivable, net			0.	7	0.
Assets	8	Inventories for sale or use			0.	8	0.
⋖	9	Prepaid expenses and deferred charges			991,020.	9	116,338.
	_	Land, buildings, and equipment: cost or	i i		· ·		,
			10a	65,741,917.			
	b	Less: accumulated depreciation		27,536,127.	37,138,372.	10c	38,205,790.
	11				11,494,813.	11	11,964,386.
	12	Investments - other securities. See Part IV, line 11			0.	12	0.
	13	Investments - program-related. See Part IV, line 11	0.	13	0.		
	14	Intangible assets	0.	14	0.		
	15	Other assets. See Part IV, line 11			25,667.	15	-203,901.
	16	Total assets. Add lines 1 through 15 (must equal			87,708,666.	16	92,270,052.
	17	Accounts payable and accrued expenses			17,426,325.	17	16,392,109.
	18	Grants payable	0.	18	0.		
	19	Deferred revenue			1,529,532.	19	1,545,114.
	20	Tax-exempt bond liabilities			0.	20	0.
	21	Escrow or custodial account liability. Complete Pa	art IV of	Schedule D	0.	21	0.
es	22	Loans and other payables to current and for	ormer o	officers, directors,			
Liabilities		trustees, key employees, highest compens					
jabi		disqualified persons. Complete Part II of Schedule	L		0.	22	0.
	23	Secured mortgages and notes payable to unrelate			4,723,946.	23	8,000,000.
	24	Unsecured notes and loans payable to unrelated to	third par	ties	0.	24	0.
	25	Other liabilities (including federal income tax, I					
		parties, and other liabilities not included on lines					
		of Schedule D			7,241,226.	25	6,605,329.
	26	Total liabilities. Add lines 17 through 25			30,921,029.	26	32,542,552.
Fund Balances		Organizations that follow SFAS 117 (ASC 958), complete lines 27 through 29, and lines 33 and	check h 34.	nere X and			
<u>a</u>	27	Unrestricted net assets			57,227,772.	27	59,480,226.
Bal	28	Temporarily restricted net assets			-440,135.	28	247,274.
pu	29	Permanently restricted net assets		<u></u> <u>.</u>	0.	29	0.
or Fu		Organizations that do not follow SFAS 117 (ASC 958) complete lines 30 through 34.), check l	nere 🕨 🔙 and			
	30	Capital stock or trust principal, or current funds		[30	
SSE	31	Paid-in or capital surplus, or land, building, or equ		fund		31	
Net Assets	32	Retained earnings, endowment, accumulated inco	ome, or	other funds		32	
Ne	33	Total net assets or fund balances			56,787,637.	33	59,727,500.
	34	Total liabilities and net assets/fund balances	<u> </u>		87,708,666.	34	92,270,052.
							Form QQ0 (2017)

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OIIII J	70 (2011)				ı uş	JC
Part						_
	Check if Schedule O contains a response or note to any line in this Part XI		<u> </u>			
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1	32,2	15,8	10.
2	Total expenses (must equal Part IX, column (A), line 25)	2	1	28,8	78,9	36.
3	Revenue less expenses. Subtract line 2 from line 1	3		3,3	36,8	374.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	!	56,7	87,6	37.
5	Net unrealized gains (losses) on investments	5			37,0	080.
6	Donated services and use of facilities	6		-4	34,0	91.
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				0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	33, column (B))	10	!	59,7	27,5	00.
Part						
	Check if Schedule O contains a response or note to any line in this Part XII		<u></u>			
					Yes	No
1	Accounting method used to prepare the Form 990: CashX Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," e	explain	in			
	Schedule O.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?.			2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were cor	npiled	or			
	reviewed on a separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were aud					
	separate basis, consolidated basis, or both:					
	Separate basis X Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for	oversi	jht			
	of the audit, review, or compilation of its financial statements and selection of an independent according to the audit, review, or compilation of its financial statements and selection of an independent according to the audit, review, or compilation of its financial statements and selection of an independent according to the audit, review, or compilation of its financial statements and selection of an independent according to the audit, review, or compilation of its financial statements and selection of an independent according to the audit, review, or compilation of its financial statements and selection of an independent according to the audit according t	_	٠ ١	2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, or					
	Schedule O.	•				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as se	t forth	in			
	the Single Audit Act and OMB Circular A-133?			3a	Х	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits?	dergo t	he			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such au			3b	Χ	

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for instructions and the latest information.			
		Open to Public Inspection	
Name of the organization Employer identifica			n number
THE QUEENS BORO	UGH PUBLIC LIBRARY	11-1904262	
Part I Reason for	r Public Charity Status (All organizations must complete this part.) Se	e 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).			

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 organiz	earch organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the					
		hospital's name, city, and st						
5		An organization operated f		a college or universit	y owned	d or ope	rated by a governme	ental unit described in
		section 170(b)(1)(A)(iv). (C						
6		A federal, state, or local go	•				, , , , , , ,	
7	X	An organization that norma	•	•	pport fro	om a go	vernmental unit or fro	om the general public
		described in section 170(b)		· ·				
8		A community trust describe	•		•			
9		An agricultural research org				•	•	•
		or university or a non-land-	grant college of ag	riculture (see instruct	ions). Ei	nter the	name, city, and state o	f the college or
		university:						
10		An organization that norma receipts from activities rela support from gross investm acquired by the organizatio	ted to its exempt f ent income and u n after June 30, 19	unctions - subject to on nrelated business tax 1975. See section 509 0	certain e able inco (a)(2). (0	xception me (les complete	s, and (2) no more tha s section 511 tax) from Part III.)	n 331/3 %of its
1		An organization organized a	•	•	•		` ' ' '	
2		An organization organized a	•	•			·	
		of one or more publicly sup	-					
	_	Check the box in lines 12a t	_			_	•	_
а		Type I. A supporting orga	•	•			• , ,	
		the supported organizatio	` '	0 ,		ajority of	the directors or truste	es of the
_		supporting organization. Y	-					
b		Type II. A supporting org	•					
		control or management o	• • • •	=	the sam	e persor	is that control or man	age the supported
		organization(s). You must	•					
С		Type III functionally integ						lly integrated with,
_		its supported organization	. , .	•				
d	L	Type III non-functionally			-			
		that is not functionally inte	-		-			d an attentiveness
		requirement (see instructi	•	•				L T W
е		_ Check this box if the orga					• • • • • • • • • • • • • • • • • • • •	ı, туре III
f	En	functionally integrated, or	• •			•		
'		ter the number of supported ovide the following information	-					
9		ame of supported organization	(ii) EIN	(iii) Type of organization	(iv) Is the	organization	(v) Amount of monetary	(vi) Amount of
	(',	ame of supported organization	(11) 2.111	(described on lines 1-10	listed in you	ur governing	support (see	other support (see
				above (see instructions))	Yes	nent?	instructions)	instructions)
					163	NO		
A)								
B)								
C)								
D/								
D)								
E)								
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Schedule A (Form 990 or 990-EZ) 2017

Page 2 Schedule A (Form 990 or 990-EZ) 2017

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.)

Sec	tion A. Public Support						
Cale	ndar 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.")	105,155,597.	115,486,827.	122,344,433.	122,596,667.	129,970,403.	595,553,927.
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	20,990,665.	25,257,869.	26,497,000.	27,002,208.	29,604,560.	129,352,302.
4 5	Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on	126,146,262.	140,744,696.	148,841,433.	149,598,875.	159,574,963.	724,906,229.
6	line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 from line 4						724,906,229.
Sec	tion B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
7	Amounts from line 4	126,146,262.	140,744,696.	148,841,433.	149,598,875.	159,574,963.	724,906,229.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	282,806.	215,509.	384,871.	257,006.	276,444.	1,416,636.
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0.
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) ATCH 1	1,582,221.	849,408.	182,390.	123,608.	162,449.	2,900,076.
11	Total support. Add lines 7 through 10						729,222,941.
12	Gross receipts from related activities, etc. (s	see instructions) .				12	10,060,485.
13	First five years. If the Form 990 is forganization, check this box and stop here	<u> </u>					
Sec	tion C. Computation of Public Sup	port Percenta	ge				
14	Public support percentage for 2017 (li					14	99.41%
15	Public support percentage from 2016					15	99.23%
16a	331/3% support test - 2017. If the org	_					
	box and stop here. The organization q	•		•			
D	331/3% support test - 2016. If the org this box and stop here. The organization						
172	10%-facts-and-circumstances test - 2			_			
11a	10% or more, and if the organization	_					
	Part VI how the organization meets t					•	•
	organization			•	•		
b	10%-facts-and-circumstances test - 2						
	15 is 10% or more, and if the orga		•				
	Explain in Part VI how the organization supported organization	on meets the "	facts-and-circum	stances" test.	The organizatio	n qualifies as a	publicly
18	Private foundation. If the organization instructions	did not check a	a box on line 13,	16a, 16b, 17a	, or 17b, check	this box and see	
						chedule A (Form 9	

Schedule A (Form 990 or 990-EZ) 2017 Page 3

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.)

Sec	tion A. Public Support			/ 1	<u>'</u>	,	
	ndar 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						
	Amounts included on lines 1, 2, and 3						
. u	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 Add lines 7a and 7b						
	Public support. (Subtract line 7c from						
Ŭ	line 6.)						
Sec	tion B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
	Amounts from line 6						
	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						
_	Add lines 10a and 10b						
11	Net income from unrelated business						
• •	activities not included in line 10b,						
	whether or not the business is regularly						
40	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	or the organiza	tion's first seco	nd third fourth	or fifth tax v	l as a section	501(c)(3)
	organization, check this box and stop here .	ŭ	· ·		•		` ' ' '
Sec	tion C. Computation of Public Supp						
<u> 15</u>	Public support percentage for 2017 (line 8,			nn (f))		15	%
16	Public support percentage from 2016 Scher					16	
	tion D. Computation of Investment					10	/0
36 0 17	Investment income percentage for 2017 (lin			3 column (f))		17	%
	Investment income percentage from 2016 S	,		1,,,			
18 10 a						18 e than 331/3% s	
ısa	331/3% support tests - 2017. If the org						. \square
h	17 is not more than 331/3%, check this 331/3% support tests - 2016. If the orga	-	-	•		•	
D	line 18 is not more than 331/3%, check				•		
20	Private foundation. If the organization of		-	•			
20	a.a roundation. II the organization t	aid fior dileck	a box on mie	,	, JIIOON IIIIS DO	,, and 366 mon	40110110

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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

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? 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).
- **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? If "Yes," provide detail in Part VI.
- 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? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7' If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI.**
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI.**
- 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? If "Yes," provide detail in **Part VI.**
- 10 a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

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Part	Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	44-		
h	below, the governing body of a supported organization? A family member of a person described in (a) above?	11a 11b		
	·	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI. on B. Type I Supporting Organizations	116		
00011	on b. Type reapporting 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? 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.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Secti	on C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).			
Caati		1		
Secu	on 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		162	NO
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior			
	tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously			
	provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (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? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
	on 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 ins	tructi	ions).	
a	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.		- (! \	
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see	instru	$\overline{}$	No
2	Activities Test. Answer (a) and (b) below.		163	NO
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
1_	•			
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? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	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? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		1

Schedule A (Form 990 or 990-EZ) 2017

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Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organ	nization	S	
1 Check here if the organization satisfied the Integral Part Test as a qualifying	g trust or	n Nov. 20, 1970 (expla	in in Part VI). See
instructions. All other Type III non-functionally integrated supporting organization	zations r	nust complete Sectio	ns A through E.
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year
		(7.) 7.1101 7.001	(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-functionall	y integra	ited Type III supporting	g organization (see
instructions).	-		•

Schedule A (Form 990 or 990-EZ) 2017

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

Schedule A (Form 990 or 990-EZ) 2017 Page 7

Secti	on D - Distributions	Current Year		
1	Amounts paid to supported organizations to accomplish ex			
2	Amounts paid to perform activity that directly furthers exer			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpo	ses of supported organiz	zations	
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 resp	onsive	
	(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			
а				
b	From 2013			
С	From 2014			
d	From 2015			
е	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: \$			
<u>a</u>	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			

Schedule A (Form 990 or 990-EZ) 2017

and 4c.

Breakdown of line 7: a Excess from 2013 **b** Excess from 2014 . . . c Excess from 2015 d Excess from 2016 Excess from 2017

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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.)

				`		
					ATTACHMENT 1	
SCHEDULE A, PART II -	OTHER INCOM	Ξ				
DESCRIPTION	2013	2014	2015	2016	2017	TOTAL
USED BOOKS & OTHER SALES	121,970.	93,002.	88,306.	80,295.	66,795.	450,368.
INSURANCE PROCEEDS	1,448,982.	558,231.	53,545.	27,270.	75,000.	2,163,028.
	_,,	,	20,222	_,,_,,	,	_,,
MISCELLANEOUS REVENUE	11,269.	198,175.	40,539.	16,043.	20,654.	286,680.
TOTALS	1,582,221.	849,408.	182,390.	123,608.	162,449.	2,900,076.

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

Employer identification number

Name of the organization Employer identification number							
THE QUEENS BOROUGH	PUBLIC LIBRARY						
			11-1904262				
Organization type (check of	ne):						
Filers of:	Section:						
Form 990 or 990-EZ	$\boxed{ \mathbb{X} }$ 501(c)(3) (enter number) organization						
	4947(a)(1) nonexempt charitable trust not treate	d as a private fou	ındation				
	527 political organization						
Form 990-PF	501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt charitable trust treated as	a private founda	tion				
	501(c)(3) taxable private foundation						
Chook if your propriestion	s covered by the General Rule or a Special Rule .						
	(7), (8), or (10) organization can check boxes for both the Ge	neral Rule and a S	Special Rule. See				
General Rule							
	on filing Form 990, 990-EZ, or 990-PF that received, during y or property) from any one contributor. Complete Parts I ar contributions.	-	=				
Special Rules							
regulations under 13, 16a, or 16b, a	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.						
contributor, durin	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.						
contributor, durin contributions tota during the year fo General Rule app	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						
990-EZ, or 990-PF), but it n	at isn't covered by the General Rule and/or the Special Rule ust answer "No" on Part IV, line 2, of its Form 990; or check to certify that it doesn't meet the filing requirements of Sche	k the box on line I	H of its Form 990-EZ or on its				

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

Name of organization THE QUEENS BOROUGH PUBLIC LIBRARY

Employer identification number 11-1904262

Part I	Contributors (see instructions). Use duplicate copies	s of Part I if additional space is ne	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$\$ \$\$ 114,595,476.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$\$\$\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization THE QUEENS BOROUGH PUBLIC LIBRARY

Employer identification number 11-1904262

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space	e is needed.
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(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 or	rganization THE QUEENS BOROUGH PUE	LIC LIBRARY	Employer identification number					
Part III	(10) that total more than \$1,000 for	the year from any one contrions completing Part III, enter t	ns described in section 501(c)(7), (8), or ibutor. Complete columns (a) through (e) and the total of exclusively religious, charitable, etc. once. See instructions.) ►\$					
	Use duplicate copies of Part III if addit							
(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, a	nd 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, a	nd 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, a	nd 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					
		-						
	Transferee's name, address, a	(e) Transfer of gift						
	Transieree 5 name, address, al	IQ 41F T T	Relationship of transferor to transferee					

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

OMB No. 1545-0047

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.

		that have NOT filed Form 5768 (election			
	e organization answered "Yes," (see separate instructions), ther	on Form 990, Part IV, line 5 (Proxy	Tax) (see separate in	structions) or Form 990-I	EZ, Part V, line 35c (Prox
•	Section 501(c)(4), (5), or (6) organized				
	e of organization	·		Employer ide	ntification number
THE	QUEENS BOROUGH PUBI	LIC LIBRARY		11-190	1262
Pa	rt I-A Complete if the c	organization is exempt under	section 501(c) or i	is a section 527 orgai	nization.
1		organization's direct and indirect p			
	definition of "political campa		, ,	,	
2	•	xpenditures (see instructions)		▶\$	
3		campaign activities (see instruction			
Par		organization is exempt under s			
1	Enter the amount of any exc	cise tax incurred by the organizatio	n under section 495	5,,,,,, ▶\$	
2	Enter the amount of any exc	cise tax incurred by organization m	anagers under secti	on 4955 ▶ \$	
3		a section 4955 tax, did it file Form			
4a	Was a correction made?				Yes No
	If "Yes," describe in Part IV.				
Pai	rt I-C Complete if the c	organization is exempt under	section 501(c), ex	cept section 501(c)(3).
1	Enter the amount directly e	expended by the filing organization	n for section 527 ex	xempt function	
	activities			▶\$	
2	Enter the amount of the filir	ng organization's funds contributed	I to other organizati	ons for section	
		es			
3	Total exempt function expe	enditures. Add lines 1 and 2. En	ter here and on Fo	orm 1120-POL,	
	line 17b				
4	Did the filing organization file	e Form 1120-POL for this year?			Yes No
5		and employer identification numb			
		s. For each organization listed, en tributions received that were prom			
		nd or a political action committee (I			
	(a) Name	(b) Address	(c) EIN	1	(e) Amount of political
	(a) Name	(b) Address	(C) EIN	(d) Amount paid from filing organization's	contributions received and
				funds. If none, enter -0	promptly and directly
					delivered to a separate
					political organization. If
					none, enter -0
(1)					
(2)					
(3)					
(4)					
(5)					
(0)					
(6)					
				I	1

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

Schedule C (Form 990 or 990-EZ) 2017

Sch	edule C (Form 990 or 990-EZ) 2017 THE Q1	JEENS BO	ROUGH PUBLIC	LIBRARY	11-1	904262	Page 2
Pa	Complete if the organizat section 501(h)).	ion is exe	mpt under section	on 501(c)(3) and	filed Form 5768 (elec	ction under	
A	Check ► if the filing organization be address, EIN, expenses,				ach affiliated group mem	ber's name,	
В	Check ▶ if the filing organization ch	ecked box	A and "limited conti	rol" provisions app	oly.		
	Limits on Lob (The term "expenditures" m			i.)	(a) Filing organization's totals	(b) Affiliat group tota	
1a	Total lobbying expenditures to influence	public opir	nion (grass roots lob	obying)			
b	Total lobbying expenditures to influence	a legislativ	e body (direct lobby	ying)			
C	Total lobbying expenditures (add lines	a and 1b) .					
d	Other exempt purpose expenditures .						
е	 Total exempt purpose expenditures (ac 	d lines 1c a	nd 1d)				
f	Lobbying nontaxable amount. Enter the	ne amount	from the following	table in both			
	columns.	1					
	If the amount on line 1e, column (a) or (b) is	: The lobbyi	ng nontaxable amoun	t is:			
	Not over \$500,000	20% of the	amount on line 1e.				
	Over \$500,000 but not over \$1,000,000		olus 15% of the exces				
	Over \$1,000,000 but not over \$1,500,000		olus 10% of the exces				
	Over \$1,500,000 but not over \$17,000,000		olus 5% of the excess	over \$1,500,000.			
	Over \$17,000,000	\$1,000,000					
_	Grassroots nontaxable amount (enter 2						
	Subtract line 1g from line 1a. If zero or						
	Subtract line 1f from line 1c. If zero or le						
j	If there is an amount other than zero		•	J			–
	reporting section 4911 tax for this year	<u> </u>	and an Device Head			Yes	No
	(0		raging Period Und				
	(Some organizations that made					ins below.	
	5e 6	tne separa	te instructions for	lines za through	Zī.)		
	Lob	bying Expe	nditures During 4-	ear Averaging Pe	eriod		
	Calendar year (or fiscal year (a beginning in)) 2014	(b) 2015	(c) 2016	(d) 2017	(e) Tota	al
2a	Lobbying nontaxable amount						
b	Lobbying ceiling amount (150% of line 2a, column (e))						
С	Total lobbying expenditures						
_	Crassroots poptavable amount						

Schedule C (Form 990 or 990-EZ) 2017

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

For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity. 1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?. c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 1i Yes No Amount A 102 103 104 105 105 106 107 107 108 109 109 109 109 109 109 109		(election under section 501(h)).	(a	a)		(b)	
During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Padd staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? d Mailings to members, legislators, or the public? Mailings to members legislators, or the public and such as a legislative body? Mailings to members legislators, or the public? Mailings to members legislators, or the public. Mailings							
legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: Volunieers? X	aes —	cription of the lobbying activity.	res	NO		Amount	
referendum, through the use of: Volunteers? Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements? Mailings to members, legislators, or the public? Publications, or published or broadcast statements? For arins to other organizations for lobbying purposes? Publications, or published or broadcast statements? For arins to other organizations for lobbying purposes? Total, Add lines 1c through 11 Total, Add li	1						
a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? b Publications, or published or broadcast statements? c Publications, or published or broadcast statements? d Grants to other organizations for lobbying purposes? d Fariants to other organizations for lobbying purposes? d Fariants to other organizations for lobbying purposes? d Fariants to other organizations, seminars, conventions, speeches, lectures, or any similar means? d Fariants to other organizations, seminars, conventions, speeches, lectures, or any similar means? d Fariants to other organizations, seminars, conventions, speeches, lectures, or any similar means? d Fariants to other organization in a cause the organization to be not described in section 501(c)(3)? d If Yes, enter the amount of any tax incurred under section 4912. d If the filling organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? d Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did 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." D Uses, assessments and similar amounts from members C Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures (and the amount on line 2 cexceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures (see instructions) Taxable amount of lobbying and poli							
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?, b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?, b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?, b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?, b Publications, or published or broadcast statements? c G Frants to other organizations or loobbying purposes? c C G Frants to other organization seems, conventions, speeches, lectures, or any similar means? c C G Frants to other organizations, seminars, conventions, speeches, lectures, or any similar means? c C G Frants to other organizations, seminars, conventions, speeches, lectures, or any similar means? c C G Frants to Other activities? c C G Frants to Other activities in line 1 cause the organization to section 4912 to the described in section 4912 to the filling organization incurred a section 4912 tax, did it file Form 4720 for this year? c If Yes, enter the amount of any tax incurred type organization and section 4912 tax, did it file Form 4720 for this year? c If Yes, enter the amount of any tax incurred upon tax incurred upon the section 501(c)(4), section 501(c)(5), or section 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? c D to the organization make only in-house lobbying optical campaign			x				
Media advertisements? Media advertisements? We publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? Total. Add lines to through 11 Tyes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred under section 4912 of if the filing organization incurred a section 4912 to lift the organization incurred a section 4912 to lift the organization incurred a section 4912 to lift the organization make only in-house lobbying expenditures of \$2,000 or loss? Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? Dues, assessments and similar amounts from members Carryover from last year. Dues, assessments and similar amounts from members Carryover from last year. Total Outprict contact with legislators, their staffs, government officials, or a legislative body? X	_	Volunteers?					
d Mailings to members, legislators, or the public? Publications, or publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Complete retivities? Total. Add lines 1c through 11 Dires, "enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred under section 4912 If the tiling organization incurred a section 4912 ax, did if tile Form 4720 for this year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? Dues, assessments and similar amounts from members Corrover from last year. Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 503(e)(1)(A) notices of nondeductible section 162(e) dues. Aggregate amount reported in section 603(e)(1)(A) notices of nondeductible section 162(e) dues. Aggregate amount reported in section 603(e)(1)(A) notices of nondeductible lobbying and political expenditure and political ex				X			
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g Direct contact with legislators, their staffs, government officials, or a legislative body?				X			
g Direct contact with legislators, their staffs, government officials, or a legislative body?				Х			
Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?. X			Х			108	,000
i Other activities? j Total. Add lines 1c through 1i 2 Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? 2 Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? 3 Lif "Yes," enter the amount of any tax incurred by organization managers under section 4912. 4 If the filling organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Vere 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 make only in-house lobbying expenditures of \$2,000 or less? 4 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." 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. 2 Carryover from last year. b Carryover from last year. c Total c Carryover from last year. c Total d If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? T Taxable amount of lobbying and political expenditures (see instructions) 5 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.	-		X			5	,400
Total. Add lines 1c through 1i If "Yes," enter the amount of any tax incurred under section 4912. If "Yes," enter the amount of any tax incurred by organization managers under section 4912. If "Yes," enter the amount of any tax incurred by organization managers under section 4912. If "Yes," enter the amount of any tax incurred by organization managers under section 4912. If "Yes," enter the amount of any tax incurred by organization managers under section 501(c)(4), section 501(c)(5), or section Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? Total 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." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year. Cotal Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues. If notices were sent and the amount on line 2 ce exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions). Total. Supplemental Information Part IV Supplemental Information Fart II-B, LINE 1, LOBBYING ACTIVITIES:				Х			
Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	j					113	,400
the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Text III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members?	2а	<u> </u>		X			
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Yes No Yes No Yes No							
Were substantially all (90% or more) dues received nondeductible by members? 1	Pa	<u> </u>	(c)(5)	, or s	ection		
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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." 1 Dues, assessments and similar amounts from members						3	
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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 to the reasonable estimate of nondeductible lobbying and political expenditure next year? 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.							
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b Carryover from last year					0-		
and political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) 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, LOBBYING ACTIVITIES:	а	,					
Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues					_		
If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) 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. PART II-B, LINE 1, LOBBYING ACTIVITIES:							
excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?					J		
and political expenditure next year?	4	•					
Taxable amount of lobbying and political expenditures (see instructions)			-	-	4		
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. PART II-B, LINE 1, LOBBYING ACTIVITIES:	5				5		
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. PART II-B, LINE 1, LOBBYING ACTIVITIES:							
PART II-B, LINE 1, LOBBYING ACTIVITIES:	۲o۱	ride the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliate	d grou	ıp list); Part II	l-A, lines	1 and
	2 (se	ee instructions); and Part II-B, line 1. Also, complete this part for any additional information.					
THE LIBRARY UTILIZES STAFF, VOLUNTEERS, AND OUTSIDE CONSULTANTS TO	PAF	T II-B, LINE 1, LOBBYING ACTIVITIES:					
	THE	LIBRARY UTILIZES STAFF, VOLUNTEERS, AND OUTSIDE CONSULTANTS TO					
	ENC	COURAGE ELECTED OFFICIALS TO SUPPORT THE LIBRARY'S BUDGET GOALS.					

Schedule C (Form 990 or 990-EZ) 2017

Schedule C (Form 990 or 990-EZ) 2017 Page 4

Part IV **Supplemental Information** (continued)

Schedule C (Form 990 or 990-EZ) 2017

SCHEDULE D (Form 990)

Supplemental Financial Statements ► Complete if the organization answered "Yes" on Form 990,

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

OMB No. 1545-0047 **Open to Public** Inspection

Department of the Treasury Internal Revenue Service Name of the organization

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

THE	QUEENS BOROUGH PUBLIC LIBRARY	11-1904262
Pa	organizations Maintaining Donor Advised Funds or Other Similar Funds or	Accounts.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 6.	
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate value of contributions to (during year)	
3	Aggregate value of grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held	in donor advised
	funds are the organization's property, subject to the organization's exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant fu	inds can be used
	only for charitable purposes and not for the benefit of the donor or donor advisor, or for an	ny other purpose
	conferring impermissible private benefit?	Yes No
Pa	rt II Conservation Easements.	
_	Complete if the organization answered "Yes" on Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the organization (check all that apply).	
		of a historically important land area
		of a certified historic structure
_	Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in	Held at the End of the Tax Year
	easement on the last day of the tax year.	
а	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	26
C	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 7/25/06, and not on a	2d
3	historic structure listed in the National Register	
3	tax year	ated by the organization during the
4	Number of states where property subject to conservation easement is located	
5	Does the organization have a written policy regarding the periodic monitoring, inspecti	
•	violations, and enforcement of the conservation easements it holds?	-
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing cons	
	b	oorvanen oacomeme aarmig me year
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing co	onservation easements during the year
	▶ \$	3 ,
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section	on 170(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?	Yes No
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	al statements that describes the
	organization's accounting for conservation easements.	
Pa	Organizations Maintaining Collections of Art, Historical Treasures, or Other	Similar Assets.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its r works of art, historical treasures, or other similar assets held for public exhibition, educ public service, provide, in Part XIII, the text of the footnote to its financial statements that described in the control of the control	evenue statement and balance sheet
	public service, provide, in Part XIII, the text of the footnote to its financial statements that described the service in Part XIII.	cribes these items.
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its re-	evenue statement and balance sheet
	works of art, historical treasures, or other similar assets held for public exhibition, educ	cation, 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	
2	If the organization received or held works of art, historical treasures, or other similar a	
2	following amounts required to be reported under SFAS 116 (ASC 958) relating to these items	.
а	Revenue included on Form 990, Part VIII, line 1	
b	Assets included in Form 990, Part X	· · · · · · · · · · · · · · · · · · ·

Schedule D (Form 990) 2017 Page 2

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)		Till Organizations Maintaining	na Collections of	Δrt Hist	orical T	reasures	or Oth	er Simila	r Asse	ts (cor		age Z
collection items (check all that apply): Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 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 No Part IV Errow 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 If 'yes,' explain the arrangement in Part XIII and complete the following table: Beginning balance 16 Auditions during the year 16 Individual organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No No If 'yes,' explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII Part VIII		-	· ·									
Public exhibition d	•			other recon	u3, 011001	Carry Or th	ic rollow	ing that ar	c a sign	inicant	u30 0	71 113
b Scholarly research e Other Preservation for future generations 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 Excrow 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, 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, line 21. 1a Is the organization include an amount on Form 990, Part X, line 21. 5 Beginning balance Complete if the organization and the year 1 Endonymount of the part XIII and complete the following table: Complete if the organization and the year 1 Endonymount of the part XIII Check here if the explanation has been provided on Part XIII Yes, "explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII Check here if the explanation has been provided on Part XIII of the organization answered "Yes" on Form 990, Part IV, line 10. 2 Beginning of year balance 2 Did the organization answered "Yes" on Form 990, Part IV, line 10. 2 Complete if the organization answered "Yes" on Form 990, Part IV, line 10. 3 Beginning of year balance 3 Diagnosis and losses Complete if the organization answered "Yes" on Form 990, Part IV, line 10. 4 Administrative expenses 1 Defended the part XIII Adams of the part XIII Adams of the organization by: 1 Defended the part XIII Adams of the organization by: 1 Defended the part XIII Adams of the organization by: 1 Defended the part XIII be intended uses of the o	а		у).	d	Loan	or exchang	e nrograr	ne				
Preservation for future generations A Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. During the year, did the organization ansient on the maintained as part of the organization's collection?				-		on oxonang	o prograi	110				
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 assists to be sold to raise funds rather than to be minitatined as part of the organization's collection?			rations] Other							
Suring 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?				and expla	in how t	hev furthe	r the ord	nanization's	exemn,	nurno	se in	Part
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?	•	- · · · · · · · · · · · · · · · · · · ·	iization o olicotione	and oxpic	11011	iloy raitilo	1 1110 015	garnzanorro	Охоттр	, puipo	,0 111	· uit
Section 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.	5		n solicit or receive o	lonations o	fart histo	orical treas	ures or o	other simila	r			
Secrow and Custodial Arrangements.	•									Yes		No
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? Ves	Par			ou uo pu		7. gaa						1
990, Part X, line 21. a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? b If Yes, "explain the arrangement in Part XIII and complete the following table: C Beginning balance				s" on Form	990. Pa	art IV. line	9. or re	ported an	amoun	t on Fo	rm	
1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? No Mo Mr Mo Mr Mr Mr Mr M							0, 00	p 0.10 a a				
Included on Form 990, Part X? Yes No If "Yes," explain the arrangement in Part XIII and complete the following table: Amount	1a		e. custodian or othe	er intermed	iarv for c	ontributions	s or other	r assets not				
b ff "Yes," explain the arrangement in Part XIII and complete the following table: C Beginning balance 16 16 16 16 16 16 16 1									Γ	Yes		No
C Beginning balance 16	b											
C Beginning balance 1c dc dc dc dc dc dc dc	-							Ar	nount			
d Additions during the year 1d 1e 1f 1f 1f 1f 1f 1f 1f	С	Beginning balance				10						
E Distributions during the year fe fending balance 1 fe fending balance fending												
f Ending balance f												
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. Yes No Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. We (i) Two years back (d) Three years back (e) Four years back (e) Four years back (e) Four years back (f) Three years back (e) Four years back (e) Four years back (f) Three years back (g) Four years back (h) Four years back (g) Four years <t< th=""><th></th><th></th><th></th><th></th><th></th><th></th><th></th><th></th><th></th><th></th><th></th><th></th></t<>												
Part V Endowment Funds.	2a	Did the organization include an am	ount on Form 990,	Part X, line	21, for e	scrow or c	ustodial	account liab	ility?	Yes		No
Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.		_										1
Complete if the organization answered "Yes" on Form 990, Part IV, line 10. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property Complete if the organization answered "Yes" on Form 990, Part X, line 10. Description of property Complete if the organization answered "Yes" on Form 990, Part X, line 10. Description of property Complete if the organization answered "Yes" on Form 990, Part X, line 10. Description of property Complete if the organization answered "Yes" on Form 990, Part X, line 10. Description of property Complete if the organization answered "Yes" on Form 990, Part X, line 10. Description of property Complete if the organization answered					•	'						
1a Beginning of year balance 11,448,057. 10,607,643. 9,123,923. 8,805,924. 7,906,161. b Contributions 83,227. 236,052. 357,941. 638,971. c Net investment earnings, gains, and losses 1,069,183. 916,401. 1,138,484. 70,830. 399,477. d Grants or scholarships 1,069,183. 916,401. 1,138,484. 70,830. 399,477. d Administrative expenses 111,449. 75,987. 163,113. 110,727. 138,685. g End of year balance 12,489,018. 11,448,057. 10,335,346. 9,123,968. 8,805,924. 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment			ion answered "Yes	on Form	990, Pa	art IV, line	10.					
Beginning of year data.			(a) Current year	(b) Prio	r year	(c) Two ye	ars back	(d) Three ye	ars back	(e) Fou	r years	back
b Contributions 83,227. 236,052. 357,941. 638,971. c Net investment earnings, gains, and losses 1,069,183. 916,401. 1,138,484. 70,830. 399,477. d Grants or scholarships	1 a	Reginning of year balance	11,448,057.	10,60	7,643.	9,123	3,923.	8,805	,924.	7,	906,	161.
to Net investment earnings, gains, and losses			83,227.			236	5,052.	357	,941.		638,	971.
and losses.												
d Grants or scholarships	C		1,069,183.	916	5,401.	1,138	3,484.	70	,830.		399,	477.
e Other expenditures for facilities and programs	ч											
and programs		-										
f Administrative expenses	C	=										
g End of year balance	f	, ,	111,449.	7:	5,987.	163	3,113.	110	,727.		138,	685.
Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶			12,489,018.	11,448	3,057.	10,335	346.	9,123	,968.	8,	805,	924.
a Board designated or quasi-endowment	_		of the current year	and halance	line 1a	column (a)) held as					
b Permanent endowment ▶ 70.3600 % 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: (i) unrelated organizations					, mio 19,	ooiaiiii (a)) Hola ao	•				
Temporarily restricted endowment ▶ 29.6400 % 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:	b			_								
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: (i) unrelated organizations (ii) related organizations (iii) related organizations (iii) related organizations (iii) related organizations (iv) unrelated organizations (iv) related organizations (iv)												
Ves No Ves No Ves Ves No Ves												
(i) unrelated organizations (ii) related organizations b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 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 (b) Cost or other basis (c) Accumulated depreciation (investment) (a) Cost or other basis (other) (b) Buildings 42,831,280, 8,348,954, 34,482,326, c Leasehold improvements 1,874,670, 1,590,788, 283,882, d Equipment 6,705,924, 4,019,832, 2,686,092.	3a	· · · · · · · · · · · · · · · · · · ·										
(ii) related organizations b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 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 (other) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value 1a Land b Buildings 42,831,280. 8,348,954. 34,482,326. c Leasehold improvements 1,874,670. 1,590,788. 283,882. d Equipment 6,705,924. 4,019,832. 2,686,092.		organization by:									Yes	No
(ii) related organizations b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 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 (other) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value 1 Land b Buildings 42,831,280. 8,348,954. 34,482,326. c Leasehold improvements 1,874,670. 1,590,788. 283,882. d Equipment 6,705,924. 4,019,832. 2,686,092.		(i) unrelated organizations								3a(i)		X
Describe in Part XIII the intended uses of the organization's endowment funds. 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 (b) Cost or other basis (other) (a) Cost or other basis (other) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value 42,831,280. 8,348,954. 34,482,326. c Leasehold improvements 1,874,670. 1,590,788. 283,882. d Equipment 6 Other 6,705,924. 4,019,832. 2,686,092.										3a(ii)	Х	
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 42,831,280. 8,348,954. 34,482,326. c Leasehold improvements 1,874,670. 1,590,788. 283,882. d Equipment 14,330,043. 13,576,553. 753,490. e Other 6,705,924. 4,019,832. 2,686,092.	b	If "Yes" on line 3a(ii), are the relate	ed organizations liste	d as require	ed on Sch	edule R?.				3b	X	
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 1a Land 42,831,280. 8,348,954. 34,482,326. c Leasehold improvements 1,874,670. 1,590,788. 283,882. d Equipment 14,330,043. 13,576,553. 753,490. e Other 6,705,924. 4,019,832. 2,686,092.	4	Describe in Part XIII the intended u	ises of the organiza	tion's endo	wment fur	nds.						
Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value 1a Land 42,831,280. 8,348,954. 34,482,326. b Buildings 42,831,280. 1,590,788. 283,882. c Leasehold improvements 14,330,043. 13,576,553. 753,490. e Other 6,705,924. 4,019,832. 2,686,092.	Par	t VI Land, Buildings, and Equi	pment.	-" -	- 000 D	t IV / I'm -	. 44 - 0	- 0		4 V . U	- 40	
tall Land (investment) (other) depreciation b Buildings 42,831,280. 8,348,954. 34,482,326. c Leasehold improvements 1,874,670. 1,590,788. 283,882. d Equipment 14,330,043. 13,576,553. 753,490. e Other 6,705,924. 4,019,832. 2,686,092.												
b Buildings 42,831,280. 8,348,954. 34,482,326. c Leasehold improvements 1,874,670. 1,590,788. 283,882. d Equipment 14,330,043. 13,576,553. 753,490. e Other 6,705,924. 4,019,832. 2,686,092.		Description of property								I) BOOK Va	iue	
b Buildings 42,831,280. 8,348,954. 34,482,326. c Leasehold improvements 1,874,670. 1,590,788. 283,882. d Equipment 14,330,043. 13,576,553. 753,490. e Other 6,705,924. 4,019,832. 2,686,092.	1a	Land										
d Equipment 14,330,043. 13,576,553. 753,490. e Other 6,705,924. 4,019,832. 2,686,092.	b	Buildings										
e Other 6,705,924. 4,019,832. 2,686,092.												
e Other 6,705,924. 4,019,832. 2,686,092.	d	Equipment					13,5	76,553.				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) ▶ 38,205,790.	е	Other										
	Tota	I. Add lines 1a through 1e. (Column	(d) must equal Forr	n 990, Part	X, columi	n (B), line 1	0c.)	▶		38,2	05,7	790.

Schedule D (Form 990) 2017 Page 3

Part VII Investments - Other Securities.		T ago V
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:
	(1)	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) Des	scription	(b) Book value
(1)		
(2)		
(3)		
(4)		
_(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) lin	ne 15.)	<u></u> ▶
Part X Other Liabilities. Complete if the organization answered line 25.	"Yes" on Form 990,	Part IV, line 11e or 11f. See Form 990, Part X,
1. (a) Description of liability	(b) Book value	
(1) Federal income taxes		
(2) COMPENSATION ABSENCES PAYABLE	6,267,8	52.
(3) WORKERS' COMP - SELF-INSURED LOSSES	337,4	77.
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	6,605,32	29.

JSA 7E1270 1.000

^{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

Page 4 Schedule D (Form 990) 2017

Ochicadi	C D (1 01111 330) 2011		r agc -r
Part 2	Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	n.	
1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
	Net unrealized gains (losses) on investments		
a	Donated services and use of facilities	1	
b	Donated Services and use of identities 1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.	1	
С.	Received of prior year granter in the interest	1	
d	Carlor (Bosoniae in Fair Ann.)	2e	
	Add lines 2a through 2d	3	
3	Subtract line 2e from line 1	-	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
	investment expenses not included on Fermi 330, Fart Vin, inte 75	1	
	Citier (Describe in Larvain.)	4c	
	Add lines 4a and 4b	5	
5 Part			
rait	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities		
b	Prior year adjustments		
С	Other losses		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)		
	Add lines 4a and 4b	4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	
	XIII Supplemental Information.		
	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Pa		
2; Part	XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information of the complete this part to provide any additional information.	nation.	
SEE	PAGE 5		

Schedule D (Form 990) 2017

Part XIII Supplemental Information (continued)

PART V, LINE 1A, COLUMN (B) PRIOR YEAR:

THE PRIOR YEAR'S BEGINNING BALANCE OF ENDOWMENT FUNDS IS RESTATED TO REFLECT THE FOLLOWING CHANGES:

ADJUST THE NET PRESENT VALUE DISCOUNT ON PLEDGE RECEIVABLES: \$419,718.

RE-ALLOCATE NET ASSETS FOR RECLASSIFICATION OF RESTRICTIONS: (\$147,421).

TOTAL RESTATEMENT\$272,297

PART V, LINE 4:

THE LIBRARY'S ENDOWMENT FUNDS ARE HELD AND ADMINISTERED BY THE QUEENS
LIBRARY FOUNDATION, INC., A RELATED 501(C)(3)ORGANIZATION, TO BE USED FOR
SUPPORT OF SPECIFIC PROGRAMS AND OPERATING PURPOSES.

PART X, LINE 2:

THE LIBRARY ADOPTED THE PROVISION OF ASC 740, "ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES," ON JANUARY 1, 2009. UNDER ASC 740, AN ORGANIZATION MUST RECOGNIZE THE TAX BENEFIT ASSOCIATED WITH TAX POSITIONS TAKEN FOR TAX RETURN PURPOSES WHEN IT IS MORE LIKELY THAN NOT THAT THE POSITION WILL NOT BE SUSTAINED. THE IMPLEMENTATION OF ASC 740 HAD NO IMPACT ON THE LIBRARY'S FINANCIAL STATEMENTS. THE LIBRARY DOES NOT BELIEVE THERE ARE ANY MATERIAL UNCERTAIN TAX POSITIONS AND, ACCORDINGLY, IT HAS NOT RECORDED ANY LIABILITY FOR UNRECOGNIZED TAX BENEFITS. THE LIBRARY HAS FILED FOR AND RECEIVED INCOME TAX EXEMPTIONS IN THE JURISDICTIONS WHERE IT IS REQUIRED TO DO SO. ADDITIONALLY, THE LIBRARY HAS FILED THE INTERNAL REVENUE SERVICE FORM 990 TAX RETURNS AS REQUIRED, AND ALL OTHER APPLICABLE RETURNS IN JURISDICTIONS WHERE SO REQUIRED. FOR THE YEAR ENDED JUNE 30, 2018, THERE WAS NO INTEREST OR PENALTIES RECORDED OR INCLUDED IN THE STATEMENT OF ACTIVITIES. THE LIBRARY IS SUBJECT TO ROUTINE AUDITS BY

Schedule D (Form 990) 2017

Part XIII Supplemental Information (continued)

A TAXING AUTHORITY. AS OF JUNE 30, 2018, THE LIBRARY WAS NOT SUBJECT TO ANY EXAMINATION BY A TAXING AUTHORITY. FOR THE YEAR ENDED JUNE 30, 2018, THE LIBRARY HAD NO UNRELATED BUSINESS INCOME FROM UNRELATED TRADES OR BUSINESSES.

Schedule D (Form 990) 2017

SCHEDULE J (Form 990)

Compensation InformationFor certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees**

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

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

OMB No. 1545-0047 **Open to Public** Inspection

Department of the Treasury Internal Revenue Service Name of the organization

THE QUEENS BOROUGH PUBLIC LIBRARY

Employer identification number

11-1904262

Part	Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as, maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to			
	explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all			
	directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line			
	1a?	2		
3	Indicate which, if any, of the following the 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.			
	X Compensation committee Written employment contract X Independent compensation consultant X Compensation survey or study			
	independent compensation constitution			
	11 1 2 2 3 1 2 3 1 3 1 3 1 3 1 3 1 3 1 3			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
а	organization or a related organization: Receive a severance payment or change-of-control payment?	4a		Х
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
C	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Х
•	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	and provide any or miles has the personal and provide and approvable announce to easily normal and miles			
	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:			
а	The organization?	5a		Х
b	Any related organization?	5b		Х
	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:			
а	The organization?	6a		X
b	Any related organization?	6b		Х
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed			
	payments not described on lines 5 and 6? If "Yes," describe in Part III.	7		X
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			37
_	in Part III	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2017

THE QUEENS BOROUGH PUBLIC LIBRARY 11-1904262

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.

		(B) Breakdown of	f W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990
DENNIS WALCOTT	(i)	276,425.	0.	0.	0.	2,770.	279,195.	0.
1 PRESIDENT & CEO	(ii)	30,714.	0.	0.	0.	308.	31,022.	0.
JOHANNA RICHMAN	(i)	127,391.	0.	0.	11,720.	11,074.	150,185.	0.
2 CFO & SVP, THRU 7/31/17	(ii)	2,600.	0.	0.	239.	226.	3,065.	0.
GITTE PENG	(i)	156,898.	0.	0.	14,435.	19,557.	190,890.	0.
3 ^{COS & SVP}	(ii)	27,688.	0.	0.	2,547.	3,451.	33,686.	0.
LEWIS FINKELMAN, ESQ.	(i)	246,443.	0.	0.	22,673.	4,105.	273,221.	0.
4 ^{COO & SVP}	(ii)	0.	0.	0.	0.	0.	0.	0.
NICK BURON	(i)	185,149.	0.	0.	39,992.	21,201.	246,342.	0.
5 ^{CHIEF} LIBRARIAN & SVP	(ii)	0.	0.	0.	0.	0.	0.	0.
SUNG KIM	(i)	184,103.	0.	0.	16,937.	18,688.	219,728.	0.
6 GENERAL COUNSEL & SVP	(ii)	0.	0.	0.	0.	0.	0.	0.
LAWRENCE VEDILAGO	(i)	175,160.	0.	0.	37,835.	20,717.	233,712.	0.
7 ^{VP, RISK MANAGEMENT}	(ii)	0.	0.	0.	0.	0.	0.	0.
AMY MUGAVERO	(i)	16,781.	0.	0.	1,544.	2,260.	20,585.	0.
8EXECUTIVE DIRECTOR, QLF	(ii)	151,025.	0.	0.	13,894.	20,336.	185,255.	
JACQUELINE MARTINEZ	(i)	165,656.	0.	0.	15,240.	22,563.	203,459.	0.
9 DIRECTOR OF HUMAN RESOURCES	(ii)	0.	0.	0.	0.	0.	0.	
HAN KO	(i)	158,941.	0.	0.	14,623.	20,710.	194,274.	0.
10 ^{DIRECTOR OF MARKETING}	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
11	(ii)							
	(i)							
12	(ii)							
	(i)							
13	(ii)							
	(i)							
14	(ii)							
	(i)							
15	(ii)							
	(i)							
16	(ii)							

Schedule J (Form 990) 2017

THE QUEENS BOROUGH PUBLIC LIBRARY 11-1904262

Schedule J (Form 990) 2017

Part | 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 (Form 990) 2017

JSA 7E1505 1.000

SCHEDULE O (Form 990 or 990-EZ)

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.

OMB No. 1545-0047

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Open to Public Inspection

11-1904262

Department of the Treasury Internal Revenue Service

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

Name of the organization

Employer identification number

FORM 990, PART I, LINE 7B AND PART V, LINE 3A:

FORM 990-T WAS FILED EXCLUSIVELY FOR QUALIFIED TRANSPORTATION AND PARKING

FRINGE BENEFITS, AND ANY ON-PREMISES ATHLETIC FACILITIES UNDER SECTION

512(A)(7) FOR THE PERIOD BEGINNING JANUARY 1, 2018 THRU JUNE 30, 2018.

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

THE QUEENS BOROUGH PUBLIC LIBRARY

FORM 990 WAS PREPARED BY A NATIONAL RENOWNED ACCOUNTING FIRM IN

CONJUNCTION WITH THE ORGANIZATION'S FINANCE DEPARTMENT. A DRAFT FORM 990

WAS PRESENTED TO THE AUDIT COMMITTEE FOR REVIEW AND THEN PROVIDED TO ALL

MEMBERS OF THE BOARD OF TRUSTEES VIA ELECTRONIC MAIL, WITH THE

OPPORTUNITY FOR THEM TO COMMENT OR MAKE INQUIRY BEFORE IT WAS FILED WITH

THE INTERNAL REVENUE SERVICE.

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

CONFLICT OF INTEREST FORMS ARE COMPLETED BY OFFICERS, BOARD OF

DIRECTORS AND KEY EMPLOYEES, UPON APPOINTMENT AND ANNUALLY THEREAFTER AND

THE POLICY REQUIRES DISCLOSURE FOR ANY ARISING CONFLICTS.

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

BOTH AN INDEPENDENT COMPENSATION STUDY BY A THIRD PARTY AND AN INTERNAL

COMPENSATION ANALYSIS ARE USED AS THE BASIS TO BENCHMARK THE PRESIDENT &

CHIEF EXECUTIVE OFFICER'S COMPENSATION. THESE REPORTS INCLUDE CURRENT

MARKET COMPARABILITY DATA, SURVEYS AND IRS FORM 990 FILINGS OF

ORGANIZATIONS OF SIMILAR SIZES. PURSUANT TO THE BY-LAWS, THE LABOR

RELATIONS COMMITTEE ANNUALLY REVIEWS AND MAKES RECOMMENDATIONS TO THE BOARD OF TRUSTEES REGARDING THE COMPENSATION ARRANGEMENTS FOR THE PRESIDENT AND CHIEF EXECUTIVE OFFICER AND OTHER KEY EXECUTIVE EMPLOYEES IN ACCORDANCE WITH THE POLICIES AND PROCEDURES SET FORTH IN ARTICLE V, SECTION 4, OF THESE BY-LAWS. THE BOARD OF TRUSTEES APPROVES THE PRESIDENT & CEO'S COMPENSATION PACKAGE PURSUANT TO THE LIBRARY'S BY-LAWS. THE DECISIONS OF THE BOARD ARE DOCUMENTED IN THE MINUTES.

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

THE SALARIES OF OTHER OFFICERS AND KEY EMPLOYEES IS BASED ON A COMPENSATION PROGRAM USING SALARY GRADES DESIGNED BY AN INDEPENDENT CONSULTANT. THE SALARY RANGES ARE REVIEWED REGULARLY AND UPDATED AS NEEDED BY THE CONSULTANT TO ENSURE MARKET COMPETITIVE SALARIES FOR ALL NON-UNION EMPLOYEES. THESE RANGES ARE APPROVED BY THE BOARD OF TRUSTEES.

FORM 990, PART VI, SECTION C, LINE 19:

THE LIBRARY'S FORM 990 IS AVAILABLE ON ITS WEBSITE, AS WELL AS
GUIDESTAR'S WEBSITE. THE FINANCIAL STATEMENTS AND BY-LAWS ARE ALSO
AVAILABLE ON THE LIBRARY'S WEBSITE AS WELL AS AVAILABLE UPON REQUEST. THE
CONFLICTS OF INTEREST POLICY IS AVAILABLE UPON REQUEST.

FORM 990, PART VII, SECTION A, AND SCHEDULE J, PART II

ALL INDIVIDUALS LISTED ARE COMPENSATED EXCLUSIVELY BY THE REPORTING

ORGANIZATION. EACH INDIVIDUAL DEDICATED A CERTAIN PERCENTAGE OF TIME TO

Schedule O (Form 990 or 990-EZ) 2017 Page **2**

Name of the organization

THE QUEENS BOROUGH PUBLIC LIBRARY

Employer identification number

11-1904262

THE REPORTING ORGANIZATION. THE REMAINDER OF EACH EMPLOYEE'S TIME IS

CHARGED TO THE QUEENS LIBRARY FOUNDATION, INC., A RELATED 501(C)(3)

ORGANIZATION.

ATTACHMENT 1

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

NAME AND ADDRESS	DESCRIPTION OF SERVICES	COMPENSATION
ALLIED UNIVERSAL 33-10 QUEENS BLVD, 3RD FLOOR LONG ISLAND CITY, NY 11101	SECURITY	466,862.
JACOB FEINBERG KATZ & MICHAELI 134 WEST 37TH STREET, 12TH FLOOR NEW YORK, NY 10018	CONSULTING	397,368.
PRICEWATERHOUSE COOPERS LLP P.O.BOX 7247-8001 PHILADELPHIA, PA 19170	CONSULTING	236,209.
LOS DOS, INC. (DBA DOUBLESPACE) 254 CANAL STREET, SUITE 5000 NEW YORK, NY 10003	CONSULTING	202,925.
MARGERT COMMUNITY CORPORATION 325 BEACH 37TH ST FAR ROCKAWAY, NY 11691	TRAINING	128,731.

SCHEDULE R (Form 990)

Department of the Treasury

Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

► Attach to Form 990.

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

OMB No. 1545-0047
20 17
Open to Public Inspection

Name of the organization
THE QUEENS BOROUGH PUBLIC LIBRARY

Employer identification number 11–1904262

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section 5 conti	g) 512(b)(13) rolled ity?
						Yes	No
(1) THE QUEENS LIBRARY FOUNDATION 11-3009405							
89-11 MERRICK BOULEVARD JAMAICA, NY 11432	FUNDRAISING	NY	501(C)(3)	7	QBPL	X	
(2)							
(3)							
(4)							
(5)							
(6)	_						
(7)							

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

Schedule R (Form 990) 2017

(6)

Schedule R (Form 990) 2017

Part III	Identification of Relate because it had one or						inswered "Yes"	on l	Form	n 990, Part IV,	line	34,	
Na	(a) ame, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512 - 514)	(f) Share of total income	(g) Share of end-of- year assets	Disprop	h) contionate ations?	(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	Gen man par	eral or aging tner?	(k) Percenta ownersh
								Yes	No		Yes	No	
(1)													
(2)													

(4) (5)

Part IV

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

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

JSA 7E1308 1.000

(3)

(6)

(7)

Schedule R (Form 990) 2017

Page 3

Part V	Transactions With Related Organizations.	Complete if th	ie organization answe	ered "Yes" on Form 990, I	Part IV, line 34, 35b, or 36.
			3		, ,

Not	te: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	No
1	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		X
b	Gift, grant, or capital contribution to related organization(s)	1b		X
С	Gift, grant, or capital contribution from related organization(s).	1c	Х	
d	Loans or loan guarantees to or for related organization(s)	1d		X
	Loans or loan guarantees by related organization(s)	1e	Х	
f	Dividends from related organization(s).	1f		X
g	Sale of assets to related organization(s)	1g		X
h	Purchase of assets from related organization(s)	1h		X
i	Exchange of assets with related organization(s)	1i		X
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		X
•				
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		X
	Performance of services or membership or fundraising solicitations for related organization(s)	11		X
	Performance of services or membership or fundraising solicitations by related organization(s)	1m	Х	
		1n	Х	
	Sharing of paid employees with related organization(s)	10	Х	
р	Reimbursement paid to related organization(s) for expenses	1p		X
	Reimbursement paid by related organization(s) for expenses	1q		X
•				
r	Other transfer of cash or property to related organization(s)	1r	Х	
s	Other transfer of cash or property from related organization(s).	1s	Х	
~	If the appropriate any of the above is "IVes" and the instructions for information on the must complete this line including account relationships and transaction through	باماما		

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)	THE QUEENS LIBRARY FOUNDATION, INC.	С	1,309,334.	COST
(2)	THE QUEENS LIBRARY FOUNDATION, INC.	E	231,268.	COST
(3)	THE QUEENS LIBRARY FOUNDATION, INC.	R	627,197.	COST
(4)	THE QUEENS LIBRARY FOUNDATION, INC.	S	193,106.	COST
(5)				
(6)				

JSA 7E1309 2.000 Schedule R (Form 990) 2017

Schedule R (Form 990) 2017

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under	Are all sec 501 organiz	e) partners ction (c)(3) zations?	(f) Share of total income	(g) Share of end-of-year assets	Disprop	(h) portionate ations?	(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	in box 20 managing dule K-1 partner?		(k) Percentage ownership
(4)			sections 512-514)	Yes	No			Yes	No		Yes	No	
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)													
(10)													
(11)													
(12)													
(13)													
(14)													
(15)													
(16)													

JSA Schedule R (Form 990) 2017

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Part VII Supplemental Information
Provide additional information for responses to questions on Schedule R. See instructions.