

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

2021

Department of the Treasury
Internal Revenue Service

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Open to Public Inspection

A For the 2021 calendar year, or tax year beginning		and ending	
B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization Carnegie Library of Pittsburgh		D Employer identification number 25-0965281
	Doing business as		E Telephone number 412-622-3104
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 4400 Forbes Avenue		
	City or town, state or province, country, and ZIP or foreign postal code Pittsburgh, PA 15213		G Gross receipts \$ 44,066,548.
	F Name and address of principal officer: Ms. Mary Frances Cooper same as C above		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(c) Group exemption number ▶	
J Website: ▶ www.carnegielibrary.org		K Form of organization: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶	
		L Year of formation: 1895	M State of legal domicile: PA

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: To engage our community in literacy and learning.		
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	36
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	36
	5	Total number of individuals employed in calendar year 2021 (Part V, line 2a)	5	475
	6	Total number of volunteers (estimate if necessary)	6	26
	7 a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
	b	Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9	Program service revenue (Part VIII, line 2g)	40,934,557.	42,101,718.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	243,005.	155,973.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	363,843.	1,254,163.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	319,047.	30,098.
			41,860,452.	43,541,952.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	0.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	20,552,035.	20,447,378.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,103,209.		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	14,908,230.	16,455,156.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	35,460,265.	36,902,534.	
19	Revenue less expenses. Subtract line 18 from line 12	6,400,187.	6,639,418.	
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21	Total liabilities (Part X, line 26)	120,259,666.	129,763,715.
	22	Net assets or fund balances. Subtract line 21 from line 20	16,019,592.	14,720,366.
		104,240,074.	115,043,349.	

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer		Date
	▶ Ms. Linda Barsevich, Director of Finance & Admin Type or print name and title		
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date
	Amy Lewis		
	Firm's name ▶ MAHER DUESSEL, CPA'S	Firm's EIN ▶ 25-1622758	Check <input type="checkbox"/> if self-employed PTIN P01360302
	Firm's address ▶ 503 MARTINDALE STREET, SUITE 600 PITTSBURGH, PA 15212	Phone no. 412-471-5500	

May the IRS discuss this return with the preparer shown above? See instructions Yes No

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	5	Total number of individuals employed in calendar year 2021 (Part V, line 2a)	5	475
	6	Total number of volunteers (estimate if necessary)	6	26
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
	7b	Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year 40,934,557.	Current Year 42,101,718.
	9	Program service revenue (Part VIII, line 2g)	243,005.	155,973.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	363,843.	1,254,163.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	319,047.	30,098.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	41,860,452.	43,541,952.
	Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.
14		Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
15		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	20,552,035.	20,447,378.
16a		Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
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Sign Here	Signature of officer		Date
	▶ Ms. Linda Barsevich, Director of Finance & Admin Type or print name and title		
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date
	Amy Lewis		
	Firm's name ▶ MAHER DUESSEL, CPA'S	Firm's EIN ▶ 25-1622758	Check <input type="checkbox"/> if self-employed PTIN P01360302
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	Amy Lewis		
	Check <input type="checkbox"/> if self-employed	PTIN	
		P01360302	
	Firm's name ▶ MAHER DUESSEL, CPA'S	Firm's EIN ▶ 25-1622758	
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	Check <input type="checkbox"/> if self-employed	PTIN	
		P01360302	
	Firm's name ▶ MAHER DUESSEL, CPA'S	Firm's EIN ▶ 25-1622758	
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Part I Summary

	1 Briefly describe the organization's mission or most significant activities: To engage our community in literacy and learning.		
Activities & Governance	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	36
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	36
	5 Total number of individuals employed in calendar year 2021 (Part V, line 2a)	5	475
	6 Total number of volunteers (estimate if necessary)	6	26
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
	b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year 40,934,557.	Current Year 42,101,718.
	9 Program service revenue (Part VIII, line 2g)	243,005.	155,973.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	363,843.	1,254,163.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	319,047.	30,098.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	41,860,452.	43,541,952.
	Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.
14 Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		20,552,035.	20,447,378.
16a Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,103,209.			
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		14,908,230.	16,455,156.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		35,460,265.	36,902,534.
19 Revenue less expenses. Subtract line 18 from line 12	6,400,187.	6,639,418.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 120,259,666.	End of Year 129,763,715.
	21 Total liabilities (Part X, line 26)	16,019,592.	14,720,366.
	22 Net assets or fund balances. Subtract line 21 from line 20	104,240,074.	115,043,349.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer Ms. Linda Barsevich, Director of Finance & Admin		Date
	Type or print name and title		
Paid Preparer Use Only	Print/Type preparer's name Amy Lewis	Preparer's signature	Date
	Firm's name ▶ MAHER DUESSEL, CPA'S	Firm's EIN ▶ 25-1622758	Check <input type="checkbox"/> if self-employed PTIN P01360302
	Firm's address ▶ 503 MARTINDALE STREET, SUITE 600 PITTSBURGH, PA 15212	Phone no. 412-471-5500	

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

2021

Department of the Treasury
Internal Revenue Service

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	Doing business as		E Telephone number 412-622-3104
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 4400 Forbes Avenue		
	City or town, state or province, country, and ZIP or foreign postal code Pittsburgh, PA 15213		G Gross receipts \$ 44,066,548.
	F Name and address of principal officer: Ms. Mary Frances Cooper same as C above		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions
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Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: To engage our community in literacy and learning.		
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	36
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	36
	5	Total number of individuals employed in calendar year 2021 (Part V, line 2a)	5	475
	6	Total number of volunteers (estimate if necessary)	6	26
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
	7b	Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year 40,934,557.	Current Year 42,101,718.
	9	Program service revenue (Part VIII, line 2g)	243,005.	155,973.
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	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	319,047.	30,098.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	41,860,452.	43,541,952.
	Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.
14		Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
15		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	20,552,035.	20,447,378.
16a		Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
16b		Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,103,209.		
17		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	14,908,230.	16,455,156.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	35,460,265.	36,902,534.	
19	Revenue less expenses. Subtract line 18 from line 12	6,400,187.	6,639,418.	
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year 120,259,666.	End of Year 129,763,715.
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	22	Net assets or fund balances. Subtract line 21 from line 20	104,240,074.	115,043,349.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer		Date
	▶ Ms. Linda Barsevich, Director of Finance & Admin Type or print name and title		
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date
	Amy Lewis		
	Firm's name ▶ MAHER DUESSEL, CPA'S	Firm's EIN ▶ 25-1622758	Check <input type="checkbox"/> if self-employed PTIN P01360302
	Firm's address ▶ 503 MARTINDALE STREET, SUITE 600 PITTSBURGH, PA 15212	Phone no. 412-471-5500	

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

2021

Department of the Treasury
Internal Revenue Service

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	b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.
	Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year
9 Program service revenue (Part VIII, line 2g)		40,934,557.	42,101,718.
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12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		319,047.	30,098.
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Sign Here	Signature of officer		Date
	Ms. Linda Barsevich, Director of Finance & Admin		
	Type or print name and title		
Paid Preparer Use Only	Print/Type preparer's name Amy Lewis	Preparer's signature	Date
		Check <input type="checkbox"/> if self-employed	PTIN P01360302
	Firm's name ▶ MAHER DUESSEL, CPA'S	Firm's EIN ▶ 25-1622758	
	Firm's address ▶ 503 MARTINDALE STREET, SUITE 600 PITTSBURGH, PA 15212	Phone no. 412-471-5500	

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Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

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	Type or print name and title		
Paid Preparer Use Only	Print/Type preparer's name Amy Lewis	Preparer's signature	Date
	Firm's name ▶ MAHER DUESSEL, CPA'S	Firm's EIN ▶ 25-1622758	Check <input type="checkbox"/> if self-employed PTIN P01360302
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Activities & Governance	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
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	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	36
	5 Total number of individuals employed in calendar year 2021 (Part V, line 2a)	5	475
	6 Total number of volunteers (estimate if necessary)	6	26
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
	b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year 40,934,557.	Current Year 42,101,718.
	9 Program service revenue (Part VIII, line 2g)	243,005.	155,973.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	363,843.	1,254,163.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	319,047.	30,098.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	41,860,452.	43,541,952.
	Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.
14 Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		20,552,035.	20,447,378.
16a Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,103,209.			
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		14,908,230.	16,455,156.
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19 Revenue less expenses. Subtract line 18 from line 12	6,400,187.	6,639,418.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 120,259,666.	End of Year 129,763,715.
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Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer Ms. Linda Barsevich, Director of Finance & Admin		Date
Paid Preparer Use Only	Print/Type preparer's name Amy Lewis	Preparer's signature	Date
		Check <input type="checkbox"/> if self-employed	PTIN P01360302
	Firm's name ▶ MAHER DUESSEL, CPA'S	Firm's EIN ▶ 25-1622758	
	Firm's address ▶ 503 MARTINDALE STREET, SUITE 600 PITTSBURGH, PA 15212	Phone no. 412-471-5500	

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

2021

Department of the Treasury
Internal Revenue Service

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Sign Here	Signature of officer Ms. Linda Barsevich, Director of Finance & Admin		Date
	Type or print name and title		
Paid Preparer Use Only	Print/Type preparer's name Amy Lewis	Preparer's signature	Date
	Firm's name ▶ MAHER DUESSEL, CPA'S	Firm's EIN ▶ 25-1622758	Check <input type="checkbox"/> if self-employed PTIN P01360302
	Firm's address ▶ 503 MARTINDALE STREET, SUITE 600 PITTSBURGH, PA 15212	Phone no. 412-471-5500	

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

2021

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Sign Here	Signature of officer		Date
	Ms. Linda Barsevich, Director of Finance & Admin		
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Paid Preparer Use Only	Print/Type preparer's name Amy Lewis	Preparer's signature	Date
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17		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	14,908,230.	16,455,156.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	35,460,265.	36,902,534.	
19	Revenue less expenses. Subtract line 18 from line 12	6,400,187.	6,639,418.	
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year 120,259,666.	End of Year 129,763,715.
	21	Total liabilities (Part X, line 26)	16,019,592.	14,720,366.
	22	Net assets or fund balances. Subtract line 21 from line 20	104,240,074.	115,043,349.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer		Date
	▶ Ms. Linda Barsevich, Director of Finance & Admin Type or print name and title		
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date
	Amy Lewis		
	Firm's name ▶ MAHER DUESSEL, CPA'S	Firm's EIN ▶ 25-1622758	Check <input type="checkbox"/> if self-employed PTIN P01360302
	Firm's address ▶ 503 MARTINDALE STREET, SUITE 600 PITTSBURGH, PA 15212	Phone no. 412-471-5500	

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

2021

Department of the Treasury
Internal Revenue Service

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	1 Briefly describe the organization's mission or most significant activities: To engage our community in literacy and learning.		
Activities & Governance	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	36
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	36
	5 Total number of individuals employed in calendar year 2021 (Part V, line 2a)	5	475
	6 Total number of volunteers (estimate if necessary)	6	26
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
	b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year 40,934,557.	Current Year 42,101,718.
	9 Program service revenue (Part VIII, line 2g)	243,005.	155,973.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	363,843.	1,254,163.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	319,047.	30,098.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	41,860,452.	43,541,952.
	Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.
14 Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		20,552,035.	20,447,378.
16a Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
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Sign Here	Signature of officer Ms. Linda Barsevich, Director of Finance & Admin		Date
Paid Preparer Use Only	Print/Type preparer's name Amy Lewis	Preparer's signature	Date
		Check if self-employed <input type="checkbox"/>	PTIN P01360302
	Firm's name ▶ MAHER DUESSEL, CPA'S	Firm's EIN ▶ 25-1622758	
	Firm's address ▶ 503 MARTINDALE STREET, SUITE 600 PITTSBURGH, PA 15212	Phone no. 412-471-5500	

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

2021

Department of the Treasury
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	Type or print name and title		
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Part I Summary

	1 Briefly describe the organization's mission or most significant activities: To engage our community in literacy and learning.		
Activities & Governance	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	36
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	36
	5 Total number of individuals employed in calendar year 2021 (Part V, line 2a)	5	475
	6 Total number of volunteers (estimate if necessary)	6	26
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
	b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year 40,934,557.	Current Year 42,101,718.
	9 Program service revenue (Part VIII, line 2g)	243,005.	155,973.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	363,843.	1,254,163.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	319,047.	30,098.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	41,860,452.	43,541,952.
	Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.
14 Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		20,552,035.	20,447,378.
16a Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,103,209.			
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		14,908,230.	16,455,156.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		35,460,265.	36,902,534.
19 Revenue less expenses. Subtract line 18 from line 12	6,400,187.	6,639,418.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 120,259,666.	End of Year 129,763,715.
	21 Total liabilities (Part X, line 26)	16,019,592.	14,720,366.
	22 Net assets or fund balances. Subtract line 21 from line 20	104,240,074.	115,043,349.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer Ms. Linda Barsevich, Director of Finance & Admin		Date
Paid Preparer Use Only	Print/Type preparer's name Amy Lewis	Preparer's signature	Date
		Check <input type="checkbox"/> if self-employed	PTIN P01360302
	Firm's name ▶ MAHER DUESSEL, CPA'S	Firm's EIN ▶ 25-1622758	
	Firm's address ▶ 503 MARTINDALE STREET, SUITE 600 PITTSBURGH, PA 15212	Phone no. 412-471-5500	

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

2021

Department of the Treasury
Internal Revenue Service

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	Doing business as		E Telephone number 412-622-3104
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 4400 Forbes Avenue		
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Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: To engage our community in literacy and learning.				
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.				
	3	Number of voting members of the governing body (Part VI, line 1a)	3	36		
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	36		
	5	Total number of individuals employed in calendar year 2021 (Part V, line 2a)	5	475		
	6	Total number of volunteers (estimate if necessary)	6	26		
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.		
	7b	Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.		
Revenue			Prior Year		Current Year	
	8	Contributions and grants (Part VIII, line 1h)	40,934,557.		42,101,718.	
	9	Program service revenue (Part VIII, line 2g)	243,005.		155,973.	
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	363,843.		1,254,163.	
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	319,047.		30,098.	
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	41,860,452.		43,541,952.	
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.		0.	
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0.		0.	
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	20,552,035.		20,447,378.	
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.		0.	
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,103,209.				
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	14,908,230.		16,455,156.	
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	35,460,265.		36,902,534.		
19	Revenue less expenses. Subtract line 18 from line 12	6,400,187.		6,639,418.		
Net Assets or Fund Balances			Beginning of Current Year		End of Year	
	20	Total assets (Part X, line 16)	120,259,666.		129,763,715.	
	21	Total liabilities (Part X, line 26)	16,019,592.		14,720,366.	
22	Net assets or fund balances. Subtract line 21 from line 20	104,240,074.		115,043,349.		

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer		Date
	▶ Ms. Linda Barsevich, Director of Finance & Admin Type or print name and title		
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date
	Amy Lewis		
	Firm's name ▶ MAHER DUESSEL, CPA'S	Firm's EIN ▶ 25-1622758	Check <input type="checkbox"/> if self-employed PTIN P01360302
	Firm's address ▶ 503 MARTINDALE STREET, SUITE 600 PITTSBURGH, PA 15212	Phone no. 412-471-5500	

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

2021

Department of the Treasury
Internal Revenue Service

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Sign Here	Signature of officer		Date
	▶ Ms. Linda Barsevich, Director of Finance & Admin		
	Type or print name and title		
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date
	Amy Lewis		
	Check <input type="checkbox"/> if self-employed	PTIN	
		P01360302	
	Firm's name ▶ MAHER DUESSEL, CPA'S	Firm's EIN ▶ 25-1622758	
	Firm's address ▶ 503 MARTINDALE STREET, SUITE 600 PITTSBURGH, PA 15212	Phone no. 412-471-5500	

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	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,103,209.		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	14,908,230.	16,455,156.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	35,460,265.	36,902,534.
19 Revenue less expenses. Subtract line 18 from line 12	6,400,187.	6,639,418.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 120,259,666.	End of Year 129,763,715.
	21 Total liabilities (Part X, line 26)	16,019,592.	14,720,366.
	22 Net assets or fund balances. Subtract line 21 from line 20	104,240,074.	115,043,349.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer		Date
	Ms. Linda Barsevich, Director of Finance & Admin		
	Type or print name and title		
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date
	Amy Lewis		
	Firm's name ▶ MAHER DUESSEL, CPA'S	Firm's EIN ▶ 25-1622758	Check <input type="checkbox"/> if self-employed PTIN P01360302
	Firm's address ▶ 503 MARTINDALE STREET, SUITE 600 PITTSBURGH, PA 15212	Phone no. 412-471-5500	

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

2021

Department of the Treasury
Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.
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Part I Summary

	1 Briefly describe the organization's mission or most significant activities: To engage our community in literacy and learning.		
Activities & Governance	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	36
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	36
	5 Total number of individuals employed in calendar year 2021 (Part V, line 2a)	5	475
	6 Total number of volunteers (estimate if necessary)	6	26
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
	b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year 40,934,557.	Current Year 42,101,718.
	9 Program service revenue (Part VIII, line 2g)	243,005.	155,973.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	363,843.	1,254,163.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	319,047.	30,098.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	41,860,452.	43,541,952.
	Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.
14 Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		20,552,035.	20,447,378.
16a Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,103,209.			
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		14,908,230.	16,455,156.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		35,460,265.	36,902,534.
19 Revenue less expenses. Subtract line 18 from line 12	6,400,187.	6,639,418.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 120,259,666.	End of Year 129,763,715.
	21 Total liabilities (Part X, line 26)	16,019,592.	14,720,366.
	22 Net assets or fund balances. Subtract line 21 from line 20	104,240,074.	115,043,349.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer Ms. Linda Barsevich, Director of Finance & Admin		Date
	Type or print name and title		
Paid Preparer Use Only	Print/Type preparer's name Amy Lewis	Preparer's signature	Date
		Check <input type="checkbox"/> if self-employed	PTIN P01360302
	Firm's name ▶ MAHER DUESSEL, CPA'S	Firm's EIN ▶ 25-1622758	
	Firm's address ▶ 503 MARTINDALE STREET, SUITE 600 PITTSBURGH, PA 15212	Phone no. 412-471-5500	

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

2021

Department of the Treasury
Internal Revenue Service

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A For the **2021** calendar year, or tax year beginning and ending

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization Carnegie Library of Pittsburgh Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite 4400 Forbes Avenue City or town, state or province, country, and ZIP or foreign postal code Pittsburgh, PA 15213	D Employer identification number 25-0965281
	E Telephone number 412-622-3104	G Gross receipts \$ 44,066,548.
	F Name and address of principal officer: Ms. Mary Frances Cooper same as C above	H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527	J Website: ▶ www.carnegielibrary.org	H(c) Group exemption number ▶
K Form of organization: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶	L Year of formation: 1895	M State of legal domicile: PA

Part I Summary

	1 Briefly describe the organization's mission or most significant activities: To engage our community in literacy and learning.		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
Activities & Governance	3 Number of voting members of the governing body (Part VI, line 1a)	3	36
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	36
	5 Total number of individuals employed in calendar year 2021 (Part V, line 2a)	5	475
	6 Total number of volunteers (estimate if necessary)	6	26
	7 a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
	b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.
	Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year 40,934,557.
9 Program service revenue (Part VIII, line 2g)		243,005.	155,973.
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12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		41,860,452.	43,541,952.
Expenses		13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.
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	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	20,552,035.	20,447,378.
	16 a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,103,209.		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	14,908,230.	16,455,156.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	35,460,265.	36,902,534.	
19 Revenue less expenses. Subtract line 18 from line 12	6,400,187.	6,639,418.	
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Sign Here	▶ Signature of officer Ms. Linda Barsevich, Director of Finance & Admin	Date	
	Type or print name and title		
Paid Preparer Use Only	Print/Type preparer's name Amy Lewis	Preparer's signature	Date
	Firm's name ▶ MAHER DUESSEL, CPA'S	Firm's EIN ▶ 25-1622758	Check <input type="checkbox"/> if self-employed PTIN P01360302
	Firm's address ▶ 503 MARTINDALE STREET, SUITE 600 PITTSBURGH, PA 15212	Phone no. 412-471-5500	

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

2021

Department of the Treasury
Internal Revenue Service

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Sign Here	Signature of officer Ms. Linda Barsevich, Director of Finance & Admin		Date
	Type or print name and title		
Paid Preparer Use Only	Print/Type preparer's name Amy Lewis	Preparer's signature	Date
		Check <input type="checkbox"/> if self-employed	PTIN P01360302
	Firm's name ▶ MAHER DUESSEL, CPA'S	Firm's EIN ▶ 25-1622758	
	Firm's address ▶ 503 MARTINDALE STREET, SUITE 600 PITTSBURGH, PA 15212	Phone no. 412-471-5500	

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Part I Summary

	1 Briefly describe the organization's mission or most significant activities: To engage our community in literacy and learning.		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
Activities & Governance	3 Number of voting members of the governing body (Part VI, line 1a)	3	36
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	36
	5 Total number of individuals employed in calendar year 2021 (Part V, line 2a)	5	475
	6 Total number of volunteers (estimate if necessary)	6	26
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
	b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.
	Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year
9 Program service revenue (Part VIII, line 2g)		40,934,557.	42,101,718.
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		243,005.	155,973.
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		363,843.	1,254,163.
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		319,047.	30,098.
		41,860,452.	43,541,952.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	0.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	20,552,035.	20,447,378.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,103,209.		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	14,908,230.	16,455,156.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	35,460,265.	36,902,534.	
19 Revenue less expenses. Subtract line 18 from line 12	6,400,187.	6,639,418.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	120,259,666.	129,763,715.
	22 Net assets or fund balances. Subtract line 21 from line 20	16,019,592.	14,720,366.
		104,240,074.	115,043,349.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer		Date
	Ms. Linda Barsevich, Director of Finance & Admin		
	Type or print name and title		
Paid Preparer Use Only	Print/Type preparer's name Amy Lewis	Preparer's signature	Date
		Check <input type="checkbox"/> if self-employed	PTIN P01360302
	Firm's name ▶ MAHER DUESSEL, CPA'S	Firm's EIN ▶ 25-1622758	
	Firm's address ▶ 503 MARTINDALE STREET, SUITE 600 PITTSBURGH, PA 15212	Phone no. 412-471-5500	

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

2021

Department of the Treasury
Internal Revenue Service

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Expenses		13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	20,552,035.	20,447,378.
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Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer		Date
	Ms. Linda Barsevich, Director of Finance & Admin		
	Type or print name and title		
Paid Preparer Use Only	Print/Type preparer's name Amy Lewis	Preparer's signature	Date
		Check <input type="checkbox"/> if self-employed	PTIN P01360302
	Firm's name ▶ MAHER DUESSEL, CPA'S	Firm's EIN ▶ 25-1622758	
	Firm's address ▶ 503 MARTINDALE STREET, SUITE 600 PITTSBURGH, PA 15212	Phone no. 412-471-5500	

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

2021

Department of the Treasury
Internal Revenue Service

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Part I Summary

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	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	319,047.	30,098.
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	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,103,209.	0.	0.
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Sign Here	Signature of officer		Date
	Ms. Linda Barsevich, Director of Finance & Admin		
	Type or print name and title		
Paid Preparer Use Only	Print/Type preparer's name Amy Lewis	Preparer's signature	Date
		Check <input type="checkbox"/> if self-employed	PTIN P01360302
	Firm's name ▶ MAHER DUESSEL, CPA'S	Firm's EIN ▶ 25-1622758	
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Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

2021

Department of the Treasury
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	Doing business as		E Telephone number 412-622-3104
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	Amy Lewis			P01360302
	Firm's name ▶ MAHER DUESSEL, CPA'S	Firm's EIN ▶ 25-1622758		
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Form **990**

Return of Organization Exempt From Income Tax

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2021

Department of the Treasury
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	5	Total number of individuals employed in calendar year 2021 (Part V, line 2a)	5	475
	6	Total number of volunteers (estimate if necessary)	6	26
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
	7b	Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year 40,934,557.	Current Year 42,101,718.
	9	Program service revenue (Part VIII, line 2g)	243,005.	155,973.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	363,843.	1,254,163.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	319,047.	30,098.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	41,860,452.	43,541,952.
	Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.
14		Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
15		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	20,552,035.	20,447,378.
16a		Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
16b		Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,103,209.		
17		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	14,908,230.	16,455,156.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	35,460,265.	36,902,534.	
19	Revenue less expenses. Subtract line 18 from line 12	6,400,187.	6,639,418.	
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year 120,259,666.	End of Year 129,763,715.
	21	Total liabilities (Part X, line 26)	16,019,592.	14,720,366.
	22	Net assets or fund balances. Subtract line 21 from line 20	104,240,074.	115,043,349.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer		Date
	▶ Ms. Linda Barsevich, Director of Finance & Admin Type or print name and title		
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date
	Amy Lewis		
	Firm's name ▶ MAHER DUESSEL, CPA'S	Firm's EIN ▶ 25-1622758	Check <input type="checkbox"/> if self-employed PTIN P01360302
	Firm's address ▶ 503 MARTINDALE STREET, SUITE 600 PITTSBURGH, PA 15212	Phone no. 412-471-5500	

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

2021

Department of the Treasury
Internal Revenue Service

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

A For the 2021 calendar year, or tax year beginning		and ending	
B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization Carnegie Library of Pittsburgh		D Employer identification number 25-0965281
	Doing business as		E Telephone number 412-622-3104
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 4400 Forbes Avenue		
	City or town, state or province, country, and ZIP or foreign postal code Pittsburgh, PA 15213		G Gross receipts \$ 44,066,548.
	F Name and address of principal officer: Ms. Mary Frances Cooper same as C above		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions H(c) Group exemption number ▶
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			
J Website: ▶ www.carnegielibrary.org			
K Form of organization: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶			L Year of formation: 1895 M State of legal domicile: PA

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: To engage our community in literacy and learning.		
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	36
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	36
	5	Total number of individuals employed in calendar year 2021 (Part V, line 2a)	5	475
	6	Total number of volunteers (estimate if necessary)	6	26
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
	7b	Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9	Program service revenue (Part VIII, line 2g)	40,934,557.	42,101,718.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	243,005.	155,973.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	363,843.	1,254,163.
	12	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	319,047.	30,098.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	41,860,452.	43,541,952.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	0.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	20,552,035.	20,447,378.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
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19	Revenue less expenses. Subtract line 18 from line 12	6,400,187.	6,639,418.	
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21	Total liabilities (Part X, line 26)	120,259,666.	129,763,715.
	22	Net assets or fund balances. Subtract line 21 from line 20	16,019,592.	14,720,366.
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Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer		Date
	▶ Ms. Linda Barsevich, Director of Finance & Admin Type or print name and title		
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date
	Amy Lewis		
	Firm's name ▶ MAHER DUESSEL, CPA'S	Firm's EIN ▶ 25-1622758	Check <input type="checkbox"/> if self-employed PTIN P01360302
	Firm's address ▶ 503 MARTINDALE STREET, SUITE 600 PITTSBURGH, PA 15212	Phone no. 412-471-5500	

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

2021

Department of the Treasury
Internal Revenue Service

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	1 Briefly describe the organization's mission or most significant activities: To engage our community in literacy and learning.		
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Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year 40,934,557.	Current Year 42,101,718.
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	Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.
14 Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		20,552,035.	20,447,378.
16a Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
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17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		14,908,230.	16,455,156.
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Sign Here	Signature of officer		Date
	Ms. Linda Barsevich, Director of Finance & Admin		
	Type or print name and title		
Paid Preparer Use Only	Print/Type preparer's name Amy Lewis	Preparer's signature	Date
		Check <input type="checkbox"/> if self-employed	PTIN P01360302
	Firm's name ▶ MAHER DUESSEL, CPA'S	Firm's EIN ▶ 25-1622758	
	Firm's address ▶ 503 MARTINDALE STREET, SUITE 600 PITTSBURGH, PA 15212	Phone no. 412-471-5500	

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

2021

Department of the Treasury
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	Type or print name and title		
Paid Preparer Use Only	Print/Type preparer's name Amy Lewis	Preparer's signature	Date
		Check <input type="checkbox"/> if self-employed	PTIN P01360302
	Firm's name ▶ MAHER DUESSEL, CPA'S	Firm's EIN ▶ 25-1622758	
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B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td colspan="2">C Name of organization Carnegie Library of Pittsburgh</td> <td>D Employer identification number 25-0965281</td> </tr> <tr> <td colspan="2">Doing business as</td> <td>E Telephone number 412-622-3104</td> </tr> <tr> <td>Number and street (or P.O. box if mail is not delivered to street address)</td> <td>Room/suite</td> <td>G Gross receipts \$ 44,066,548.</td> </tr> <tr> <td>4400 Forbes Avenue</td> <td></td> <td>H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</td> </tr> <tr> <td colspan="2">City or town, state or province, country, and ZIP or foreign postal code Pittsburgh, PA 15213</td> <td>H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No</td> </tr> <tr> <td colspan="2">F Name and address of principal officer: Ms. Mary Frances Cooper same as C above</td> <td>If "No," attach a list. See instructions</td> </tr> <tr> <td colspan="2">I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527</td> <td>H(c) Group exemption number ▶</td> </tr> <tr> <td colspan="2">J Website: ▶ www.carnegielibrary.org</td> <td></td> </tr> <tr> <td colspan="2">K Form of organization: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶</td> <td>L Year of formation: 1895 M State of legal domicile: PA</td> </tr> </table>	C Name of organization Carnegie Library of Pittsburgh		D Employer identification number 25-0965281	Doing business as		E Telephone number 412-622-3104	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	G Gross receipts \$ 44,066,548.	4400 Forbes Avenue		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	City or town, state or province, country, and ZIP or foreign postal code Pittsburgh, PA 15213		H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No	F Name and address of principal officer: Ms. Mary Frances Cooper same as C above		If "No," attach a list. See instructions	I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(c) Group exemption number ▶	J Website: ▶ www.carnegielibrary.org			K Form of organization: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: 1895 M State of legal domicile: PA
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Part I Summary

	1 Briefly describe the organization's mission or most significant activities: To engage our community in literacy and learning.		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
Activities & Governance	3 Number of voting members of the governing body (Part VI, line 1a)	3	36
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	36
	5 Total number of individuals employed in calendar year 2021 (Part V, line 2a)	5	475
	6 Total number of volunteers (estimate if necessary)	6	26
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
	b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.
	Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year 40,934,557.
9 Program service revenue (Part VIII, line 2g)		243,005.	155,973.
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		363,843.	1,254,163.
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		319,047.	30,098.
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		41,860,452.	43,541,952.
Expenses		13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	20,552,035.	20,447,378.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,103,209.		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	14,908,230.	16,455,156.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	35,460,265.	36,902,534.
19 Revenue less expenses. Subtract line 18 from line 12	6,400,187.	6,639,418.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 120,259,666.	End of Year 129,763,715.
	21 Total liabilities (Part X, line 26)	16,019,592.	14,720,366.
	22 Net assets or fund balances. Subtract line 21 from line 20	104,240,074.	115,043,349.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer		Date
	Ms. Linda Barsevich, Director of Finance & Admin		
	Type or print name and title		
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date
	Amy Lewis		
	Check if self-employed <input type="checkbox"/>	PTIN	
		P01360302	
	Firm's name ▶ MAHER DUESSEL, CPA'S	Firm's EIN ▶ 25-1622758	
	Firm's address ▶ 503 MARTINDALE STREET, SUITE 600 PITTSBURGH, PA 15212	Phone no. 412-471-5500	

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

2021

Department of the Treasury
Internal Revenue Service

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B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization Carnegie Library of Pittsburgh		D Employer identification number 25-0965281
	Doing business as		E Telephone number 412-622-3104
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 4400 Forbes Avenue		
	City or town, state or province, country, and ZIP or foreign postal code Pittsburgh, PA 15213		G Gross receipts \$ 44,066,548.
	F Name and address of principal officer: Ms. Mary Frances Cooper same as C above		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(c) Group exemption number ▶	
J Website: ▶ www.carnegielibrary.org			
K Form of organization: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶			L Year of formation: 1895 M State of legal domicile: PA

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: To engage our community in literacy and learning.				
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.				
	3	Number of voting members of the governing body (Part VI, line 1a)	3	36		
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	36		
	5	Total number of individuals employed in calendar year 2021 (Part V, line 2a)	5	475		
	6	Total number of volunteers (estimate if necessary)	6	26		
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.		
	7b	Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.		
Revenue			Prior Year		Current Year	
	8	Contributions and grants (Part VIII, line 1h)	40,934,557.		42,101,718.	
	9	Program service revenue (Part VIII, line 2g)	243,005.		155,973.	
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	363,843.		1,254,163.	
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	319,047.		30,098.	
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	41,860,452.		43,541,952.	
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.		0.	
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0.		0.	
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	20,552,035.		20,447,378.	
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.		0.	
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,103,209.				
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	14,908,230.		16,455,156.	
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	35,460,265.		36,902,534.		
19	Revenue less expenses. Subtract line 18 from line 12	6,400,187.		6,639,418.		
Net Assets or Fund Balances			Beginning of Current Year		End of Year	
	20	Total assets (Part X, line 16)	120,259,666.		129,763,715.	
	21	Total liabilities (Part X, line 26)	16,019,592.		14,720,366.	
22	Net assets or fund balances. Subtract line 21 from line 20	104,240,074.		115,043,349.		

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer		Date		
	▶ Ms. Linda Barsevich, Director of Finance & Admin				
	Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	Amy Lewis				P01360302
	Firm's name ▶ MAHER DUESSEL, CPA'S	Firm's EIN ▶ 25-1622758			
	Firm's address ▶ 503 MARTINDALE STREET, SUITE 600 PITTSBURGH, PA 15212			Phone no. 412-471-5500	

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

2021

Department of the Treasury
Internal Revenue Service

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B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization Carnegie Library of Pittsburgh		D Employer identification number 25-0965281
	Doing business as		E Telephone number 412-622-3104
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 4400 Forbes Avenue		
	City or town, state or province, country, and ZIP or foreign postal code Pittsburgh, PA 15213		G Gross receipts \$ 44,066,548.
	F Name and address of principal officer: Ms. Mary Frances Cooper same as C above		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(c) Group exemption number ▶	
J Website: ▶ www.carnegielibrary.org		L Year of formation: 1895 M State of legal domicile: PA	
K Form of organization: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶			

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: To engage our community in literacy and learning.		
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
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	6	Total number of volunteers (estimate if necessary)	6	26
	7 a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
	b	Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year 40,934,557.	Current Year 42,101,718.
	9	Program service revenue (Part VIII, line 2g)	243,005.	155,973.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	363,843.	1,254,163.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	319,047.	30,098.
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	Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.
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16a		Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
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Sign Here	Signature of officer		Date
	▶ Ms. Linda Barsevich, Director of Finance & Admin Type or print name and title		
Paid Preparer Use Only	Print/Type preparer's name Amy Lewis	Preparer's signature	Date
	Firm's name ▶ MAHER DUESSEL, CPA'S Firm's address ▶ 503 MARTINDALE STREET, SUITE 600 PITTSBURGH, PA 15212	Firm's EIN ▶ 25-1622758	Check <input type="checkbox"/> if self-employed PTIN P01360302 Phone no. 412-471-5500

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

2021

Department of the Treasury
Internal Revenue Service

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	Doing business as		E Telephone number 412-622-3104
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 4400 Forbes Avenue		
	City or town, state or province, country, and ZIP or foreign postal code Pittsburgh, PA 15213		G Gross receipts \$ 44,066,548.
	F Name and address of principal officer: Ms. Mary Frances Cooper same as C above		
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
J Website: ▶ www.carnegielibrary.org		H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No	
K Form of organization: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: 1895 M State of legal domicile: PA	
H(c) Group exemption number ▶			

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: To engage our community in literacy and learning.		
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	7b	Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
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16b		Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,103,209.		
17		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	14,908,230.	16,455,156.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	35,460,265.	36,902,534.	
19	Revenue less expenses. Subtract line 18 from line 12	6,400,187.	6,639,418.	
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year 120,259,666.	End of Year 129,763,715.
	21	Total liabilities (Part X, line 26)	16,019,592.	14,720,366.
	22	Net assets or fund balances. Subtract line 21 from line 20	104,240,074.	115,043,349.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer		Date
	▶ Ms. Linda Barsevich, Director of Finance & Admin		
	Type or print name and title		
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date
	Amy Lewis		
	Check <input type="checkbox"/> if self-employed	PTIN	
		P01360302	
	Firm's name ▶ MAHER DUESSEL, CPA'S	Firm's EIN ▶ 25-1622758	
	Firm's address ▶ 503 MARTINDALE STREET, SUITE 600 PITTSBURGH, PA 15212	Phone no. 412-471-5500	

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

2021

Department of the Treasury
Internal Revenue Service

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

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

Open to Public Inspection

A For the 2021 calendar year, or tax year beginning		and ending	
B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization Carnegie Library of Pittsburgh		D Employer identification number 25-0965281
	Doing business as		E Telephone number 412-622-3104
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 4400 Forbes Avenue		
	City or town, state or province, country, and ZIP or foreign postal code Pittsburgh, PA 15213		G Gross receipts \$ 44,066,548.
	F Name and address of principal officer: Ms. Mary Frances Cooper same as C above		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(c) Group exemption number ▶	
J Website: ▶ www.carnegielibrary.org			
K Form of organization: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶			L Year of formation: 1895 M State of legal domicile: PA

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: To engage our community in literacy and learning.		
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	36
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	36
	5	Total number of individuals employed in calendar year 2021 (Part V, line 2a)	5	475
	6	Total number of volunteers (estimate if necessary)	6	26
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
	7b	Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9	Program service revenue (Part VIII, line 2g)	40,934,557.	42,101,718.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	243,005.	155,973.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	363,843.	1,254,163.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	319,047.	30,098.
	12		41,860,452.	43,541,952.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	0.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	20,552,035.	20,447,378.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	16b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,103,209.		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	14,908,230.	16,455,156.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	35,460,265.	36,902,534.	
19	Revenue less expenses. Subtract line 18 from line 12	6,400,187.	6,639,418.	
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21	Total liabilities (Part X, line 26)	120,259,666.	129,763,715.
	22	Net assets or fund balances. Subtract line 21 from line 20	16,019,592.	14,720,366.
22		104,240,074.	115,043,349.	

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer		Date
	▶ Ms. Linda Barsevich, Director of Finance & Admin		
	Type or print name and title		
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date
	Amy Lewis		
	Check <input type="checkbox"/> if self-employed	PTIN	
		P01360302	
	Firm's name ▶ MAHER DUESSEL, CPA'S	Firm's EIN ▶ 25-1622758	
	Firm's address ▶ 503 MARTINDALE STREET, SUITE 600 PITTSBURGH, PA 15212	Phone no. 412-471-5500	

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

2021

Department of the Treasury
Internal Revenue Service

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B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization Carnegie Library of Pittsburgh		D Employer identification number 25-0965281
	Doing business as		E Telephone number 412-622-3104
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 4400 Forbes Avenue		
	City or town, state or province, country, and ZIP or foreign postal code Pittsburgh, PA 15213		G Gross receipts \$ 44,066,548.
	F Name and address of principal officer: Ms. Mary Frances Cooper same as C above		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(c) Group exemption number ▶	
J Website: ▶ www.carnegielibrary.org		K Form of organization: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶	
		L Year of formation: 1895	M State of legal domicile: PA

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: To engage our community in literacy and learning.		
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	36
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	36
	5	Total number of individuals employed in calendar year 2021 (Part V, line 2a)	5	475
	6	Total number of volunteers (estimate if necessary)	6	26
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
	7b	Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year 40,934,557.	Current Year 42,101,718.
	9	Program service revenue (Part VIII, line 2g)	243,005.	155,973.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	363,843.	1,254,163.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	319,047.	30,098.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	41,860,452.	43,541,952.
	Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.
14		Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
15		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	20,552,035.	20,447,378.
16a		Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
b		Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,103,209.		
17		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	14,908,230.	16,455,156.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	35,460,265.	36,902,534.	
19	Revenue less expenses. Subtract line 18 from line 12	6,400,187.	6,639,418.	
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year 120,259,666.	End of Year 129,763,715.
	21	Total liabilities (Part X, line 26)	16,019,592.	14,720,366.
	22	Net assets or fund balances. Subtract line 21 from line 20	104,240,074.	115,043,349.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer		Date
	▶ Ms. Linda Barsevich, Director of Finance & Admin Type or print name and title		
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date
	Amy Lewis		
	Firm's name ▶ MAHER DUESSEL, CPA'S	Firm's EIN ▶ 25-1622758	Check <input type="checkbox"/> if self-employed PTIN P01360302
	Firm's address ▶ 503 MARTINDALE STREET, SUITE 600 PITTSBURGH, PA 15212	Phone no. 412-471-5500	

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

2021

Department of the Treasury
Internal Revenue Service

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Open to Public Inspection

A For the **2021** calendar year, or tax year beginning and ending

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization Carnegie Library of Pittsburgh Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite 4400 Forbes Avenue City or town, state or province, country, and ZIP or foreign postal code Pittsburgh, PA 15213	D Employer identification number 25-0965281
	E Telephone number 412-622-3104	G Gross receipts \$ 44,066,548.
	F Name and address of principal officer: Ms. Mary Frances Cooper same as C above	H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527	J Website: ▶ www.carnegielibrary.org	H(c) Group exemption number ▶
K Form of organization: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶	L Year of formation: 1895	M State of legal domicile: PA

Part I Summary

	1 Briefly describe the organization's mission or most significant activities: To engage our community in literacy and learning.		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
Activities & Governance	3 Number of voting members of the governing body (Part VI, line 1a)	3	36
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	36
	5 Total number of individuals employed in calendar year 2021 (Part V, line 2a)	5	475
	6 Total number of volunteers (estimate if necessary)	6	26
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
	b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.
	Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year 40,934,557.
9 Program service revenue (Part VIII, line 2g)		243,005.	155,973.
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		363,843.	1,254,163.
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		319,047.	30,098.
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		41,860,452.	43,541,952.
Expenses		13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	20,552,035.	20,447,378.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,103,209.		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	14,908,230.	16,455,156.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	35,460,265.	36,902,534.	
19 Revenue less expenses. Subtract line 18 from line 12	6,400,187.	6,639,418.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 120,259,666.	End of Year 129,763,715.
	21 Total liabilities (Part X, line 26)	16,019,592.	14,720,366.
	22 Net assets or fund balances. Subtract line 21 from line 20	104,240,074.	115,043,349.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	▶ Signature of officer Ms. Linda Barsevich, Director of Finance & Admin	Date	
Paid Preparer Use Only	Print/Type preparer's name Amy Lewis	Preparer's signature	Date
	Firm's name ▶ MAHER DUESSEL, CPA'S	Firm's EIN ▶ 25-1622758	Check <input type="checkbox"/> if self-employed PTIN P01360302
	Firm's address ▶ 503 MARTINDALE STREET, SUITE 600 PITTSBURGH, PA 15212	Phone no. 412-471-5500	

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

2021

Department of the Treasury
Internal Revenue Service

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B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td colspan="2">C Name of organization Carnegie Library of Pittsburgh</td> <td>D Employer identification number 25-0965281</td> </tr> <tr> <td colspan="2">Doing business as</td> <td>E Telephone number 412-622-3104</td> </tr> <tr> <td>Number and street (or P.O. box if mail is not delivered to street address)</td> <td>Room/suite</td> <td>G Gross receipts \$ 44,066,548.</td> </tr> <tr> <td>4400 Forbes Avenue</td> <td></td> <td>H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</td> </tr> <tr> <td colspan="2">City or town, state or province, country, and ZIP or foreign postal code Pittsburgh, PA 15213</td> <td>H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No</td> </tr> <tr> <td colspan="2">F Name and address of principal officer: Ms. Mary Frances Cooper same as C above</td> <td>If "No," attach a list. See instructions</td> </tr> <tr> <td colspan="2">I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527</td> <td>H(c) Group exemption number ▶</td> </tr> <tr> <td colspan="2">J Website: ▶ www.carnegielibrary.org</td> <td></td> </tr> <tr> <td colspan="2">K Form of organization: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶</td> <td>L Year of formation: 1895 M State of legal domicile: PA</td> </tr> </table>	C Name of organization Carnegie Library of Pittsburgh		D Employer identification number 25-0965281	Doing business as		E Telephone number 412-622-3104	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	G Gross receipts \$ 44,066,548.	4400 Forbes Avenue		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	City or town, state or province, country, and ZIP or foreign postal code Pittsburgh, PA 15213		H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No	F Name and address of principal officer: Ms. Mary Frances Cooper same as C above		If "No," attach a list. See instructions	I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(c) Group exemption number ▶	J Website: ▶ www.carnegielibrary.org			K Form of organization: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: 1895 M State of legal domicile: PA
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Sign Here	Signature of officer Ms. Linda Barsevich, Director of Finance & Admin		Date
	Type or print name and title		
Paid Preparer Use Only	Print/Type preparer's name Amy Lewis	Preparer's signature	Date
		Check <input type="checkbox"/> if self-employed	PTIN P01360302
	Firm's name ▶ MAHER DUESSEL, CPA'S	Firm's EIN ▶ 25-1622758	
	Firm's address ▶ 503 MARTINDALE STREET, SUITE 600 PITTSBURGH, PA 15212	Phone no. 412-471-5500	

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

2021

Department of the Treasury
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	Doing business as		E Telephone number 412-622-3104
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K Form of organization: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: 1895	M State of legal domicile: PA

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Activities & Governance	1	Briefly describe the organization's mission or most significant activities: To engage our community in literacy and learning.		
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	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	36
	5	Total number of individuals employed in calendar year 2021 (Part V, line 2a)	5	475
	6	Total number of volunteers (estimate if necessary)	6	26
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
	7b	Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year 40,934,557.	Current Year 42,101,718.
	9	Program service revenue (Part VIII, line 2g)	243,005.	155,973.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	363,843.	1,254,163.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	319,047.	30,098.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	41,860,452.	43,541,952.
	Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.
14		Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
15		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	20,552,035.	20,447,378.
16a		Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
16b		Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,103,209.		
17		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	14,908,230.	16,455,156.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	35,460,265.	36,902,534.	
19	Revenue less expenses. Subtract line 18 from line 12	6,400,187.	6,639,418.	
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year 120,259,666.	End of Year 129,763,715.
	21	Total liabilities (Part X, line 26)	16,019,592.	14,720,366.
	22	Net assets or fund balances. Subtract line 21 from line 20	104,240,074.	115,043,349.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer		Date
	▶ Ms. Linda Barsevich, Director of Finance & Admin		
	Type or print name and title		
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date
	Amy Lewis		
	Check <input type="checkbox"/> if self-employed	PTIN	
		P01360302	
	Firm's name ▶ MAHER DUESSEL, CPA'S	Firm's EIN ▶ 25-1622758	
	Firm's address ▶ 503 MARTINDALE STREET, SUITE 600 PITTSBURGH, PA 15212	Phone no. 412-471-5500	

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

2021

Department of the Treasury
Internal Revenue Service

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Open to Public Inspection

A For the 2021 calendar year, or tax year beginning		and ending	
B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization Carnegie Library of Pittsburgh		D Employer identification number 25-0965281
	Doing business as		E Telephone number 412-622-3104
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 4400 Forbes Avenue		
	City or town, state or province, country, and ZIP or foreign postal code Pittsburgh, PA 15213		G Gross receipts \$ 44,066,548.
	F Name and address of principal officer: Ms. Mary Frances Cooper same as C above		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(c) Group exemption number ▶	
J Website: ▶ www.carnegielibrary.org			
K Form of organization: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶			L Year of formation: 1895 M State of legal domicile: PA

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: To engage our community in literacy and learning.		
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	36
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	36
	5	Total number of individuals employed in calendar year 2021 (Part V, line 2a)	5	475
	6	Total number of volunteers (estimate if necessary)	6	26
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
	7b	Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9	Program service revenue (Part VIII, line 2g)	40,934,557.	42,101,718.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	243,005.	155,973.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	363,843.	1,254,163.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	319,047.	30,098.
	12		41,860,452.	43,541,952.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	0.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	20,552,035.	20,447,378.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,103,209.		
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18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	35,460,265.	36,902,534.	
19	Revenue less expenses. Subtract line 18 from line 12	6,400,187.	6,639,418.	
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21	Total liabilities (Part X, line 26)	120,259,666.	129,763,715.
	22	Net assets or fund balances. Subtract line 21 from line 20	16,019,592.	14,720,366.
22		104,240,074.	115,043,349.	

Part II Signature Block

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Sign Here	Signature of officer		Date
	▶ Ms. Linda Barsevich, Director of Finance & Admin		
	Type or print name and title		
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date
	Amy Lewis		
	Check <input type="checkbox"/> if self-employed	PTIN	
		P01360302	
	Firm's name ▶ MAHER DUESSEL, CPA'S	Firm's EIN ▶ 25-1622758	
	Firm's address ▶ 503 MARTINDALE STREET, SUITE 600 PITTSBURGH, PA 15212	Phone no. 412-471-5500	

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

2021

Department of the Treasury
Internal Revenue Service

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B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization Carnegie Library of Pittsburgh		D Employer identification number 25-0965281
	Doing business as		E Telephone number 412-622-3104
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 4400 Forbes Avenue		
	City or town, state or province, country, and ZIP or foreign postal code Pittsburgh, PA 15213		G Gross receipts \$ 44,066,548.
	F Name and address of principal officer: Ms. Mary Frances Cooper same as C above		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(c) Group exemption number ▶	
J Website: ▶ www.carnegielibrary.org		L Year of formation: 1895 M State of legal domicile: PA	
K Form of organization: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶			

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: To engage our community in literacy and learning.		
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	36
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	36
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	6	Total number of volunteers (estimate if necessary)	6	26
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
	7b	Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year 40,934,557.	Current Year 42,101,718.
	9	Program service revenue (Part VIII, line 2g)	243,005.	155,973.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	363,843.	1,254,163.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	319,047.	30,098.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	41,860,452.	43,541,952.
	Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.
14		Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
15		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	20,552,035.	20,447,378.
16a		Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
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Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer		Date
	▶ Ms. Linda Barsevich, Director of Finance & Admin Type or print name and title		
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date
	Amy Lewis		
	Firm's name ▶ MAHER DUESSEL, CPA'S	Firm's EIN ▶ 25-1622758	Check <input type="checkbox"/> if self-employed PTIN P01360302
	Firm's address ▶ 503 MARTINDALE STREET, SUITE 600 PITTSBURGH, PA 15212	Phone no. 412-471-5500	

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

2021

Department of the Treasury
Internal Revenue Service

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B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization Carnegie Library of Pittsburgh		D Employer identification number 25-0965281
	Doing business as		E Telephone number 412-622-3104
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 4400 Forbes Avenue		
	City or town, state or province, country, and ZIP or foreign postal code Pittsburgh, PA 15213		G Gross receipts \$ 44,066,548.
	F Name and address of principal officer: Ms. Mary Frances Cooper same as C above		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(c) Group exemption number ▶	
J Website: ▶ www.carnegielibrary.org		K Form of organization: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶	
		L Year of formation: 1895	M State of legal domicile: PA

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: To engage our community in literacy and learning.		
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Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
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	12		41,860,452.	43,541,952.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	0.
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Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date
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	Check <input type="checkbox"/> if self-employed	PTIN	
		P01360302	
	Firm's name ▶ MAHER DUESSEL, CPA'S	Firm's EIN ▶ 25-1622758	
	Firm's address ▶ 503 MARTINDALE STREET, SUITE 600 PITTSBURGH, PA 15212	Phone no. 412-471-5500	

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Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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2021

Department of the Treasury
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	Amy Lewis		
	Firm's name ▶ MAHER DUESSEL, CPA'S	Firm's EIN ▶ 25-1622758	Check <input type="checkbox"/> if self-employed PTIN P01360302
	Firm's address ▶ 503 MARTINDALE STREET, SUITE 600 PITTSBURGH, PA 15212	Phone no. 412-471-5500	

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Part I Summary

	1 Briefly describe the organization's mission or most significant activities: To engage our community in literacy and learning.		
Activities & Governance	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	36
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	36
	5 Total number of individuals employed in calendar year 2021 (Part V, line 2a)	5	475
	6 Total number of volunteers (estimate if necessary)	6	26
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
	b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year 40,934,557.	Current Year 42,101,718.
	9 Program service revenue (Part VIII, line 2g)	243,005.	155,973.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	363,843.	1,254,163.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	319,047.	30,098.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	41,860,452.	43,541,952.
	Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.
14 Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		20,552,035.	20,447,378.
16a Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,103,209.			
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		14,908,230.	16,455,156.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	35,460,265.	36,902,534.	
19 Revenue less expenses. Subtract line 18 from line 12	6,400,187.	6,639,418.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 120,259,666.	End of Year 129,763,715.
	21 Total liabilities (Part X, line 26)	16,019,592.	14,720,366.
	22 Net assets or fund balances. Subtract line 21 from line 20	104,240,074.	115,043,349.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer		Date
	Ms. Linda Barsevich, Director of Finance & Admin		
	Type or print name and title		
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date
	Amy Lewis		
	Firm's name ▶ MAHER DUESSEL, CPA'S	Firm's EIN ▶ 25-1622758	Check <input type="checkbox"/> if self-employed PTIN P01360302
	Firm's address ▶ 503 MARTINDALE STREET, SUITE 600 PITTSBURGH, PA 15212	Phone no. 412-471-5500	

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

2021

Department of the Treasury
Internal Revenue Service

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Sign Here	Signature of officer		Date
	Ms. Linda Barsevich, Director of Finance & Admin		
	Type or print name and title		
Paid Preparer Use Only	Print/Type preparer's name Amy Lewis	Preparer's signature	Date
		Check <input type="checkbox"/> if self-employed	PTIN P01360302
	Firm's name ▶ MAHER DUESSEL, CPA'S	Firm's EIN ▶ 25-1622758	
	Firm's address ▶ 503 MARTINDALE STREET, SUITE 600 PITTSBURGH, PA 15212	Phone no. 412-471-5500	

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

2021

Department of the Treasury
Internal Revenue Service

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Sign Here	Signature of officer		Date
	▶ Ms. Linda Barsevich, Director of Finance & Admin Type or print name and title		
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date
	Amy Lewis		
	Firm's name ▶ MAHER DUESSEL, CPA'S	Firm's EIN ▶ 25-1622758	Check <input type="checkbox"/> if self-employed PTIN P01360302
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b Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,103,209.			
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		14,908,230.	16,455,156.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		35,460,265.	36,902,534.
19 Revenue less expenses. Subtract line 18 from line 12	6,400,187.	6,639,418.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 120,259,666.	End of Year 129,763,715.
	21 Total liabilities (Part X, line 26)	16,019,592.	14,720,366.
	22 Net assets or fund balances. Subtract line 21 from line 20	104,240,074.	115,043,349.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer Ms. Linda Barsevich, Director of Finance & Admin		Date
Paid Preparer Use Only	Print/Type preparer's name Amy Lewis	Preparer's signature	Date
		Check <input type="checkbox"/> if self-employed	PTIN P01360302
	Firm's name ▶ MAHER DUESSEL, CPA'S	Firm's EIN ▶ 25-1622758	
	Firm's address ▶ 503 MARTINDALE STREET, SUITE 600 PITTSBURGH, PA 15212	Phone no. 412-471-5500	

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

2021

Department of the Treasury
Internal Revenue Service

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Part I Summary

	1 Briefly describe the organization's mission or most significant activities: To engage our community in literacy and learning.		
Activities & Governance	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	36
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	36
	5 Total number of individuals employed in calendar year 2021 (Part V, line 2a)	5	475
	6 Total number of volunteers (estimate if necessary)	6	26
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
	b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year 40,934,557.	Current Year 42,101,718.
	9 Program service revenue (Part VIII, line 2g)	243,005.	155,973.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	363,843.	1,254,163.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	319,047.	30,098.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	41,860,452.	43,541,952.
	Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.
14 Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		20,552,035.	20,447,378.
16a Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,103,209.			
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		14,908,230.	16,455,156.
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19 Revenue less expenses. Subtract line 18 from line 12	6,400,187.	6,639,418.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 120,259,666.	End of Year 129,763,715.
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Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer Ms. Linda Barsevich, Director of Finance & Admin		Date
	Type or print name and title		
Paid Preparer Use Only	Print/Type preparer's name Amy Lewis	Preparer's signature	Date
	Firm's name ▶ MAHER DUESSEL, CPA'S	Firm's EIN ▶ 25-1622758	Check <input type="checkbox"/> if self-employed PTIN P01360302
	Firm's address ▶ 503 MARTINDALE STREET, SUITE 600 PITTSBURGH, PA 15212	Phone no. 412-471-5500	

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

2021

Department of the Treasury
Internal Revenue Service

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	1 Briefly describe the organization's mission or most significant activities: To engage our community in literacy and learning.		
Activities & Governance	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
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	6 Total number of volunteers (estimate if necessary)	6	26
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
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Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year 40,934,557.	Current Year 42,101,718.
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	Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.
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Sign Here	Signature of officer Ms. Linda Barsevich, Director of Finance & Admin		Date
	Type or print name and title		
Paid Preparer Use Only	Print/Type preparer's name Amy Lewis	Preparer's signature	Date
		Check <input type="checkbox"/> if self-employed	PTIN P01360302
	Firm's name ▶ MAHER DUESSEL, CPA'S	Firm's EIN ▶ 25-1622758	
	Firm's address ▶ 503 MARTINDALE STREET, SUITE 600 PITTSBURGH, PA 15212	Phone no. 412-471-5500	

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Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

2021

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Sign Here	Signature of officer				Date	
	▶ Ms. Linda Barsevich, Director of Finance & Admin					
	Type or print name and title					
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN	
	Amy Lewis				P01360302	
	Firm's name ▶ MAHER DUESSEL, CPA'S			Firm's EIN ▶ 25-1622758		
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I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(c) Group exemption number ▶																										
J Website: ▶ www.carnegielibrary.org																												
K Form of organization: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: 1895 M State of legal domicile: PA																										

Part I Summary

	1 Briefly describe the organization's mission or most significant activities: To engage our community in literacy and learning.		
Activities & Governance	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	36
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	36
	5 Total number of individuals employed in calendar year 2021 (Part V, line 2a)	5	475
	6 Total number of volunteers (estimate if necessary)	6	26
	7 a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
	b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year 40,934,557.	Current Year 42,101,718.
	9 Program service revenue (Part VIII, line 2g)	243,005.	155,973.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	363,843.	1,254,163.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	319,047.	30,098.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	41,860,452.	43,541,952.
	Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.
14 Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		20,552,035.	20,447,378.
16 a Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,103,209.			
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		14,908,230.	16,455,156.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	35,460,265.	36,902,534.	
19 Revenue less expenses. Subtract line 18 from line 12	6,400,187.	6,639,418.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 120,259,666.	End of Year 129,763,715.
	21 Total liabilities (Part X, line 26)	16,019,592.	14,720,366.
	22 Net assets or fund balances. Subtract line 21 from line 20	104,240,074.	115,043,349.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer Ms. Linda Barsevich, Director of Finance & Admin		Date
Paid Preparer Use Only	Print/Type preparer's name Amy Lewis	Preparer's signature	Date
		Check <input type="checkbox"/> if self-employed	PTIN P01360302
	Firm's name ▶ MAHER DUESSEL, CPA'S	Firm's EIN ▶ 25-1622758	
	Firm's address ▶ 503 MARTINDALE STREET, SUITE 600 PITTSBURGH, PA 15212	Phone no. 412-471-5500	

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

2021

Department of the Treasury
Internal Revenue Service

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

Open to Public Inspection

A For the 2021 calendar year, or tax year beginning		and ending	
B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization Carnegie Library of Pittsburgh		D Employer identification number 25-0965281
	Doing business as		E Telephone number 412-622-3104
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 4400 Forbes Avenue		
	City or town, state or province, country, and ZIP or foreign postal code Pittsburgh, PA 15213		G Gross receipts \$ 44,066,548.
	F Name and address of principal officer: Ms. Mary Frances Cooper same as C above		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(c) Group exemption number ▶	
J Website: ▶ www.carnegielibrary.org		K Form of organization: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶	
		L Year of formation: 1895	M State of legal domicile: PA

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: To engage our community in literacy and learning.		
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	36
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	36
	5	Total number of individuals employed in calendar year 2021 (Part V, line 2a)	5	475
	6	Total number of volunteers (estimate if necessary)	6	26
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
	7b	Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9	Program service revenue (Part VIII, line 2g)	40,934,557.	42,101,718.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	243,005.	155,973.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	363,843.	1,254,163.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	319,047.	30,098.
			41,860,452.	43,541,952.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	0.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	20,552,035.	20,447,378.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,103,209.		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	14,908,230.	16,455,156.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	35,460,265.	36,902,534.	
19	Revenue less expenses. Subtract line 18 from line 12	6,400,187.	6,639,418.	
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21	Total liabilities (Part X, line 26)	120,259,666.	129,763,715.
	22	Net assets or fund balances. Subtract line 21 from line 20	16,019,592.	14,720,366.
		104,240,074.	115,043,349.	

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Sign Here	Signature of officer		Date
	▶ Ms. Linda Barsevich, Director of Finance & Admin Type or print name and title		
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date
	Amy Lewis		
	Firm's name ▶ MAHER DUESSEL, CPA'S	Firm's EIN ▶ 25-1622758	Check <input type="checkbox"/> if self-employed PTIN P01360302
	Firm's address ▶ 503 MARTINDALE STREET, SUITE 600 PITTSBURGH, PA 15212	Phone no. 412-471-5500	

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

2021

Department of the Treasury
Internal Revenue Service

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B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization Carnegie Library of Pittsburgh		D Employer identification number 25-0965281
	Doing business as		E Telephone number 412-622-3104
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 4400 Forbes Avenue		
	City or town, state or province, country, and ZIP or foreign postal code Pittsburgh, PA 15213		G Gross receipts \$ 44,066,548.
	F Name and address of principal officer: Ms. Mary Frances Cooper same as C above		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(c) Group exemption number ▶	
J Website: ▶ www.carnegielibrary.org		K Form of organization: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶	
		L Year of formation: 1895	M State of legal domicile: PA

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: To engage our community in literacy and learning.		
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	36
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	36
	5	Total number of individuals employed in calendar year 2021 (Part V, line 2a)	5	475
	6	Total number of volunteers (estimate if necessary)	6	26
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
	7b	Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year 40,934,557.	Current Year 42,101,718.
	9	Program service revenue (Part VIII, line 2g)	243,005.	155,973.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	363,843.	1,254,163.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	319,047.	30,098.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	41,860,452.	43,541,952.
	Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.
14		Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
15		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	20,552,035.	20,447,378.
16a		Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
16b		Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,103,209.		
17		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	14,908,230.	16,455,156.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	35,460,265.	36,902,534.	
19	Revenue less expenses. Subtract line 18 from line 12	6,400,187.	6,639,418.	
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year 120,259,666.	End of Year 129,763,715.
	21	Total liabilities (Part X, line 26)	16,019,592.	14,720,366.
	22	Net assets or fund balances. Subtract line 21 from line 20	104,240,074.	115,043,349.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer		Date
	▶ Ms. Linda Barsevich, Director of Finance & Admin Type or print name and title		
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date
	Amy Lewis		
	Firm's name ▶ MAHER DUESSEL, CPA'S	Firm's EIN ▶ 25-1622758	Check <input type="checkbox"/> if self-employed PTIN P01360302
	Firm's address ▶ 503 MARTINDALE STREET, SUITE 600 PITTSBURGH, PA 15212	Phone no. 412-471-5500	

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

2021

Department of the Treasury
Internal Revenue Service

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A For the 2021 calendar year, or tax year beginning		and ending	
B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization Carnegie Library of Pittsburgh		D Employer identification number 25-0965281
	Doing business as		E Telephone number 412-622-3104
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 4400 Forbes Avenue		
	City or town, state or province, country, and ZIP or foreign postal code Pittsburgh, PA 15213		G Gross receipts \$ 44,066,548.
	F Name and address of principal officer: Ms. Mary Frances Cooper same as C above		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(c) Group exemption number ▶	
J Website: ▶ www.carnegielibrary.org			
K Form of organization: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶			L Year of formation: 1895 M State of legal domicile: PA

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: To engage our community in literacy and learning.		
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	36
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	5	Total number of individuals employed in calendar year 2021 (Part V, line 2a)	5	475
	6	Total number of volunteers (estimate if necessary)	6	26
	7 a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
	b	Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9	Program service revenue (Part VIII, line 2g)	40,934,557.	42,101,718.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	243,005.	155,973.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	363,843.	1,254,163.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	319,047.	30,098.
			41,860,452.	43,541,952.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	0.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	20,552,035.	20,447,378.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,103,209.		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	14,908,230.	16,455,156.
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Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21	Total liabilities (Part X, line 26)	120,259,666.	129,763,715.
	22	Net assets or fund balances. Subtract line 21 from line 20	16,019,592.	14,720,366.
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Part II Signature Block

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Sign Here	Signature of officer		Date
	▶ Ms. Linda Barsevich, Director of Finance & Admin Type or print name and title		
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date
	Amy Lewis		
	Firm's name ▶ MAHER DUESSEL, CPA'S	Firm's EIN ▶ 25-1622758	Check <input type="checkbox"/> if self-employed PTIN P01360302
	Firm's address ▶ 503 MARTINDALE STREET, SUITE 600 PITTSBURGH, PA 15212	Phone no. 412-471-5500	

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

2021

Department of the Treasury
Internal Revenue Service

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	Doing business as		E Telephone number 412-622-3104
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 4400 Forbes Avenue		
	City or town, state or province, country, and ZIP or foreign postal code Pittsburgh, PA 15213		G Gross receipts \$ 44,066,548.
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I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(c) Group exemption number ▶	
J Website: ▶ www.carnegielibrary.org		L Year of formation: 1895 M State of legal domicile: PA	
K Form of organization: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶			

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: To engage our community in literacy and learning.		
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	▶ Ms. Linda Barsevich, Director of Finance & Admin Type or print name and title		
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	Amy Lewis		
	Firm's name ▶ MAHER DUESSEL, CPA'S	Firm's EIN ▶ 25-1622758	Check <input type="checkbox"/> if self-employed PTIN P01360302
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Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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Department of the Treasury
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	Doing business as		E Telephone number 412-622-3104
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 4400 Forbes Avenue		
	City or town, state or province, country, and ZIP or foreign postal code Pittsburgh, PA 15213		G Gross receipts \$ 44,066,548.
	F Name and address of principal officer: Ms. Mary Frances Cooper same as C above		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(c) Group exemption number ▶	
J Website: ▶ www.carnegielibrary.org		K Form of organization: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶	
		L Year of formation: 1895	M State of legal domicile: PA

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Activities & Governance	1	Briefly describe the organization's mission or most significant activities: To engage our community in literacy and learning.		
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	3	Number of voting members of the governing body (Part VI, line 1a)	3	36
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	36
	5	Total number of individuals employed in calendar year 2021 (Part V, line 2a)	5	475
	6	Total number of volunteers (estimate if necessary)	6	26
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
	7b	Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9	Program service revenue (Part VIII, line 2g)	40,934,557.	42,101,718.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	243,005.	155,973.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	363,843.	1,254,163.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	319,047.	30,098.
			41,860,452.	43,541,952.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	0.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	20,552,035.	20,447,378.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	16b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,103,209.		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	14,908,230.	16,455,156.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	35,460,265.	36,902,534.	
19	Revenue less expenses. Subtract line 18 from line 12	6,400,187.	6,639,418.	
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21	Total liabilities (Part X, line 26)	120,259,666.	129,763,715.
	22	Net assets or fund balances. Subtract line 21 from line 20	16,019,592.	14,720,366.
		104,240,074.	115,043,349.	

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer		Date
	▶ Ms. Linda Barsevich, Director of Finance & Admin Type or print name and title		
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date
	Amy Lewis		
	Firm's name ▶ MAHER DUESSEL, CPA'S	Firm's EIN ▶ 25-1622758	Check <input type="checkbox"/> if self-employed PTIN P01360302
	Firm's address ▶ 503 MARTINDALE STREET, SUITE 600 PITTSBURGH, PA 15212	Phone no. 412-471-5500	

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

2021

Department of the Treasury
Internal Revenue Service

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

Open to Public Inspection

A For the 2021 calendar year, or tax year beginning		and ending	
B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization Carnegie Library of Pittsburgh		D Employer identification number 25-0965281
	Doing business as		E Telephone number 412-622-3104
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 4400 Forbes Avenue		
	City or town, state or province, country, and ZIP or foreign postal code Pittsburgh, PA 15213		G Gross receipts \$ 44,066,548.
	F Name and address of principal officer: Ms. Mary Frances Cooper same as C above		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(c) Group exemption number ▶	
J Website: ▶ www.carnegielibrary.org		L Year of formation: 1895 M State of legal domicile: PA	
K Form of organization: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶			

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: To engage our community in literacy and learning.		
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	36
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	36
	5	Total number of individuals employed in calendar year 2021 (Part V, line 2a)	5	475
	6	Total number of volunteers (estimate if necessary)	6	26
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
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Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year 40,934,557.	Current Year 42,101,718.
	9	Program service revenue (Part VIII, line 2g)	243,005.	155,973.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	363,843.	1,254,163.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	319,047.	30,098.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	41,860,452.	43,541,952.
	Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.
14		Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
15		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	20,552,035.	20,447,378.
16a		Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
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Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year 120,259,666.	End of Year 129,763,715.
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Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer		Date
	▶ Ms. Linda Barsevich, Director of Finance & Admin Type or print name and title		
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date
	Amy Lewis		
	Firm's name ▶ MAHER DUESSEL, CPA'S	Firm's EIN ▶ 25-1622758	Check <input type="checkbox"/> if self-employed PTIN P01360302
	Firm's address ▶ 503 MARTINDALE STREET, SUITE 600 PITTSBURGH, PA 15212	Phone no. 412-471-5500	

May the IRS discuss this return with the preparer shown above? See instructions Yes No