

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
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2022
Open to Public Inspection

A For the 2022 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 \$ 46,970,347.
	F Name and address of principal officer: Mr. Andrew Medlar 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 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	
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	35
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	35
	5	Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	489
	6	Total number of volunteers (estimate if necessary)	6	157
	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)	42,101,718.	45,743,965.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	155,973.	103,530.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 9c, 10c, and 11e)	1,254,163.	364,266.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	30,098.	46,522.
	12		43,541,952.	46,258,283.
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)	20,447,378.	22,308,506.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	16b	Total fundraising expenses (Part IX, column (D), line 25)	1,132,165.	
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	16,455,156.	16,395,591.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	36,902,534.	38,704,097.	
19	Revenue less expenses. Subtract line 18 from line 12	6,639,418.	7,554,186.	
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)	129,763,715.	128,546,025.
	22	Net assets or fund balances. Subtract line 21 from line 20	14,720,366.	13,572,747.
22		115,043,349.	114,973,278.	

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 if self-employed <input type="checkbox"/> 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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B Check if applicable:	C Name of organization Carnegie Library of Pittsburgh	D Employer identification number 25-0965281
<input type="checkbox"/> Address change	Doing business as	E Telephone number 412-622-3104
<input type="checkbox"/> Name change	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 4400 Forbes Avenue	
<input type="checkbox"/> Initial return	City or town, state or province, country, and ZIP or foreign postal code Pittsburgh, PA 15213	G Gross receipts \$ 46,970,347.
<input type="checkbox"/> Final return/terminated	F Name and address of principal officer: Mr. Andrew Medlar same as C above	H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> Amended return		H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Application pending	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	If "No," attach a list. See instructions
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.		
3	Number of voting members of the governing body (Part VI, line 1a)	3	35
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6	Total number of volunteers (estimate if necessary)	6	157
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)	42,101,718.	45,743,965.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	155,973.	103,530.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 9c, 10c, and 11e)	1,254,163.	364,266.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	30,098.	46,522.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	43,541,952.	46,258,283.
	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)	0.	0.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	20,447,378.	22,308,506.
	b Total fundraising expenses (Part IX, column (D), line 25)	0.	0.
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,132,165.	16,455,156.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	16,455,156.	16,395,591.	
19 Revenue less expenses. Subtract line 18 from line 12	36,902,534.	38,704,097.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	6,639,418.	7,554,186.
	21 Total liabilities (Part X, line 26)	Beginning of Current Year	End of Year
	22 Net assets or fund balances. Subtract line 21 from line 20	129,763,715.	128,546,025.
		14,720,366.	13,572,747.
		115,043,349.	114,973,278.

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

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

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	F Name and address of principal officer: Mr. Andrew Medlar same as C above		
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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

	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	35
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	35
	5 Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	489
	6 Total number of volunteers (estimate if necessary)	6	157
	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
9 Program service revenue (Part VIII, line 2g)		42,101,718.	45,743,965.
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		155,973.	103,530.
11 Other revenue (Part VIII, column (A), lines 5, 6d, 9c, 10c, and 11e)		1,254,163.	364,266.
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		30,098.	46,522.
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	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	16b Total fundraising expenses (Part IX, column (D), line 25)	1,132,165.	
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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)	129,763,715.	128,546,025.
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H(c) Group exemption number			

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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.		
	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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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
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	Amy Lewis			P01360302
Preparer Use Only	Firm's name	Firm's EIN		Phone no.
	MAHER DUESSEL, CPA'S	25-1622758		412-471-5500
	Firm's address			
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	PITTSBURGH, PA 15212			

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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)	35
	4	Number of independent voting members of the governing body (Part VI, line 1b)	35
	5	Total number of individuals employed in calendar year 2022 (Part V, line 2a)	489
	6	Total number of volunteers (estimate if necessary)	157
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	0.
	7b	Net unrelated business taxable income from Form 990-T, Part I, line 11	0.
	Revenue		
8		Contributions and grants (Part VIII, line 1h)	42,101,718.
9		Program service revenue (Part VIII, line 2g)	155,973.
10		Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,254,163.
11		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	30,098.
12		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	43,541,952.
Expenses			Current Year
	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.
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	20,447,378.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.
	16b	Total fundraising expenses (Part IX, column (D), line 25)	1,132,165.
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	16,455,156.	
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	36,902,534.	
19	Revenue less expenses. Subtract line 18 from line 12	6,639,418.	
Net Assets or Fund Balances			Beginning of Current Year
	20	Total assets (Part X, line 16)	129,763,715.
	21	Total liabilities (Part X, line 26)	14,720,366.
22	Net assets or fund balances. Subtract line 21 from line 20	115,043,349.	End of Year
			128,546,025.
			13,572,747.
			114,973,278.

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	Firm's EIN		
	MAHER DUESSEL, CPA'S	25-1622758		
	Firm's address	Phone no.		
	503 MARTINDALE STREET, SUITE 600 PITTSBURGH, PA 15212	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

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990 for instructions and the latest information.

2022
Open to Public Inspection

A For the 2022 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 \$ 46,970,347.
	F Name and address of principal officer: Mr. Andrew Medlar 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 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	
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.		
	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	35
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	35
	5 Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	489
	6 Total number of volunteers (estimate if necessary)	6	157
	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
9 Program service revenue (Part VIII, line 2g)		42,101,718.	45,743,965.
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		155,973.	103,530.
11 Other revenue (Part VIII, column (A), lines 5, 6d, 9c, 10c, and 11e)		1,254,163.	364,266.
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		30,098.	46,522.
		43,541,952.	46,258,283.
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)	20,447,378.	22,308,506.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	16b Total fundraising expenses (Part IX, column (D), line 25)	1,132,165.	
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	16,455,156.	16,395,591.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	36,902,534.	38,704,097.	
19 Revenue less expenses. Subtract line 18 from line 12	6,639,418.	7,554,186.	
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)	129,763,715.	128,546,025.
	22 Net assets or fund balances. Subtract line 21 from line 20	14,720,366.	13,572,747.
		115,043,349.	114,973,278.

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
	Firm's name MAHER DUESSEL, CPA'S	Date
	Firm's address 503 MARTINDALE STREET, SUITE 600 PITTSBURGH, PA 15212	Check if self-employed <input type="checkbox"/> PTIN P01360302
		Firm's EIN 25-1622758
		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

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
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Go to www.irs.gov/Form990 for instructions and the latest information.

2022
Open to Public Inspection

A For the 2022 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 \$ 46,970,347.
	F Name and address of principal officer: Mr. Andrew Medlar 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.		
	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	35
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	35
	5	Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	489
	6	Total number of volunteers (estimate if necessary)	6	157
	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)	42,101,718.	45,743,965.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	155,973.	103,530.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,254,163.	364,266.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	30,098.	46,522.
	12		43,541,952.	46,258,283.
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)	20,447,378.	22,308,506.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	16b	Total fundraising expenses (Part IX, column (D), line 25)	1,132,165.	
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	16,455,156.	16,395,591.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	36,902,534.	38,704,097.	
19	Revenue less expenses. Subtract line 18 from line 12	6,639,418.	7,554,186.	
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)	129,763,715.	128,546,025.
	22	Net assets or fund balances. Subtract line 21 from line 20	14,720,366.	13,572,747.
22		115,043,349.	114,973,278.	

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

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

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
Do not enter social security numbers on this form as it may be made public.
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2022

Open to Public Inspection

A For the 2022 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 \$ 46,970,347.
	F Name and address of principal officer: Mr. Andrew Medlar 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

	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	35
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	35
	5 Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	489
	6 Total number of volunteers (estimate if necessary)	6	157
	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
9 Program service revenue (Part VIII, line 2g)		42,101,718.	45,743,965.
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		155,973.	103,530.
11 Other revenue (Part VIII, column (A), lines 5, 6d, 9c, 10c, and 11e)		1,254,163.	364,266.
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		30,098.	46,522.
		43,541,952.	46,258,283.
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)	20,447,378.	22,308,506.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	16b Total fundraising expenses (Part IX, column (D), line 25)	1,132,165.	
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	16,455,156.	16,395,591.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	36,902,534.	38,704,097.	
19 Revenue less expenses. Subtract line 18 from line 12	6,639,418.	7,554,186.	
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)	129,763,715.	128,546,025.
	22 Net assets or fund balances. Subtract line 21 from line 20	14,720,366.	13,572,747.
	115,043,349.	114,973,278.	

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 if self-employed <input type="checkbox"/> 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

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
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2022

Open to Public Inspection

A For the 2022 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 \$ 46,970,347.
	F Name and address of principal officer: Mr. Andrew Medlar 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

	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	35
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	6 Total number of volunteers (estimate if necessary)	6	157
	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
9 Program service revenue (Part VIII, line 2g)		42,101,718.	45,743,965.
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12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		30,098.	46,522.
		43,541,952.	46,258,283.
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)	20,447,378.	22,308,506.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	16b Total fundraising expenses (Part IX, column (D), line 25)	1,132,165.	
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	16,455,156.	16,395,591.
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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
	Firm's name MAHER DUESSEL, CPA'S	Date
	Firm's address 503 MARTINDALE STREET, SUITE 600 PITTSBURGH, PA 15212	Check if self-employed <input type="checkbox"/> PTIN P01360302
		Firm's EIN 25-1622758
		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

Department of the Treasury
Internal Revenue Service

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2022
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	F Name and address of principal officer: Mr. Andrew Medlar same as C above		
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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			

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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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Activities & Governance	3 Number of voting members of the governing body (Part VI, line 1a)	3	35
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	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 42,101,718.
9 Program service revenue (Part VIII, line 2g)		155,973.	103,530.
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		1,254,163.	364,266.
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	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	16,455,156.	16,395,591.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	36,902,534.	38,704,097.	
19 Revenue less expenses. Subtract line 18 from line 12	6,639,418.	7,554,186.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 129,763,715.	End of Year 128,546,025.
	21 Total liabilities (Part X, line 26)	14,720,366.	13,572,747.
	22 Net assets or fund balances. Subtract line 21 from line 20	115,043,349.	114,973,278.

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
	Firm's name MAHER DUESSEL, CPA'S	Date
	Firm's address 503 MARTINDALE STREET, SUITE 600 PITTSBURGH, PA 15212	Check if self-employed <input type="checkbox"/> PTIN P01360302
	Firm's EIN 25-1622758	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

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990 for instructions and the latest information.

2022
Open to Public Inspection

A For the 2022 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 \$ 46,970,347.
	F Name and address of principal officer: Mr. Andrew Medlar 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

	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	35
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	35
	5 Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	489
	6 Total number of volunteers (estimate if necessary)	6	157
	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
9 Program service revenue (Part VIII, line 2g)		42,101,718.	45,743,965.
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		155,973.	103,530.
11 Other revenue (Part VIII, column (A), lines 5, 6d, 9c, 10c, and 11e)		1,254,163.	364,266.
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		30,098.	46,522.
		43,541,952.	46,258,283.
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)	20,447,378.	22,308,506.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	16b Total fundraising expenses (Part IX, column (D), line 25)	1,132,165.	
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	16,455,156.	16,395,591.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	36,902,534.	38,704,097.	
19 Revenue less expenses. Subtract line 18 from line 12	6,639,418.	7,554,186.	
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)	129,763,715.	128,546,025.
	22 Net assets or fund balances. Subtract line 21 from line 20	14,720,366.	13,572,747.
		115,043,349.	114,973,278.

Part II Signature Block

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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
	Firm's name MAHER DUESSEL, CPA'S	Date
	Firm's address 503 MARTINDALE STREET, SUITE 600 PITTSBURGH, PA 15212	Check if self-employed <input type="checkbox"/> PTIN P01360302
		Firm's EIN 25-1622758
		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

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990 for instructions and the latest information.

2022
Open to Public Inspection

A For the 2022 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 \$ 46,970,347.
	F Name and address of principal officer: Mr. Andrew Medlar 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

	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	35
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	35
	5 Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	489
	6 Total number of volunteers (estimate if necessary)	6	157
	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
9 Program service revenue (Part VIII, line 2g)		42,101,718.	45,743,965.
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		155,973.	103,530.
11 Other revenue (Part VIII, column (A), lines 5, 6d, 9c, 10c, and 11e)		1,254,163.	364,266.
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		30,098.	46,522.
		43,541,952.	46,258,283.
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)	20,447,378.	22,308,506.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	16b Total fundraising expenses (Part IX, column (D), line 25)	1,132,165.	
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	16,455,156.	16,395,591.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	36,902,534.	38,704,097.	
19 Revenue less expenses. Subtract line 18 from line 12	6,639,418.	7,554,186.	
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)	129,763,715.	128,546,025.
	22 Net assets or fund balances. Subtract line 21 from line 20	14,720,366.	13,572,747.
		115,043,349.	114,973,278.

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
	Firm's name MAHER DUESSEL, CPA'S	Date
	Firm's address 503 MARTINDALE STREET, SUITE 600 PITTSBURGH, PA 15212	Check if self-employed <input type="checkbox"/> PTIN P01360302
		Firm's EIN 25-1622758
		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

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
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Go to www.irs.gov/Form990 for instructions and the latest information.

2022
Open to Public Inspection

A For the 2022 calendar year, or tax year beginning _____ and ending _____

B Check if applicable:	C Name of organization Carnegie Library of Pittsburgh	D Employer identification number 25-0965281
<input type="checkbox"/> Address change	Doing business as	E Telephone number 412-622-3104
<input type="checkbox"/> Name change	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 4400 Forbes Avenue	
<input type="checkbox"/> Initial return	City or town, state or province, country, and ZIP or foreign postal code Pittsburgh, PA 15213	G Gross receipts \$ 46,970,347.
<input type="checkbox"/> Final return/terminated	F Name and address of principal officer: Mr. Andrew Medlar same as C above	H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> Amended return		H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Application pending	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	If "No," attach a list. See instructions
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.		
3	Number of voting members of the governing body (Part VI, line 1a)	3	35
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	35
5	Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	489
6	Total number of volunteers (estimate if necessary)	6	157
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)	42,101,718.	45,743,965.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	155,973.	103,530.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 9c, 10c, and 11e)	1,254,163.	364,266.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	30,098.	46,522.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	43,541,952.	46,258,283.
	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)	0.	0.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	20,447,378.	22,308,506.
	b Total fundraising expenses (Part IX, column (D), line 25)	0.	0.
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,132,165.	16,455,156.	16,395,591.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	16,455,156.	36,902,534.	38,704,097.
19 Revenue less expenses. Subtract line 18 from line 12	6,639,418.	7,554,186.	
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)	129,763,715.	128,546,025.
	22 Net assets or fund balances. Subtract line 21 from line 20	14,720,366.	13,572,747.
		115,043,349.	114,973,278.

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 if self-employed <input type="checkbox"/> 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

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
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2022
Open to Public Inspection

A For the 2022 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 \$ 46,970,347.
	F Name and address of principal officer: Mr. Andrew Medlar 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

	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	35
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	35
	5 Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	489
	6 Total number of volunteers (estimate if necessary)	6	157
	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 42,101,718.
9 Program service revenue (Part VIII, line 2g)		155,973.	103,530.
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		1,254,163.	364,266.
11 Other revenue (Part VIII, column (A), lines 5, 6d, 9c, 10c, and 11e)		30,098.	46,522.
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		43,541,952.	46,258,283.
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)	20,447,378.	22,308,506.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	16b Total fundraising expenses (Part IX, column (D), line 25)	1,132,165.	
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	16,455,156.	16,395,591.
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19 Revenue less expenses. Subtract line 18 from line 12	6,639,418.	7,554,186.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 129,763,715.	End of Year 128,546,025.
	21 Total liabilities (Part X, line 26)	14,720,366.	13,572,747.
	22 Net assets or fund balances. Subtract line 21 from line 20	115,043,349.	114,973,278.

Part II Signature Block

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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
	Firm's name MAHER DUESSEL, CPA'S	Firm's EIN 25-1622758	Check if self-employed <input type="checkbox"/> 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

Department of the Treasury
Internal Revenue Service

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2022
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A For the 2022 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 \$ 46,970,347.
	F Name and address of principal officer: Mr. Andrew Medlar 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 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	
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.		
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	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	35
	5	Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	489
	6	Total number of volunteers (estimate if necessary)	6	157
	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 42,101,718.	Current Year 45,743,965.
	9	Program service revenue (Part VIII, line 2g)	155,973.	103,530.
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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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	22	Net assets or fund balances. Subtract line 21 from line 20	115,043,349.	114,973,278.

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

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

Department of the Treasury
Internal Revenue Service

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2022
Open to Public Inspection

A For the 2022 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 \$ 46,970,347.
	F Name and address of principal officer: Mr. Andrew Medlar 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.		
3	Number of voting members of the governing body (Part VI, line 1a)	3	35
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	35
5	Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	489
6	Total number of volunteers (estimate if necessary)	6	157
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)	42,101,718.	45,743,965.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	155,973.	103,530.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,254,163.	364,266.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	30,098.	46,522.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	43,541,952.	46,258,283.
	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)	0.	0.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	20,447,378.	22,308,506.
	b Total fundraising expenses (Part IX, column (D), line 25)	0.	0.
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,132,165.	16,455,156.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	16,455,156.	16,395,591.	
19 Revenue less expenses. Subtract line 18 from line 12	36,902,534.	38,704,097.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	6,639,418.	7,554,186.
	21 Total liabilities (Part X, line 26)	Beginning of Current Year	End of Year
	22 Net assets or fund balances. Subtract line 21 from line 20	129,763,715.	128,546,025.

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
	Firm's name MAHER DUESSEL, CPA'S	Date
	Firm's address 503 MARTINDALE STREET, SUITE 600 PITTSBURGH, PA 15212	Check if self-employed <input type="checkbox"/> PTIN P01360302
		Firm's EIN 25-1622758
		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

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990 for instructions and the latest information.

2022
Open to Public Inspection

A For the 2022 calendar year, or tax year beginning _____ and ending _____

B Check if applicable:	C Name of organization Carnegie Library of Pittsburgh	D Employer identification number 25-0965281
<input type="checkbox"/> Address change	Doing business as	E Telephone number 412-622-3104
<input type="checkbox"/> Name change	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 4400 Forbes Avenue	
<input type="checkbox"/> Initial return	City or town, state or province, country, and ZIP or foreign postal code Pittsburgh, PA 15213	G Gross receipts \$ 46,970,347.
<input type="checkbox"/> Final return/terminated	F Name and address of principal officer: Mr. Andrew Medlar same as C above	H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> Amended return		H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Application pending	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	If "No," attach a list. See instructions
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.		
3	Number of voting members of the governing body (Part VI, line 1a)	3	35
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	35
5	Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	489
6	Total number of volunteers (estimate if necessary)	6	157
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)	42,101,718.	45,743,965.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	155,973.	103,530.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 9c, 10c, and 11e)	1,254,163.	364,266.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	30,098.	46,522.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	43,541,952.	46,258,283.
	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)	0.	0.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	20,447,378.	22,308,506.
	b Total fundraising expenses (Part IX, column (D), line 25)	0.	0.
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,132,165.	16,455,156.	16,395,591.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	16,455,156.	36,902,534.	38,704,097.
19 Revenue less expenses. Subtract line 18 from line 12	6,639,418.	7,554,186.	
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)	129,763,715.	128,546,025.
	22 Net assets or fund balances. Subtract line 21 from line 20	14,720,366.	13,572,747.
		115,043,349.	114,973,278.

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	Check if self-employed <input type="checkbox"/>	PTIN P01360302
	Firm's address 503 MARTINDALE STREET, SUITE 600 PITTSBURGH, PA 15212	Firm's EIN 25-1622758	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

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
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Go to www.irs.gov/Form990 for instructions and the latest information.

2022
Open to Public Inspection

A For the 2022 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 \$ 46,970,347.
	F Name and address of principal officer: Mr. Andrew Medlar 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.		
	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	35
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	35
	5	Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	489
	6	Total number of volunteers (estimate if necessary)	6	157
	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			Prior Year	Current Year
	8	Contributions and grants (Part VIII, line 1h)	42,101,718.	45,743,965.
	9	Program service revenue (Part VIII, line 2g)	155,973.	103,530.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,254,163.	364,266.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	30,098.	46,522.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	43,541,952.	46,258,283.
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)	20,447,378.	22,308,506.
	16	a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
		b Total fundraising expenses (Part IX, column (D), line 25)	1,132,165.	
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	16,455,156.	16,395,591.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	36,902,534.	38,704,097.	
19	Revenue less expenses. Subtract line 18 from line 12	6,639,418.	7,554,186.	
Net Assets or Fund Balances			Beginning of Current Year	End of Year
	20	Total assets (Part X, line 16)	129,763,715.	128,546,025.
	21	Total liabilities (Part X, line 26)	14,720,366.	13,572,747.
22	Net assets or fund balances. Subtract line 21 from line 20	115,043,349.	114,973,278.	

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	Firm's EIN		
	MAHER DUESSEL, CPA'S	25-1622758		
	Firm's address	Phone no.		
	503 MARTINDALE STREET, SUITE 600 PITTSBURGH, PA 15212	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

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
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2022

Open to Public Inspection

A For the 2022 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 \$ 46,970,347.
	F Name and address of principal officer: Mr. Andrew Medlar 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.		
	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	35
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	35
	5	Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	489
	6	Total number of volunteers (estimate if necessary)	6	157
	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 42,101,718.	Current Year 45,743,965.
	9	Program service revenue (Part VIII, line 2g)	155,973.	103,530.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,254,163.	364,266.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	30,098.	46,522.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	43,541,952.	46,258,283.
	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)	20,447,378.	22,308,506.
16a		Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
16b		Total fundraising expenses (Part IX, column (D), line 25)	1,132,165.	
17		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	16,455,156.	16,395,591.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	36,902,534.	38,704,097.	
19	Revenue less expenses. Subtract line 18 from line 12	6,639,418.	7,554,186.	
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year 129,763,715.	End of Year 128,546,025.
	21	Total liabilities (Part X, line 26)	14,720,366.	13,572,747.
	22	Net assets or fund balances. Subtract line 21 from line 20	115,043,349.	114,973,278.

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

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

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
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2022
Open to Public Inspection

A For the 2022 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 \$ 46,970,347.
	F Name and address of principal officer: Mr. Andrew Medlar 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

	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	35
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	35
	5 Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	489
	6 Total number of volunteers (estimate if necessary)	6	157
	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
9 Program service revenue (Part VIII, line 2g)		42,101,718.	45,743,965.
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		155,973.	103,530.
11 Other revenue (Part VIII, column (A), lines 5, 6d, 9c, 10c, and 11e)		1,254,163.	364,266.
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		30,098.	46,522.
		43,541,952.	46,258,283.
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)	20,447,378.	22,308,506.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
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18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	36,902,534.	38,704,097.	
19 Revenue less expenses. Subtract line 18 from line 12	6,639,418.	7,554,186.	
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)	129,763,715.	128,546,025.
	22 Net assets or fund balances. Subtract line 21 from line 20	14,720,366.	13,572,747.
		115,043,349.	114,973,278.

Part II Signature Block

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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
	Firm's name MAHER DUESSEL, CPA'S	Date
	Firm's address 503 MARTINDALE STREET, SUITE 600 PITTSBURGH, PA 15212	Check if self-employed <input type="checkbox"/> PTIN P01360302
		Firm's EIN 25-1622758
		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

Department of the Treasury
Internal Revenue Service

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2022
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A For the 2022 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 \$ 46,970,347.
	F Name and address of principal officer: Mr. Andrew Medlar 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.		
	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	35
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	5	Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	489
	6	Total number of volunteers (estimate if necessary)	6	157
	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)	42,101,718.	45,743,965.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	155,973.	103,530.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,254,163.	364,266.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	30,098.	46,522.
			43,541,952.	46,258,283.
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)	20,447,378.	22,308,506.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	16b	Total fundraising expenses (Part IX, column (D), line 25)	1,132,165.	
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	16,455,156.	16,395,591.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	36,902,534.	38,704,097.	
19	Revenue less expenses. Subtract line 18 from line 12	6,639,418.	7,554,186.	
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)	129,763,715.	128,546,025.
	22	Net assets or fund balances. Subtract line 21 from line 20	14,720,366.	13,572,747.
		115,043,349.	114,973,278.	

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				
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

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990 for instructions and the latest information.

2022
Open to Public Inspection

A For the 2022 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 \$ 46,970,347.
	F Name and address of principal officer: Mr. Andrew Medlar 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

	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	35
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	35
	5 Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	489
	6 Total number of volunteers (estimate if necessary)	6	157
	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 42,101,718.
9 Program service revenue (Part VIII, line 2g)		155,973.	103,530.
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		1,254,163.	364,266.
11 Other revenue (Part VIII, column (A), lines 5, 6d, 9c, 10c, and 11e)		30,098.	46,522.
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		43,541,952.	46,258,283.
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)	20,447,378.	22,308,506.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	16b Total fundraising expenses (Part IX, column (D), line 25)	1,132,165.	
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	16,455,156.	16,395,591.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	36,902,534.	38,704,097.	
19 Revenue less expenses. Subtract line 18 from line 12	6,639,418.	7,554,186.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 129,763,715.	End of Year 128,546,025.
	21 Total liabilities (Part X, line 26)	14,720,366.	13,572,747.
	22 Net assets or fund balances. Subtract line 21 from line 20	115,043,349.	114,973,278.

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
	Firm's name MAHER DUESSEL, CPA'S	Date
	Firm's address 503 MARTINDALE STREET, SUITE 600 PITTSBURGH, PA 15212	Check if self-employed <input type="checkbox"/> PTIN P01360302
		Firm's EIN 25-1622758
		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

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990 for instructions and the latest information.

2022
Open to Public Inspection

A For the 2022 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 \$ 46,970,347.
	F Name and address of principal officer: Mr. Andrew Medlar 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.		
3	Number of voting members of the governing body (Part VI, line 1a)	3	35
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	35
5	Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	489
6	Total number of volunteers (estimate if necessary)	6	157
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)	42,101,718.	45,743,965.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	155,973.	103,530.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 9c, 10c, and 11e)	1,254,163.	364,266.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	30,098.	46,522.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	43,541,952.	46,258,283.
	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)	0.	0.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	20,447,378.	22,308,506.
	b Total fundraising expenses (Part IX, column (D), line 25)	0.	0.
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,132,165.	16,455,156.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	16,455,156.	16,395,591.	
19 Revenue less expenses. Subtract line 18 from line 12	36,902,534.	38,704,097.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	6,639,418.	7,554,186.
	21 Total liabilities (Part X, line 26)	Beginning of Current Year	End of Year
	22 Net assets or fund balances. Subtract line 21 from line 20	129,763,715.	128,546,025.
		14,720,366.	13,572,747.
		115,043,349.	114,973,278.

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 if self-employed <input type="checkbox"/> 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

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990 for instructions and the latest information.

2022
Open to Public Inspection

A For the 2022 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 \$ 46,970,347.
	F Name and address of principal officer: Mr. Andrew Medlar 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

	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	35
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	35
	5 Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	489
	6 Total number of volunteers (estimate if necessary)	6	157
	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
9 Program service revenue (Part VIII, line 2g)		42,101,718.	45,743,965.
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		155,973.	103,530.
11 Other revenue (Part VIII, column (A), lines 5, 6d, 9c, 10c, and 11e)		1,254,163.	364,266.
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		30,098.	46,522.
		43,541,952.	46,258,283.
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)	20,447,378.	22,308,506.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	16b Total fundraising expenses (Part IX, column (D), line 25)	1,132,165.	
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	16,455,156.	16,395,591.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	36,902,534.	38,704,097.	
19 Revenue less expenses. Subtract line 18 from line 12	6,639,418.	7,554,186.	
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)	129,763,715.	128,546,025.
	22 Net assets or fund balances. Subtract line 21 from line 20	14,720,366.	13,572,747.
		115,043,349.	114,973,278.

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
	Firm's name MAHER DUESSEL, CPA'S	Date
	Firm's address 503 MARTINDALE STREET, SUITE 600 PITTSBURGH, PA 15212	Check if self-employed <input type="checkbox"/> PTIN P01360302
		Firm's EIN 25-1622758
		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

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
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2022
Open to Public Inspection

A For the 2022 calendar year, or tax year beginning _____ and ending _____

B Check if applicable:	C Name of organization Carnegie Library of Pittsburgh	D Employer identification number 25-0965281
<input type="checkbox"/> Address change	Doing business as	E Telephone number 412-622-3104
<input type="checkbox"/> Name change	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 4400 Forbes Avenue	
<input type="checkbox"/> Initial return	City or town, state or province, country, and ZIP or foreign postal code Pittsburgh, PA 15213	G Gross receipts \$ 46,970,347.
<input type="checkbox"/> Final return/terminated	F Name and address of principal officer: Mr. Andrew Medlar same as C above	H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> Amended return		H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Application pending	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	If "No," attach a list. See instructions
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.		
3	Number of voting members of the governing body (Part VI, line 1a)	3	35
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	35
5	Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	489
6	Total number of volunteers (estimate if necessary)	6	157
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)	42,101,718.	45,743,965.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	155,973.	103,530.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 9c, 10c, and 11e)	1,254,163.	364,266.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	30,098.	46,522.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	43,541,952.	46,258,283.
	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)	0.	0.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	20,447,378.	22,308,506.
	b Total fundraising expenses (Part IX, column (D), line 25)	0.	0.
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,132,165.	16,455,156.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	36,902,534.	38,704,097.	38,704,097.
19 Revenue less expenses. Subtract line 18 from line 12	6,639,418.	7,554,186.	7,554,186.
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)	129,763,715.	128,546,025.
	22 Net assets or fund balances. Subtract line 21 from line 20	14,720,366.	13,572,747.
		115,043,349.	114,973,278.

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 if self-employed <input type="checkbox"/> 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

Department of the Treasury
Internal Revenue Service

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2022
Open to Public Inspection

A For the 2022 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 \$ 46,970,347.
	F Name and address of principal officer: Mr. Andrew Medlar 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 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	
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	35
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	35
	5	Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	489
	6	Total number of volunteers (estimate if necessary)	6	157
	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)	42,101,718.	45,743,965.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	155,973.	103,530.
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			43,541,952.	46,258,283.
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)	20,447,378.	22,308,506.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	16b	Total fundraising expenses (Part IX, column (D), line 25)	1,132,165.	
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	16,455,156.	16,395,591.
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19	Revenue less expenses. Subtract line 18 from line 12	6,639,418.	7,554,186.	
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)	129,763,715.	128,546,025.
	22	Net assets or fund balances. Subtract line 21 from line 20	14,720,366.	13,572,747.
		115,043,349.	114,973,278.	

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				
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	Firm's EIN		Phone no.	
	MAHER DUESSEL, CPA'S	25-1622758		412-471-5500	
	Firm's address	503 MARTINDALE STREET, SUITE 600 PITTSBURGH, PA 15212			

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

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990 for instructions and the latest information.

2022
Open to Public Inspection

A For the 2022 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		G Gross receipts \$ 46,970,347.
	City or town, state or province, country, and ZIP or foreign postal code Pittsburgh, PA 15213		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	F Name and address of principal officer: Mr. Andrew Medlar same as C above		H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No
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

	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	35
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	35
	5 Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	489
	6 Total number of volunteers (estimate if necessary)	6	157
	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
9 Program service revenue (Part VIII, line 2g)		42,101,718.	45,743,965.
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		155,973.	103,530.
11 Other revenue (Part VIII, column (A), lines 5, 6d, 9c, 10c, and 11e)		1,254,163.	364,266.
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		30,098.	46,522.
		43,541,952.	46,258,283.
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)	20,447,378.	22,308,506.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	16b Total fundraising expenses (Part IX, column (D), line 25)	1,132,165.	
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	16,455,156.	16,395,591.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	36,902,534.	38,704,097.	
19 Revenue less expenses. Subtract line 18 from line 12	6,639,418.	7,554,186.	
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)	129,763,715.	128,546,025.
	22 Net assets or fund balances. Subtract line 21 from line 20	14,720,366.	13,572,747.
		115,043,349.	114,973,278.

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
	Firm's name MAHER DUESSEL, CPA'S	Date
	Firm's address 503 MARTINDALE STREET, SUITE 600 PITTSBURGH, PA 15212	Check if self-employed <input type="checkbox"/> PTIN P01360302
		Firm's EIN 25-1622758
		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

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
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2022

Open to Public Inspection

A For the 2022 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 \$ 46,970,347.
	F Name and address of principal officer: Mr. Andrew Medlar 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			
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	35
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	35
	5 Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	489
	6 Total number of volunteers (estimate if necessary)	6	157
	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.
			Prior Year
Revenue	8 Contributions and grants (Part VIII, line 1h)	42,101,718.	45,743,965.
	9 Program service revenue (Part VIII, line 2g)	155,973.	103,530.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,254,163.	364,266.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	30,098.	46,522.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	43,541,952.	46,258,283.
			Current Year
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)	20,447,378.	22,308,506.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b Total fundraising expenses (Part IX, column (D), line 25)	1,132,165.	
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	16,455,156.	16,395,591.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	36,902,534.	38,704,097.	
19 Revenue less expenses. Subtract line 18 from line 12	6,639,418.	7,554,186.	
Net Assets or Fund Balances			Beginning of Current Year
	20 Total assets (Part X, line 16)	129,763,715.	128,546,025.
	21 Total liabilities (Part X, line 26)	14,720,366.	13,572,747.
22 Net assets or fund balances. Subtract line 21 from line 20	115,043,349.	114,973,278.	End of Year

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

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
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2022
Open to Public Inspection

A For the 2022 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 \$ 46,970,347.
	F Name and address of principal officer: Mr. Andrew Medlar 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

	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	35
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	35
	5 Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	489
	6 Total number of volunteers (estimate if necessary)	6	157
	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
9 Program service revenue (Part VIII, line 2g)		42,101,718.	45,743,965.
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		155,973.	103,530.
11 Other revenue (Part VIII, column (A), lines 5, 6d, 9c, 10c, and 11e)		1,254,163.	364,266.
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		30,098.	46,522.
		43,541,952.	46,258,283.
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)	20,447,378.	22,308,506.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	16b Total fundraising expenses (Part IX, column (D), line 25)	1,132,165.	
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	16,455,156.	16,395,591.
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19 Revenue less expenses. Subtract line 18 from line 12	6,639,418.	7,554,186.	
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)	129,763,715.	128,546,025.
	22 Net assets or fund balances. Subtract line 21 from line 20	14,720,366.	13,572,747.
	115,043,349.	114,973,278.	

Part II Signature Block

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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
	Firm's name MAHER DUESSEL, CPA'S	Date
	Firm's address 503 MARTINDALE STREET, SUITE 600 PITTSBURGH, PA 15212	Check if self-employed <input type="checkbox"/> PTIN P01360302
	Firm's EIN 25-1622758	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

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
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2022
Open to Public Inspection

A For the 2022 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 \$ 46,970,347.
	F Name and address of principal officer: Mr. Andrew Medlar 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			

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	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	157
	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
9 Program service revenue (Part VIII, line 2g)		42,101,718.	45,743,965.
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Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	0.
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	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	20,447,378.	22,308,506.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	16b Total fundraising expenses (Part IX, column (D), line 25) 1,132,165.		
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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)	129,763,715.	128,546,025.
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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
	Firm's name MAHER DUESSEL, CPA'S	Firm's EIN 25-1622758	Check if self-employed <input type="checkbox"/> 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

Department of the Treasury
Internal Revenue Service

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2022

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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
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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(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.		
	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	35
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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	Current Year
	9	Program service revenue (Part VIII, line 2g)	42,101,718.	45,743,965.
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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)	129,763,715.	128,546,025.
	22	Net assets or fund balances. Subtract line 21 from line 20	14,720,366.	13,572,747.
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Sign Here	Signature of officer	Date		
	Ms. Linda Barsevich, Director of Finance & Admin			
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	Firm's EIN		
	MAHER DUESSEL, CPA'S	25-1622758		
	Firm's address	Phone no.		
	503 MARTINDALE STREET, SUITE 600 PITTSBURGH, PA 15212	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

Department of the Treasury
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2022
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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 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 \$ 46,970,347.
	F Name and address of principal officer: Mr. Andrew Medlar 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.		
3	Number of voting members of the governing body (Part VI, line 1a)	3	35
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	35
5	Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	489
6	Total number of volunteers (estimate if necessary)	6	157
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)	42,101,718.	45,743,965.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	155,973.	103,530.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,254,163.	364,266.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	30,098.	46,522.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	43,541,952.	46,258,283.
	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)	0.	0.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	20,447,378.	22,308,506.
	b Total fundraising expenses (Part IX, column (D), line 25)	0.	0.
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,132,165.	16,455,156.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	16,455,156.	16,395,591.	
19 Revenue less expenses. Subtract line 18 from line 12	36,902,534.	38,704,097.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	6,639,418.	7,554,186.
	21 Total liabilities (Part X, line 26)	Beginning of Current Year	End of Year
	22 Net assets or fund balances. Subtract line 21 from line 20	129,763,715.	128,546,025.
		14,720,366.	13,572,747.
		115,043,349.	114,973,278.

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 if self-employed <input type="checkbox"/> 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

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990 for instructions and the latest information.

2022
Open to Public Inspection

A For the 2022 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 \$ 46,970,347.
	F Name and address of principal officer: Mr. Andrew Medlar 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

	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	35
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	35
	5 Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	489
	6 Total number of volunteers (estimate if necessary)	6	157
	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
9 Program service revenue (Part VIII, line 2g)		42,101,718.	45,743,965.
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		155,973.	103,530.
11 Other revenue (Part VIII, column (A), lines 5, 6d, 9c, 10c, and 11e)		1,254,163.	364,266.
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		30,098.	46,522.
		43,541,952.	46,258,283.
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)	20,447,378.	22,308,506.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	16b Total fundraising expenses (Part IX, column (D), line 25)	1,132,165.	
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	16,455,156.	16,395,591.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	36,902,534.	38,704,097.	
19 Revenue less expenses. Subtract line 18 from line 12	6,639,418.	7,554,186.	
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)	129,763,715.	128,546,025.
	22 Net assets or fund balances. Subtract line 21 from line 20	14,720,366.	13,572,747.
		115,043,349.	114,973,278.

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
	Firm's name MAHER DUESSEL, CPA'S	Date
	Firm's address 503 MARTINDALE STREET, SUITE 600 PITTSBURGH, PA 15212	Check if self-employed <input type="checkbox"/> PTIN P01360302
		Firm's EIN 25-1622758
		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

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990 for instructions and the latest information.

2022
Open to Public Inspection

A For the 2022 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 \$ 46,970,347.
	F Name and address of principal officer: Mr. Andrew Medlar 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.		
	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	35
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	35
	5	Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	489
	6	Total number of volunteers (estimate if necessary)	6	157
	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 42,101,718.	Current Year 45,743,965.
	9	Program service revenue (Part VIII, line 2g)	155,973.	103,530.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,254,163.	364,266.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 9c, 10c, and 11e)	30,098.	46,522.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	43,541,952.	46,258,283.
	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)	20,447,378.	22,308,506.
16a		Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
16b		Total fundraising expenses (Part IX, column (D), line 25)	1,132,165.	
17		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	16,455,156.	16,395,591.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	36,902,534.	38,704,097.	
19	Revenue less expenses. Subtract line 18 from line 12	6,639,418.	7,554,186.	
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year 129,763,715.	End of Year 128,546,025.
	21	Total liabilities (Part X, line 26)	14,720,366.	13,572,747.
	22	Net assets or fund balances. Subtract line 21 from line 20	115,043,349.	114,973,278.

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

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

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990 for instructions and the latest information.

2022
Open to Public Inspection

A For the 2022 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 \$ 46,970,347.
	F Name and address of principal officer: Mr. Andrew Medlar 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

	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	35
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	35
	5 Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	489
	6 Total number of volunteers (estimate if necessary)	6	157
	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
9 Program service revenue (Part VIII, line 2g)		42,101,718.	45,743,965.
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		155,973.	103,530.
11 Other revenue (Part VIII, column (A), lines 5, 6d, 9c, 10c, and 11e)		1,254,163.	364,266.
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		30,098.	46,522.
		43,541,952.	46,258,283.
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)	20,447,378.	22,308,506.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	16b Total fundraising expenses (Part IX, column (D), line 25)	1,132,165.	
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	16,455,156.	16,395,591.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	36,902,534.	38,704,097.	
19 Revenue less expenses. Subtract line 18 from line 12	6,639,418.	7,554,186.	
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)	129,763,715.	128,546,025.
	22 Net assets or fund balances. Subtract line 21 from line 20	14,720,366.	13,572,747.
		115,043,349.	114,973,278.

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

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

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Form **990**

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

2022

Department of the Treasury
Internal Revenue Service

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Open to Public Inspection

A For the 2022 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 \$ 46,970,347.
	F Name and address of principal officer: Mr. Andrew Medlar 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

	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	35
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	35
	5 Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	489
	6 Total number of volunteers (estimate if necessary)	6	157
	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)		42,101,718.	45,743,965.
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		155,973.	103,530.
11 Other revenue (Part VIII, column (A), lines 5, 6d, 9c, 10c, and 11e)		1,254,163.	364,266.
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		30,098.	46,522.
		43,541,952.	46,258,283.
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)	20,447,378.	22,308,506.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b Total fundraising expenses (Part IX, column (D), line 25) 1,132,165.		
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19 Revenue less expenses. Subtract line 18 from line 12	6,639,418.	7,554,186.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
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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		
	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

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
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2022
Open to Public Inspection

A For the 2022 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 \$ 46,970,347.
	F Name and address of principal officer: Mr. Andrew Medlar 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

	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	35
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	6 Total number of volunteers (estimate if necessary)	6	157
	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 42,101,718.
9 Program service revenue (Part VIII, line 2g)		155,973.	103,530.
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		1,254,163.	364,266.
11 Other revenue (Part VIII, column (A), lines 5, 6d, 9c, 10c, and 11e)		30,098.	46,522.
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		43,541,952.	46,258,283.
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)	20,447,378.	22,308,506.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	16b Total fundraising expenses (Part IX, column (D), line 25)	1,132,165.	
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	16,455,156.	16,395,591.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	36,902,534.	38,704,097.	
19 Revenue less expenses. Subtract line 18 from line 12	6,639,418.	7,554,186.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 129,763,715.	End of Year 128,546,025.
	21 Total liabilities (Part X, line 26)	14,720,366.	13,572,747.
	22 Net assets or fund balances. Subtract line 21 from line 20	115,043,349.	114,973,278.

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 if self-employed <input type="checkbox"/> 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

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990 for instructions and the latest information.

2022
Open to Public Inspection

A For the 2022 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 \$ 46,970,347.
	F Name and address of principal officer: Mr. Andrew Medlar 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 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	
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.		
	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	35
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	35
	5 Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	489
	6 Total number of volunteers (estimate if necessary)	6	157
	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
9 Program service revenue (Part VIII, line 2g)		42,101,718.	45,743,965.
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		155,973.	103,530.
11 Other revenue (Part VIII, column (A), lines 5, 6d, 9c, 10c, and 11e)		1,254,163.	364,266.
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		30,098.	46,522.
		43,541,952.	46,258,283.
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)	20,447,378.	22,308,506.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	16b Total fundraising expenses (Part IX, column (D), line 25)	1,132,165.	
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	16,455,156.	16,395,591.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	36,902,534.	38,704,097.	
19 Revenue less expenses. Subtract line 18 from line 12	6,639,418.	7,554,186.	
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)	129,763,715.	128,546,025.
	22 Net assets or fund balances. Subtract line 21 from line 20	14,720,366.	13,572,747.
		115,043,349.	114,973,278.

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

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
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Go to www.irs.gov/Form990 for instructions and the latest information.

2022
Open to Public Inspection

A For the 2022 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 \$ 46,970,347.
	F Name and address of principal officer: Mr. Andrew Medlar 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

	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	35
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	35
	5 Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	489
	6 Total number of volunteers (estimate if necessary)	6	157
	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
9 Program service revenue (Part VIII, line 2g)		42,101,718.	45,743,965.
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		155,973.	103,530.
11 Other revenue (Part VIII, column (A), lines 5, 6d, 9c, 10c, and 11e)		1,254,163.	364,266.
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		30,098.	46,522.
		43,541,952.	46,258,283.
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)	20,447,378.	22,308,506.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	16b Total fundraising expenses (Part IX, column (D), line 25)	1,132,165.	
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	16,455,156.	16,395,591.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	36,902,534.	38,704,097.	
19 Revenue less expenses. Subtract line 18 from line 12	6,639,418.	7,554,186.	
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)	129,763,715.	128,546,025.
	22 Net assets or fund balances. Subtract line 21 from line 20	14,720,366.	13,572,747.
		115,043,349.	114,973,278.

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
	Firm's name MAHER DUESSEL, CPA'S	Date
	Firm's address 503 MARTINDALE STREET, SUITE 600 PITTSBURGH, PA 15212	Check if self-employed <input type="checkbox"/> PTIN P01360302
		Firm's EIN 25-1622758
		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

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
Do not enter social security numbers on this form as it may be made public.
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2022
Open to Public Inspection

A For the 2022 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 \$ 46,970,347.
	F Name and address of principal officer: Mr. Andrew Medlar 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.		
	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	35
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	35
	5	Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	489
	6	Total number of volunteers (estimate if necessary)	6	157
	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)	42,101,718.	45,743,965.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	155,973.	103,530.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,254,163.	364,266.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	30,098.	46,522.
			43,541,952.	46,258,283.
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)	20,447,378.	22,308,506.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	16b	Total fundraising expenses (Part IX, column (D), line 25)	1,132,165.	
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	16,455,156.	16,395,591.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	36,902,534.	38,704,097.	
19	Revenue less expenses. Subtract line 18 from line 12	6,639,418.	7,554,186.	
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)	129,763,715.	128,546,025.
	22	Net assets or fund balances. Subtract line 21 from line 20	14,720,366.	13,572,747.
		115,043,349.	114,973,278.	

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

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

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
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2022
Open to Public Inspection

A For the 2022 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 \$ 46,970,347.
	F Name and address of principal officer: Mr. Andrew Medlar 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

	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	35
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	35
	5 Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	489
	6 Total number of volunteers (estimate if necessary)	6	157
	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
9 Program service revenue (Part VIII, line 2g)		42,101,718.	45,743,965.
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		155,973.	103,530.
11 Other revenue (Part VIII, column (A), lines 5, 6d, 9c, 10c, and 11e)		1,254,163.	364,266.
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		30,098.	46,522.
		43,541,952.	46,258,283.
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)	20,447,378.	22,308,506.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
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18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	36,902,534.	38,704,097.	
19 Revenue less expenses. Subtract line 18 from line 12	6,639,418.	7,554,186.	
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)	129,763,715.	128,546,025.
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		115,043,349.	114,973,278.

Part II Signature Block

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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

Department of the Treasury
Internal Revenue Service

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	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 4400 Forbes Avenue		
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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			

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	5 Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	489
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	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.
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		115,043,349.	114,973,278.

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 if self-employed <input type="checkbox"/> 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

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990 for instructions and the latest information.

2022
Open to Public Inspection

A For the 2022 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 \$ 46,970,347.
	F Name and address of principal officer: Mr. Andrew Medlar 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

	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	35
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	35
	5 Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	489
	6 Total number of volunteers (estimate if necessary)	6	157
	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 42,101,718.
9 Program service revenue (Part VIII, line 2g)		155,973.	103,530.
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		1,254,163.	364,266.
11 Other revenue (Part VIII, column (A), lines 5, 6d, 9c, 10c, and 11e)		30,098.	46,522.
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		43,541,952.	46,258,283.
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)	20,447,378.	22,308,506.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	16b Total fundraising expenses (Part IX, column (D), line 25)	1,132,165.	
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	16,455,156.	16,395,591.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	36,902,534.	38,704,097.	
19 Revenue less expenses. Subtract line 18 from line 12	6,639,418.	7,554,186.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 129,763,715.	End of Year 128,546,025.
	21 Total liabilities (Part X, line 26)	14,720,366.	13,572,747.
	22 Net assets or fund balances. Subtract line 21 from line 20	115,043,349.	114,973,278.

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
	Firm's name MAHER DUESSEL, CPA'S	Date
	Firm's address 503 MARTINDALE STREET, SUITE 600 PITTSBURGH, PA 15212	Check if self-employed <input type="checkbox"/> PTIN P01360302
		Firm's EIN 25-1622758
		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

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
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2022

Open to Public Inspection

A For the 2022 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 \$ 46,970,347.
	F Name and address of principal officer: Mr. Andrew Medlar 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.		
	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	35
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	35
	5	Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	489
	6	Total number of volunteers (estimate if necessary)	6	157
	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 42,101,718.	Current Year 45,743,965.
	9	Program service revenue (Part VIII, line 2g)	155,973.	103,530.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,254,163.	364,266.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	30,098.	46,522.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	43,541,952.	46,258,283.
	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)	20,447,378.	22,308,506.
16a		Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
16b		Total fundraising expenses (Part IX, column (D), line 25)	1,132,165.	
17		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	16,455,156.	16,395,591.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	36,902,534.	38,704,097.	
19	Revenue less expenses. Subtract line 18 from line 12	6,639,418.	7,554,186.	
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year 129,763,715.	End of Year 128,546,025.
	21	Total liabilities (Part X, line 26)	14,720,366.	13,572,747.
	22	Net assets or fund balances. Subtract line 21 from line 20	115,043,349.	114,973,278.

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 <small>Type or print name and title</small>			
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

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
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2022
Open to Public Inspection

A For the 2022 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 \$ 46,970,347.
	F Name and address of principal officer: Mr. Andrew Medlar 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

	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	35
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	35
	5 Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	489
	6 Total number of volunteers (estimate if necessary)	6	157
	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
9 Program service revenue (Part VIII, line 2g)		42,101,718.	45,743,965.
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		155,973.	103,530.
11 Other revenue (Part VIII, column (A), lines 5, 6d, 9c, 10c, and 11e)		1,254,163.	364,266.
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		30,098.	46,522.
		43,541,952.	46,258,283.
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)	20,447,378.	22,308,506.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	16b Total fundraising expenses (Part IX, column (D), line 25)	1,132,165.	
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	16,455,156.	16,395,591.
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19 Revenue less expenses. Subtract line 18 from line 12	6,639,418.	7,554,186.	
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)	129,763,715.	128,546,025.
	22 Net assets or fund balances. Subtract line 21 from line 20	14,720,366.	13,572,747.
		115,043,349.	114,973,278.

Part II Signature Block

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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
	Firm's name MAHER DUESSEL, CPA'S	Date
	Firm's address 503 MARTINDALE STREET, SUITE 600 PITTSBURGH, PA 15212	Check if self-employed <input type="checkbox"/> PTIN P01360302
		Firm's EIN 25-1622758
		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

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
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2022

Open to Public Inspection

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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 \$ 46,970,347.
	F Name and address of principal officer: Mr. Andrew Medlar 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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	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	43,541,952.	46,258,283.
	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.
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Sign Here	Signature of officer	Date			
	Ms. Linda Barsevich, Director of Finance & Admin				
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

Department of the Treasury
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2022
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	Doing business as		E Telephone number 412-622-3104
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H(c) Group exemption number			

Part I Summary

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22		115,043,349.	114,973,278.	

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

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

Department of the Treasury
Internal Revenue Service

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2022
Open to Public Inspection

A For the 2022 calendar year, or tax year beginning _____ and ending _____

B Check if applicable:	C Name of organization Carnegie Library of Pittsburgh	D Employer identification number 25-0965281
<input type="checkbox"/> Address change	Doing business as	E Telephone number 412-622-3104
<input type="checkbox"/> Name change	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 4400 Forbes Avenue	
<input type="checkbox"/> Initial return	City or town, state or province, country, and ZIP or foreign postal code Pittsburgh, PA 15213	G Gross receipts \$ 46,970,347.
<input type="checkbox"/> Final return/terminated	F Name and address of principal officer: Mr. Andrew Medlar same as C above	H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> Amended return		H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Application pending	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	If "No," attach a list. See instructions
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	35
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	35
	5 Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	489
	6 Total number of volunteers (estimate if necessary)	6	157
	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 42,101,718.
9 Program service revenue (Part VIII, line 2g)		155,973.	103,530.
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		1,254,163.	364,266.
11 Other revenue (Part VIII, column (A), lines 5, 6d, 9c, 10c, and 11e)		30,098.	46,522.
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		43,541,952.	46,258,283.
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)	20,447,378.	22,308,506.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	16b Total fundraising expenses (Part IX, column (D), line 25)	1,132,165.	
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	16,455,156.	16,395,591.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	36,902,534.	38,704,097.	
19 Revenue less expenses. Subtract line 18 from line 12	6,639,418.	7,554,186.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 129,763,715.	End of Year 128,546,025.
	21 Total liabilities (Part X, line 26)	14,720,366.	13,572,747.
	22 Net assets or fund balances. Subtract line 21 from line 20	115,043,349.	114,973,278.

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
	Firm's name MAHER DUESSEL, CPA'S	Date
	Firm's address 503 MARTINDALE STREET, SUITE 600 PITTSBURGH, PA 15212	Check if self-employed <input type="checkbox"/> PTIN P01360302
		Firm's EIN 25-1622758
		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

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990 for instructions and the latest information.

2022
Open to Public Inspection

A For the 2022 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 \$ 46,970,347.
	F Name and address of principal officer: Mr. Andrew Medlar 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

	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	35
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	35
	5 Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	489
	6 Total number of volunteers (estimate if necessary)	6	157
	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 42,101,718.
9 Program service revenue (Part VIII, line 2g)		155,973.	103,530.
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		1,254,163.	364,266.
11 Other revenue (Part VIII, column (A), lines 5, 6d, 9c, 10c, and 11e)		30,098.	46,522.
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		43,541,952.	46,258,283.
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)	20,447,378.	22,308,506.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	16b Total fundraising expenses (Part IX, column (D), line 25)	1,132,165.	
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	16,455,156.	16,395,591.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	36,902,534.	38,704,097.	
19 Revenue less expenses. Subtract line 18 from line 12	6,639,418.	7,554,186.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 129,763,715.	End of Year 128,546,025.
	21 Total liabilities (Part X, line 26)	14,720,366.	13,572,747.
	22 Net assets or fund balances. Subtract line 21 from line 20	115,043,349.	114,973,278.

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
	Firm's name MAHER DUESSEL, CPA'S	Date
	Firm's address 503 MARTINDALE STREET, SUITE 600 PITTSBURGH, PA 15212	Check if self-employed <input type="checkbox"/> PTIN P01360302
		Firm's EIN 25-1622758
		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

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990 for instructions and the latest information.

2022
Open to Public Inspection

A For the 2022 calendar year, or tax year beginning _____ and ending _____

B Check if applicable:	C Name of organization Carnegie Library of Pittsburgh	D Employer identification number 25-0965281
<input type="checkbox"/> Address change	Doing business as	E Telephone number 412-622-3104
<input type="checkbox"/> Name change	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 4400 Forbes Avenue	
<input type="checkbox"/> Initial return	City or town, state or province, country, and ZIP or foreign postal code Pittsburgh, PA 15213	G Gross receipts \$ 46,970,347.
<input type="checkbox"/> Final return/terminated	F Name and address of principal officer: Mr. Andrew Medlar same as C above	H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> Amended return		H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Application pending	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	If "No," attach a list. See instructions
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.		
3	Number of voting members of the governing body (Part VI, line 1a)	3	35
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	35
5	Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	489
6	Total number of volunteers (estimate if necessary)	6	157
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)	42,101,718.	45,743,965.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	155,973.	103,530.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,254,163.	364,266.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	30,098.	46,522.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	43,541,952.	46,258,283.
	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)	0.	0.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	20,447,378.	22,308,506.
	b Total fundraising expenses (Part IX, column (D), line 25)	0.	0.
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,132,165.	16,455,156.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	16,455,156.	16,395,591.	
19 Revenue less expenses. Subtract line 18 from line 12	36,902,534.	38,704,097.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	6,639,418.	7,554,186.
	21 Total liabilities (Part X, line 26)	Beginning of Current Year	End of Year
	22 Net assets or fund balances. Subtract line 21 from line 20	129,763,715.	128,546,025.
		14,720,366.	13,572,747.
		115,043,349.	114,973,278.

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	Check if self-employed <input type="checkbox"/>	PTIN P01360302
	Firm's address 503 MARTINDALE STREET, SUITE 600 PITTSBURGH, PA 15212	Firm's EIN 25-1622758	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

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990 for instructions and the latest information.

2022
Open to Public Inspection

A For the 2022 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		G Gross receipts \$ 46,970,347.
	City or town, state or province, country, and ZIP or foreign postal code Pittsburgh, PA 15213		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	F Name and address of principal officer: Mr. Andrew Medlar same as C above		H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No
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

	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	35
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	35
	5 Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	489
	6 Total number of volunteers (estimate if necessary)	6	157
	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
9 Program service revenue (Part VIII, line 2g)		42,101,718.	45,743,965.
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		155,973.	103,530.
11 Other revenue (Part VIII, column (A), lines 5, 6d, 9c, 10c, and 11e)		1,254,163.	364,266.
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		30,098.	46,522.
		43,541,952.	46,258,283.
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)	20,447,378.	22,308,506.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	16b Total fundraising expenses (Part IX, column (D), line 25)	1,132,165.	
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	16,455,156.	16,395,591.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	36,902,534.	38,704,097.	
19 Revenue less expenses. Subtract line 18 from line 12	6,639,418.	7,554,186.	
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)	129,763,715.	128,546,025.
	22 Net assets or fund balances. Subtract line 21 from line 20	14,720,366.	13,572,747.
		115,043,349.	114,973,278.

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 if self-employed <input type="checkbox"/> 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

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
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2022
Open to Public Inspection

A For the 2022 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 \$ 46,970,347.
	F Name and address of principal officer: Mr. Andrew Medlar 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

	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	35
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	35
	5 Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	489
	6 Total number of volunteers (estimate if necessary)	6	157
	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 42,101,718.
9 Program service revenue (Part VIII, line 2g)		155,973.	103,530.
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		1,254,163.	364,266.
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12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		43,541,952.	46,258,283.
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)	20,447,378.	22,308,506.
	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	6,639,418.	7,554,186.	
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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
	Firm's name MAHER DUESSEL, CPA'S	Date
	Firm's address 503 MARTINDALE STREET, SUITE 600 PITTSBURGH, PA 15212	Check if self-employed <input type="checkbox"/> PTIN P01360302
	Firm's EIN 25-1622758	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

Department of the Treasury
Internal Revenue Service

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2022
Open to Public Inspection

A For the 2022 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 \$ 46,970,347.
	F Name and address of principal officer: Mr. Andrew Medlar 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

	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	35
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	Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year
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12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		30,098.	46,522.
		43,541,952.	46,258,283.
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)	20,447,378.	22,308,506.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	16b Total fundraising expenses (Part IX, column (D), line 25)	1,132,165.	
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	16,455,156.	16,395,591.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	36,902,534.	38,704,097.	
19 Revenue less expenses. Subtract line 18 from line 12	6,639,418.	7,554,186.	
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)	129,763,715.	128,546,025.
	22 Net assets or fund balances. Subtract line 21 from line 20	14,720,366.	13,572,747.
		115,043,349.	114,973,278.

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
	Firm's name MAHER DUESSEL, CPA'S	Date
	Firm's address 503 MARTINDALE STREET, SUITE 600 PITTSBURGH, PA 15212	Check if self-employed <input type="checkbox"/> PTIN P01360302
		Firm's EIN 25-1622758
		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

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990 for instructions and the latest information.

2022
Open to Public Inspection

A For the 2022 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 \$ 46,970,347.
	F Name and address of principal officer: Mr. Andrew Medlar 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 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	
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	35
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	35
	5	Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	489
	6	Total number of volunteers (estimate if necessary)	6	157
	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 42,101,718.	Current Year 45,743,965.
	9	Program service revenue (Part VIII, line 2g)	155,973.	103,530.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,254,163.	364,266.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 9c, 10c, and 11e)	30,098.	46,522.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	43,541,952.	46,258,283.
	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)	20,447,378.	22,308,506.
16a		Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
16b		Total fundraising expenses (Part IX, column (D), line 25)	1,132,165.	
17		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	16,455,156.	16,395,591.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	36,902,534.	38,704,097.	
19	Revenue less expenses. Subtract line 18 from line 12	6,639,418.	7,554,186.	
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year 129,763,715.	End of Year 128,546,025.
	21	Total liabilities (Part X, line 26)	14,720,366.	13,572,747.
	22	Net assets or fund balances. Subtract line 21 from line 20	115,043,349.	114,973,278.

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

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

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990 for instructions and the latest information.

2022

Open to Public Inspection

A For the 2022 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 \$ 46,970,347.
	F Name and address of principal officer: Mr. Andrew Medlar 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

	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	35
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	35
	5 Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	489
	6 Total number of volunteers (estimate if necessary)	6	157
	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)	42,101,718.
9 Program service revenue (Part VIII, line 2g)		155,973.	103,530.
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		1,254,163.	364,266.
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		30,098.	46,522.
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		43,541,952.	46,258,283.
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)	20,447,378.	22,308,506.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	16b Total fundraising expenses (Part IX, column (D), line 25)	1,132,165.	
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	16,455,156.	16,395,591.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	36,902,534.	38,704,097.	
19 Revenue less expenses. Subtract line 18 from line 12	6,639,418.	7,554,186.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	129,763,715.	128,546,025.
	21 Total liabilities (Part X, line 26)	14,720,366.	13,572,747.
	22 Net assets or fund balances. Subtract line 21 from line 20	115,043,349.	114,973,278.

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 if self-employed <input type="checkbox"/> 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

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
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2022

Open to Public Inspection

A For the 2022 calendar year, or tax year beginning _____ and ending _____

B Check if applicable:	C Name of organization Carnegie Library of Pittsburgh	D Employer identification number 25-0965281
<input type="checkbox"/> Address change	Doing business as	E Telephone number 412-622-3104
<input type="checkbox"/> Name change	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 4400 Forbes Avenue	
<input type="checkbox"/> Initial return	City or town, state or province, country, and ZIP or foreign postal code Pittsburgh, PA 15213	G Gross receipts \$ 46,970,347.
<input type="checkbox"/> Final return/terminated	F Name and address of principal officer: Mr. Andrew Medlar same as C above	H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> Amended return		H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Application pending	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	If "No," attach a list. See instructions
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

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Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	42,101,718.	45,743,965.
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	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)	0.	0.
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	21 Total liabilities (Part X, line 26)	Beginning of Current Year	End of Year
	22 Net assets or fund balances. Subtract line 21 from line 20	129,763,715.	128,546,025.
		14,720,366.	13,572,747.
		115,043,349.	114,973,278.

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

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