# (Rev. January 2020) Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

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

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

Open to Public Inspection

<u>A</u>	or the	: 2019 calendar year, or tax year beginning  ししし	ending J	<u>UN 30, 2020</u>					
В	Check if applicable	C Name of organization		D Employer identifi	cation number				
	Addres	Friends and Foundation of the San							
	Name change			94-60854	52				
H	cnange Initial return		Room/suite						
F	Final return/	1630 17th St.	noon/suite	(415)626-7500					
	termin- ated			G Gross receipts \$ 3,817,186.					
	Ameno			H(a) Is this a group return					
	Application			for subordinates					
	pendin	g same as C above		H(b) Are all subordinates in					
Τ.	Гах-ехе	empt status: X 501(c)(3) 501(c) ( ) (insert no.) 4947(a)(1) o	or 527	1	list. (see instructions)				
J	Websit	e:▶ www.friendssfpl.org		H(c) Group exemptio	n number				
K	orm of	organization: X Corporation Trust Association Other	<b>L</b> Year	of formation: $1961$ $_{ m  extsf{N}}$	A State of legal domicile: CA				
Pa		Summary							
ģ	1	Briefly describe the organization's mission or most significant activities: See S	Schedu	le O					
anc	l .								
Activities & Governance		Check this box 🕨 📖 if the organization discontinued its operations or dispos	ed of more	ı					
Š				3	18				
۵		Number of independent voting members of the governing body (Part VI, line 1b) $_{\cdot\cdot}$			18				
ies		Total number of individuals employed in calendar year 2019 (Part V, line 2a)			28				
ţ		Total number of volunteers (estimate if necessary)			1373				
Ac		Total unrelated business revenue from Part VIII, column (C), line 12			0.				
	b	Net unrelated business taxable income from Form 990-T, line 39							
Revenue		Contributions and sweets (Dot VIII line 1b)	-	Prior Year 2,016,615.	Current Year 2,002,047.				
		Contributions and grants (Part VIII, line 1h)		0.	0.				
ver	1	Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3, 4, and 7d)		311,378.	189,686.				
æ		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		1,428,175.	1,021,429.				
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		3,756,168.	3,213,162.				
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		957,398.	690,655.				
		Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.				
ý		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		1,950,968.	1,887,630.				
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.				
cbe	b	Total fundraising expenses (Part IX, column (D), line 25)   393,10	02.						
Û	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		1,118,834.					
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		4,027,200.					
		Revenue less expenses. Subtract line 18 from line 12		-271,032.	-423,481.				
t Assets or lad Balances			Ве	ginning of Current Year	End of Year				
sets	20	Total assets (Part X, line 16)		7,104,701.	7,398,385.				
A As	21	Total liabilities (Part X, line 26)		304,521.	291,218.				
Net		Net assets or fund balances. Subtract line 21 from line 20		6,800,180.	7,107,167.				
		Signature Block							
	-	Ities of perjury, I declare that I have examined this return, including accompanying schedules			y knowledge and belief, it is				
true	, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of wh	ich preparer	nas any knowledge.					
0:		Signature of officer		I Date					
Sig		Bob Daffeh, Dir. of Finance & Admin.		Duto					
Hei	e	Type or print name and title							
		Print/Type preparer's name Preparer's signature	11	Date Check	PTIN				
Pai	d l	Sean E. Cain, CPA		if					
	parer	Firm's name Harrington Group, CPAs, LLP		self-employ Firm's EIN ▶	95-4557617				
	Only	Firm's address 234 East Colorado Blvd., Suite M	<b>4150</b>	TIIII 3 LIIV					
	,	Pasadena, CA 91101	<del>-</del>	Phone no. (6	26) 403-6801				
Mar	, tha IE	RS discuss this return with the preparer shown above? (see instructions)		1	X Ves No				

Pai	t III   Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	See Schedule O
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code: ) (Expenses \$ 1,144,963. including grants of \$ 690,655. ) (Revenue \$ )
	Library Support:
	Friends has an annual direct support program that funds various library
	programs, resources and equipment. As a community foundation, Friends
	awards support to the San Francisco Public Library (SFPL) for
	innovative, free programs and services that are open to everyone across
	San Francisco in the areas of: children and teens, neighborhood
	branches, arts and culture, exhibitions, careers and job support ESL
	and new immigration support, technology and media learning, remote
	outreach (bookmobiles), and special collections and infrastructure
	support for affinity centers throughout the Main Library. Examples of
	popular programs that rely almost exclusively on Friends' support are
	One City One Book, the Summer Stride Reading and STEM Program, Tricycle
4b	(Code:) (Expenses \$1, 411, 241. including grants of \$) (Revenue \$1, 021, 321. )
	Community Program:
	Through ongoing efforts to support the library, Friends connects
	readers with books and authors. Each year, through its Community Book
	Program, ("CBP"), Friends takes in over one million (1,000,000),
	donated books and media, which it in turn resells to the public through
	two bookstores, online sales and a number of specialty book sales
	(including some of the largest book sales on the West Coast). The SFPL
	also selectively acquires rare books from Friends that enhance the
	SFPL's collections. Many books are also donated to schools and other
	non-profit organizations.
	This fines were the second when her her has been been as Deales
	This fiscal year, Friends re-engineered what has been known as Books
4c	(Code:) (Expenses \$ $276,715 \cdot $ including grants of \$) (Revenue \$)
	Friends continues the tradition of active and vocal support to ensure
	excellence in library services for all users. Friends' long and
	successful track record includes its critical role in passing four
	ballot measures over the last 30 years. Through its advocacy efforts,
	Friends helped pass a \$106 million bond measure to build and refurbish
	24 neighborhood branch libraries city-wide (2000, Prop A), championing the Library Preservation Fund, ensuring increased library hours,
	services and budget (1994, Prop E); spearheading the legislative
	campaign to build a \$109.5 million new Main Library (1988, Prop A) and
	securing over \$9.7 million in state funding. Most recently, Friends
	helped pass a measure that will bring in over \$1.2 billion to the
	Other program services (Describe on Schedule O.)
	(Expenses \$ 143,024 • including grants of \$ ) (Revenue \$ )  Total program service expenses \$ 2.975.943.
40	Total program service expenses \( \times \) \( \Lambda  \forall \) \( \Lambda  \forall \) \( \Lambda  \forall  \forall \) \( \Lambda  \forall  \forall

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			37
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments		v	
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
_	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	44.	Х	
b	Part VI  Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	11a	21	
D	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
_	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	110		
·	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in	110		
<u> </u>	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			7,
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			v
40	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	40		v
17	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	17		
10	1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	10		
	complete Schedule G, Part III	19		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	

94-6085452

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete		37	
	Schedule J	23	Х	
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
		24a		x
h	Schedule K. If "No," go to line 25a	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
<b>2</b> 5a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			X
07	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		Α.
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III.	27		x
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			7.7
•	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Α.
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	32		x
33	Schedule N, Part II  Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		- 25
33	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		х
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			\ <sub>3,7</sub>
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	20	Х	
Pa	Note: All Form 990 filers are required to complete Schedule 0 rt V Statements Regarding Other IRS Filings and Tax Compliance	38	21	<u> </u>
. u	Check if Schedule O contains a response or note to any line in this Part V			
	Should be sometime a response of note to any line in the rate v		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 143			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	

Form 990 (2019)

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

				Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,				
	filed for the calendar year ending with or within the year covered by this return 2	a 28			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns'	)	2b	Х	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)				
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?		За		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other aut	nority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account	ount)?	4a		X
b	If "Yes," enter the name of the foreign country				
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Access	ounts (FBAR).			
5а	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? $\dots$		5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction		5b		X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization have annual gross receipts than \$100,000, and did the organization have annual gross receipts than \$100,000, and did the organization have annual gross receipts than \$100,000, and did the organization have annual gross receipts than \$100,000, and did the organization have a superior or the organization have a superior or the organization have a superior or the organization of the organization had been declared by the organization of the organization had been declared by the organization of the organization of the organization had been declared by the organization of	rganization solicit			٦,
	any contributions that were not tax deductible as charitable contributions?		6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribution		۱		
_	were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c).	a provided to the payor?			х
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and service				
	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was to file Form 8282?	equired	7c		x
ч	to file Form 8282?  If "Yes," indicate the number of Forms 8282 filed during the year 7		70		1
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit confidence of the		7e		х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract		7 <del>f</del>		X
	If the organization received a contribution of qualified intellectual property, did the organization file Form		7g	N/	A
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization		7h	N/	
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by				
	sponsoring organization have excess business holdings at any time during the year?	1NT / 7N	8		
9	Sponsoring organizations maintaining donor advised funds.				
а	Did the sponsoring organization make any taxable distributions under section 4966?		9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	N/A	9b		
10	Section 501(c)(7) organizations. Enter:				
а	Initiation fees and capital contributions included on Part VIII, line 12 N/A 10	a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	b			
11	Section 501(c)(12) organizations. Enter:	1			
	Gross income from members or shareholders N/A 1	a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against				
	amounts due or received from them.)		40		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 10		12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	D			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.  Is the organization licensed to issue qualified health plans in more than one state?	N/A	13a		
а	Note: See the instructions for additional information the organization must report on Schedule O.		ISa		
h	Enter the amount of reserves the organization is required to maintain by the states in which the				
	organization is licensed to issue qualified health plans	h l			
c	Enter the amount of reserves on hand				
	Did the organization receive any payments for indoor tanning services during the tax year?		14a		Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule C		14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remunerat				
	excess parachute payment(s) during the year?		15		Х
	If "Yes," see instructions and file Form 4720, Schedule N.				
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment in	come?	16		Х
	If "Yes," complete Form 4720, Schedule O.				

Francisco Public Library

94-6085452 Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI					X		
Sec	tion A. Governing Body and Management							
			4.0		Yes	No		
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	18					
	If there are material differences in voting rights among members of the governing body, or if the governing							
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.		1.0					
b	Enter the number of voting members included on line 1a, above, who are independent	1b	18					
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationsh							
	officer, director, trustee, or key employee?			2		X		
3	Did the organization delegate control over management duties customarily performed by or under the							
	of officers, directors, trustees, or key employees to a management company or other person? $\dots$			3		X		
4	$\label{eq:decomposition} \mbox{Did the organization make any significant changes to its governing documents since the prior Form}$			4		X		
5	Did the organization become aware during the year of a significant diversion of the organization's as			5		Х		
6	Did the organization have members or stockholders?			6		Х		
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a							
	more members of the governing body?			7a		X		
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,							
	persons other than the governing body?			7b		X		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year							
а	The governing body?			8a	<u> </u>			
b	Each committee with authority to act on behalf of the governing body?			8b	X			
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be real			9		Х		
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O							
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal F	evenue Code.)						
			ı	10a	Yes	No X		
	Da Did the organization have local chapters, branches, or affiliates?							
b	<b>b</b> If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,							
	and branches to ensure their operations are consistent with the organization's exempt purposes?							
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?							
	<b>b</b> Describe in Schedule O the process, if any, used by the organization to review this Form 990.							
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	X			
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give risk			12b	Λ			
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y			40-	Х			
40	in Schedule O how this was done			12c	X			
13	Did the organization have a written whistleblower policy?			13	X			
14	Did the organization have a written document retention and destruction policy?			14	72			
15	Did the process for determining compensation of the following persons include a review and approve		ι					
_	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			45.0	Х			
	The organization's CEO, Executive Director, or top management official  Other officers or key employees of the organization			15a 15b	X			
D	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			JJD	-2			
162	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ment with a						
ioa	taxable entity during the year?			16a		х		
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate			IOa				
b	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization of evaluation and take steps to safeguard the organization of evaluation and take steps to safeguard the organization of evaluation and take steps to safeguard the organization of evaluation points are steps to safeguard the organization of evaluation points are steps to safeguard the organization of evaluation points are steps to safeguard the organization of evaluation points are steps to safeguard the organization of evaluation points are steps to safeguard the organization of evaluation points are steps to safeguard the organization of evaluation points are steps to safeguard the organization of evaluation points are steps to safeguard the organization of evaluation points are steps to safeguard the organization of evaluation points are steps to safeguard the organization of evaluation points are steps to safeguard the organization of evaluation points are steps to safeguard the organization of evaluation points are steps to safeguard the organization of evaluation points are steps to safeguard the organization of evaluation of evaluat		'					
	exempt status with respect to such arrangements?			16b				
Sec	Section C. Disclosure							
17	List the states with which a copy of this Form 990 is required to be filed ▶CA							
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, a	nd 990-T (Section	501(c)(3)	s only	) avail	able		
	for public inspection. Indicate how you made these available. Check all that apply.		(5)(5)	y	, 📶			
		on Schedule O)						
19								
	statements available to the public during the tax year.		,,,					
20	State the name, address, and telephone number of the person who possesses the organization's bo	ooks and records	<b>•</b>					
-	The Organization - (415)626-7500		-					
	1630 17th St., San Francisco, CA 94107							

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

**Employees, and Independent Contractors** Check if Schedule O contains a response or note to any line in this Part VII

94-6085452

Page 7

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See instructions for the order in which to list the persons above.

Form 990 (2019)

Check this box if neither the organization n		orga I	aniza			mpei	nsat	•		<b>(E)</b>
<b>(A)</b> Name and title	(B)		(C) Position		(D)	(E)	(F)			
Name and title	Average hours per		(do not check more than one box, unless person is both an		Reportable compensation	Reportable compensation	Estimated amount of			
	week		officer and a director/trustee)		from	from related	other			
	(list any	ctor			the	organizations	compensation			
	hours for	r dire				ted		organization	(W-2/1099-MISC)	from the
	related	stee c	rustee			ensa		(W-2/1099-MISC)		organization
	organizations	lal tru	onal t		oloyee	comb				and related
	below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) David Stringer-Calvert	1.00	드	드	0	3	王吉	2			
Chair		x		х				0.	0.	0.
(2) Elizabeth Kelly	1.00							•	•	•
Vice Chair		х		x				0.	0.	0.
(3) Kathy Bella	1.00							-		<del>-</del>
Secretary (Start 1/20)		Х		х				0.	0.	0.
(4) Jay Auslander	1.00									
Sec./Board Member(Transition 1/20)		Х						0.	0.	0.
(5) Gabrielle Bozmarova	1.00									
Treasurer (Start 1/20)		Х		Х				0.	0.	0.
(6) Tyrone Cannon	1.00									
Treas./Board Member(Transition 1/20)		Х						0.	0.	0.
(7) Gina Baleria	1.00							_	_	_
Board Member		Х						0.	0.	0.
(8) Aurin Bhattacharjee	1.00									
Board Member	1 00	Х						0.	0.	0.
(9) Matt Bissinger	1.00	١								•
Board Member	1 00	Х						0.	0.	0.
(10) Judith Chi	1.00	,,							_	0
Board Member	1 00	Х						0.	0.	0.
(11) Betsy Klein	1.00	<b>.</b> ,							_	0
Board Member	1.00	Х						0.	0.	0.
(12) Reese Aaron Isbell Board Member	1.00	x						0.	0.	0.
(13) Sarah Ives	1.00	^						0.	0.	0.
Board Member (Start 1/20)	1.00	X						0.	0.	0.
(14) Catherine King	1.00							0.	0.	
Board Member (End 10/19)	1.00	X						0.	0.	0.
(15) Sarah Jones	1.00							0.	•	•
Board Member	<del></del>	x						0.	0.	0.
(16) Daphne Li	1.00									
Board Member		x						0.	0.	0.
(17) Ashley Nutter	1.00									
Board Member		Х		l		1		0.	0.	0.

Form **990** (2019) 932007 01-20-20

94-6085452 Pa

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)													
(A)	(B)			•	C) ition	,		(D)	(E)		_	(F)	
Name and title	Average hours per	(do not check more than one				than		Reportable	Reportable	Estimated			
	week	box, unless person is both an officer and a director/trustee)					compensation from	compensation from related			nount other		
	I —							the	organizations			pensa	
	hours for	direct				P		organization	(W-2/1099-MISC	a		om th	
	related	ee or	stee			nsate		(W-2/1099-MISC)	(** = 2 ********************************	′		anizat	
	organizations	Individual trustee or director	Institutional trustee		yee	ompe					and	d relat	ted
	below	vidua	tutior	Je.	Key employee	nest c loyee	ner				orga	anizati	ions
	line)	Indi	Insti	Officer	Keye	Highest compensated employee	Former			$\Box$			
(18) Sapna Satagopan	1.00							_					
Board Member		Х						0.	(	0.			0.
(19) Michael Warr	1.00							_					
Board Member		Х						0.	(	0.			0.
(20) Marie Ciepiela	35.00												
Executive Director				Х				149,843.	(	0.	2	8,7	13.
(21) Bob Daffeh	35.00												
Dir. of Finance & Admin.				Х				135,384.	(	0.	2	7,8	81.
(22) Craig Palmer	35.00												
Director of Development						X		135,945.	(	0.	2	7,7	87.
(23) Byron J Spooner	35.00									コ			
Literary Director		1				X		111,151.	(	0.	1	3,1	82.
										ヿ			
		1											
										ヿ			
		1											
										ヿ			
		•											
1b Subtotal	I					<u> </u>		532,323.	(	0.	9	7.5	63.
c Total from continuation sheets to Part V								0.	(	0.			0.
d Total (add lines 1b and 1c)								532,323.	(	0.	9	7,5	63.
2 Total number of individuals (including but n							no r	eceived more than \$100	0.000 of reportable				
compensation from the organization						-,		• • • • • • • • • • • • • • • • • • • •	,				4
												Yes	No
3 Did the organization list any <b>former</b> officer,	director, trust	ee. I	cev e	emp	love	e. o	r hic	nhest compensated emr	lovee on				
line 1a? If "Yes," complete Schedule J for s											3		Х
4 For any individual listed on line 1a, is the su										"			
and related organizations greater than \$15										- 1	4	Х	
5 Did any person listed on line 1a receive or a										"	-		
rendered to the organization? If "Yes," com	=				-			iod organization or man	addi for convicce	- 1	5		Х
Section B. Independent Contractors	piete ceriodar	<del></del>	0, 00	3011	<i>p</i> 0, c	3011							
Complete this table for your five highest co	mpensated in	dene	ende	ent c	onti	racto	ors t	that received more than	\$100,000 of comp	ens:	ation f	rom	
the organization. Report compensation for	-	-							· · · · · · · · · · · · · · · · · · ·	51100			
(A)	ino caloridar y	-	orran	<u>g</u> .	*****	0, 11	Ī	(B)	, , , ,		(C	:)	
Name and business	address	NO	INC	3				Description of s	ervices	Co	omper		n
							$\neg$						
							$\dashv$						
							$\dashv$						
							$\dashv$						
2 Total number of independent contractors (i	ncluding but n	ot li	mite	d to	tho	se li	l	d above) who received m	ore than				
\$100,000 of compensation from the organi		. J C 111		J 10		0	ردور	a abovo, willo i dodived ii	.5.5 (1)(1)				
w 100,000 of compensation from the organi	Lation											000	2010)

Form 990 (2019)

Part VIII Statement of Revenue

		Check if Schedule O contains a response of	or note to any lin	e in this Part VIII			
				(A)	(B)	(C)	<b>(D)</b> Revenue excluded
				Total revenue	Related or exempt function revenue	Unrelated business revenue	
							sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns <b>1a</b>					
Gra	k	Membership dues 1b					
Ar.	(	Fundraising events1c					
ia i	(	d Related organizations 1d					
ns,	•	Government grants (contributions) 1e	35,206.				
e ë	f	All other contributions, gifts, grants, and					
호美		similar amounts not included above <b>1f</b>	1,966,841.				
gg	ç	Noncash contributions included in lines 1a-1f 1g \$	150,036.				
<u>a</u> <u>ö</u>	ŀ	Total. Add lines 1a-1f	<b></b>	2,002,047.			
			Business Code				
8	2 8	ı					
eZ e	k	·					
n S	(						
Zev Sev	(	d					
Program Service Revenue	•						
<u> </u>	f	All other program service revenue					
	9						
	3	Investment income (including dividends, interes					
		other similar amounts)	T T	129,423.			129,423.
	4	Income from investment of tax-exempt bond pr	roceeds 🕨				
	5	Royalties					
		(i) Real	(ii) Personal				
	6 a	Gross rents 6a					
	k	Less: rental expenses 6b					
	(	Rental income or (loss) 6c					
	(	Net rental income or (loss)	▶				
	7 a	Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory 7a 588,160.					
	k	Less: cost or other basis					
une		and sales expenses 7b 527,897.					
Revenue		Gain or (loss) 7c 60,263.					
Æ		Net gain or (loss)	<b></b>	60,263.			60,263.
)ther	8 8	a Gross income from fundraising events (not					
Ò		including \$ of					
		contributions reported on line 1c). See					
		Part IV, line 18 8a					
		Less: direct expenses 8b					
		Net income or (loss) from fundraising events	<b></b>				
	9 a	a Gross income from gaming activities. See					
		Part IV, line 199a					
		Less: direct expenses 9b					
		Net income or (loss) from gaming activities	<b></b>				
	10 a	a Gross sales of inventory, less returns					
			1,097,448.				
		Less: cost of goods sold10b					
$\blacksquare$		Net income or (loss) from sales of inventory		1,021,321.	1,021,321.		
sn			Business Code				
Miscellaneous Revenue		Miscellaneous	900099	108.			108.
llar /en	k	,					
Re	C						
Σ		d All other revenue					
		Total. Add lines 11a-11d		108.			
	12	Total revenue. See instructions	🕨 🛚	3,213,162.	1,021,321.	0.	189,794.

### Part IX Statement of Functional Expenses

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

3601	on 501(c)(3) and 501(c)(4) organizations must com	-	_	ompiete column (A).	
	Check if Schedule O contains a respon	nse or note to any line in (A)	this Part IX	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	690,655.	690,655.		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	262 222	005 405	00 007	46 261
	trustees, and key employees	363,883.	227,135.	90,387.	46,361.
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	4 4 5 2 2 5 2	222 554	0.0 44.0	100 006
7	Other salaries and wages	1,173,970.	902,574.	90,410.	180,986.
8	Pension plan accruals and contributions (include	05 500	01 401	0 400	2 010
	section 401(k) and 403(b) employer contributions)	27,730.	21,491.	2,420.	3,819.
9	Other employee benefits	216,204.	164,874.	21,536.	29,794.
10	Payroll taxes	105,843.	78,087.	13,405.	14,351.
11	Fees for services (nonemployees):				
а	Management	1 400		1 400	
b	•	1,488.	22 604	1,488.	4 150
С	Accounting	39,250.	33,694.	1,397.	4,159.
d	, 0				
	,	23,789.		23,789.	
f	Investment management fees	43,709.		43,109.	
g	,	80,963.	51,169.	2,794.	27,000.
	column (A) amount, list line 11g expenses on Sch O.)	66,405.	66,405.	2,794.	27,000.
12	Advertising and promotion	105,703.	78,286.	2,139.	25,278.
13	Office expenses	103,703.	70,200	2,133.	25,270.
14 15	Information technology				
16	Royalties	482,393.	453,047.	12,021.	17,325.
17	Occupancy	6,081.	5,931.	45.	105.
18	Travel  Payments of travel or entertainment expenses	0,001.	3,331,		
10	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	52,196.	49,957.	918.	1,321.
23	Insurance	19,728.	16,758.	1,216.	1,754.
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If				
	line 24è amount exceeds 10% of line 25, column (A)				
_	amount, list line 24e expenses on Schedule 0.) Repairs & maintenance	70,615.	43,224.	1,063.	26,328.
d	Rentals & equipment	49,277.	47,588.	692.	997.
n	Bank charges	47,486.	40,251.	1,731.	5,504.
d	Networking - staff dev.	6,980.	617.	5.	6,358.
_	All other expenses	6,004.	4,200.	142.	1,662.
25	Total functional expenses. Add lines 1 through 24e	3,636,643.	2,975,943.	267,598.	393,102.
26	<b>Joint costs.</b> Complete this line only if the organization	-		·	<u> </u>
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				
	0.01.00.00				Form <b>990</b> (2010)

Form 990 (2019)

Part X | Balance Sheet

Pa	πx	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X	i		
			<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing	146,582.	1	210,143.
	2	Savings and temporary cash investments		2	0.
	3	Pledges and grants receivable, net		3	432,323
	4	Accounts receivable, net		4	1,316
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
ţ	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	55,081
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 1,424,64	4.		
	b	Less: accumulated depreciation 10b 1,052,09	9. 403,352.		372,545
	11	Investments - publicly traded securities	5,782,472.	11	6,254,671
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	44,076.	15	72,306
	16	Total assets. Add lines 1 through 15 (must equal line 33)		16	7,398,385
	17	Accounts payable and accrued expenses	304,521.	17	191,218
	18	Grants payable		18	
	19	Deferred revenue	0.	19	100,000
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
es	22	Loans and other payables to any current or former officer, director,			
Liabilities		trustee, key employee, creator or founder, substantial contributor, or 35%			
iab B		controlled entity or family member of any of these persons		22	
_	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D		25	001 010
	26	Total liabilities. Add lines 17 through 25	304,521.	26	291,218.
S		Organizations that follow FASB ASC 958, check here ▶ X			
n G		and complete lines 27, 28, 32, and 33.	050 646		000 204
ala	27	Net assets without donor restrictions		27	899,384.
d B	28	Net assets with donor restrictions	5,941,534.	28	6,207,783.
בַּ		Organizations that do not follow FASB ASC 958, check here			
o.		and complete lines 29 through 33.			
)ts	29	Capital stock or trust principal, or current funds		29	
SS	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated income, or other funds	4 4 4 4 4 4 4	31	7 107 167
ž	32	Total net assets or fund balances		32	7,107,167.
	33	Total liabilities and net assets/fund balances	7,104,701.	33	7,398,385.

Pa	rt XI Reconciliation of Net Assets					_
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u> .			
			_			
1	Total revenue (must equal Part VIII, column (A), line 12)	1		3,21		
2	Total expenses (must equal Part IX, column (A), line 25)	2	3	3,63		
3	Revenue less expenses. Subtract line 2 from line 1	3		-42 5,80		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))					
5						
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9				0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	column (B))	10	7	7,10	7,1	67.
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
					Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis	٠,			
	consolidated basis, or both:					
	X Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit	,			
	review, or compilation of its financial statements and selection of an independent accountant?			2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	nedule	Ο.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Au	dit			
	Act and OMB Circular A-133?			За		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required		dit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b		

#### **SCHEDULE A**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Total

Name of the organization

## **Public Charity Status and Public Support**

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

➤ Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for instructions and the latest information. Friends and Foundation of the San

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Francisco Public Library 94-6085452 Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 X An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV. Sections A and C. its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other ì your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes No above (see instructions))

Schedule A (Form 990 or 990-EZ) 2019 Francisco Public Library

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2015 (b) 2016 (c) 2017 (d) 2018 (e) 2019 (f) Total 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 4 Total. Add lines 1 through 3 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11. column (f) 6 Public support. Subtract line 5 from line 4. Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2015 (c) 2017 (d) 2018 **(b)** 2016 (e) 2019 (f) Total 7 Amounts from line 4 8 Gross income from interest. dividends, payments received on securities loans, rents, royalties, and income from similar sources 9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 14 Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f)) 14 % 15 Public support percentage from 2018 Schedule A, Part II, line 14 15 16a 33 1/3% support test - 2019. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2018. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2019. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10% -facts-and-circumstances test - 2018. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the

Schedule A (Form 990 or 990-EZ) 2019

#### Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

	qualify under the tests listed b	elow, please comp	olete Part II.)				
	ction A. Public Support				•		
Cale	ndar year (or fiscal year beginning in) ►	<b>(a)</b> 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	1,750,750.	2,160,054.	1,553,102.	2,016,615.	2,002,047.	9,482,568.
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	1,201,891.	1,254,056.	1,336,918.	1,505,081.	1,097,448.	6,395,394.
3	Gross receipts from activities that						
_	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	2,952,641.	3,414,110.	2,890,020.	3,521,696.	3,099,495.	15,877,962.
7a	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						0.
b	Amounts included on lines 2 and 3 received from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the amount on line 13 for the year	7,056.	94,300.		88,172.		189,528.
c	: Add lines 7a and 7b	7,056.	94,300.		88,172.		189,528.
	Public support. (Subtract line 7c from line 6.)	·					15,688,434.
	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	Amounts from line 6	2,952,641.	3,414,110.	2,890,020.	3,521,696.	3,099,495.	15,877,962.
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	182,387.	155,781.	325,024.	160,909.	189,686.	1,013,787.
b	Unrelated business taxable income (less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b	182,387.	155,781.	325,024.	160,909.	189,686.	1,013,787.
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	190.	79.	99.	173.	108.	649.
13	Total support. (Add lines 9, 10c, 11, and 12.)	3,135,218.	3,569,970.	3,215,143.	3,682,778.	3,289,289.	16,892,398.
14	First five years. If the Form 990 is for	the organization's	first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3) organiz	ation,
							<u>▶□</u>
Sec	ction C. Computation of Publ	ic Support Pe	rcentage				
15	Public support percentage for 2019 (I	ine 8, column (f), d	livided by line 13,	column (f))		15	92.87 %
16	Public support percentage from 2018	Schedule A, Part	III, line 15			16	92.51 %
Sec	ction D. Computation of Inves	stment Incom	e Percentage				
17	Investment income percentage for 20	19 (line 10c, colun	nn (f), divided by li	ne 13, column (f))		17	6.00 %
18	Investment income percentage from 2	<b>2018</b> Schedule A,	Part III, line 17			18	5.50 %
19a	33 1/3% support tests - 2019. If the	organization did n	ot check the box	on line 14, and line	e 15 is more than 3	3 1/3%, and line 1	
	more than 33 1/3%, check this box as						► V
b	<b>33 1/3% support tests - 2018.</b> If the line 18 is not more than 33 1/3%, che	organization did n	ot check a box on	line 14 or line 19a	a, and line 16 is mo	ore than 33 1/3%,	
20	Private foundation. If the organization		-	· ·		-	
	and organization	u		,		adula A /Farm 000	

# Part IV | Supporting Organizations

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

#### Section A. All Supporting Organizations

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

	-		
		Yes	No
	1		
	2		
	За		
	3b		
	3c		
	4a		
	4b		
	4c		
	5a		
	5b		
	5с		
	_		
	6		
	7		
	•		
	8		
	9a		
	9b		
	9с		
	46		
	10a		
	101-		
m ^	10b 90 or 99	)O. 57	2010
יווי ש	an or as	7U-EZ	2019

Pai	t IV	Supporting Organizations (continued)			
				Yes	No
11	Has th	ne organization accepted a gift or contribution from any of the following persons?			
а	A pers	son who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below	, the governing body of a supported organization?	11a		
b	A fami	ly member of a person described in (a) above?	11b		
С	A 35%	controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Sec	tion E	3. Type I Supporting Organizations			
				Yes	No
1	Did th	e directors, trustees, or membership of one or more supported organizations have the power to			
	regula	rly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax ye	ar? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	contro	lled the organization's activities. If the organization had more than one supported organization,			
	descri	be how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organi	zations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did th	e organization operate for the benefit of any supported organization other than the supported			
	organi	zation(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part V	I how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	super	rised, or controlled the supporting organization.	2		
Sec	tion C	C. Type II Supporting Organizations			
				Yes	No
1	Were	a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trus	stees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or mai	nagement of the supporting organization was vested in the same persons that controlled or managed			
		pported organization(s).	1		
Sec	tion D	D. All Type III Supporting Organizations			
				Yes	No
1		e organization provide to each of its supported organizations, by the last day of the fifth month of the			
	-	zation's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
		ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
_	-	zation's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2		any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
		zation(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
•		ganization maintained a close and continuous working relationship with the supported organization(s).	2		
3		ison of the relationship described in (2), did the organization's supported organizations have a			
		cant voice in the organization's investment policies and in directing the use of the organization's			
		e or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's			
202		rted organizations played in this regard.  Type III Functionally Integrated Supporting Organizations	3		
1		the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions)			
' a		The organization satisfied the Activities Test. Complete line 2 below.	•		
b		The organization satisfied the Activities rest. Complete line 2 bolow.  The organization is the parent of each of its supported organizations. Complete line 3 below.			
C		The organization is the parent of each of its supported organizations. Complete <b>line o</b> seew.  The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a government entity (see insi	tructions	:)	
2		ies Test. <b>Answer (a) and (b) below.</b>	lactions	Yes	No
a		bstantially all of the organization's activities during the tax year directly further the exempt purposes of		100	110
_		pported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify</b>			
		supported organizations and explain how these activities directly furthered their exempt purposes,			
		ne organization was responsive to those supported organizations, and how the organization determined			
		nese activities constituted substantially all of its activities.	2a		
b		e activities described in (a) constitute activities that, but for the organization's involvement, one or more			
-		organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
		ns for the organization's position that its supported organization(s) would have engaged in these			
		ies but for the organization's involvement.	2b		
3		t of Supported Organizations. <b>Answer (a) and (b) below.</b>			
а		e organization have the power to regularly appoint or elect a majority of the officers, directors, or			
		es of each of the supported organizations? Provide details in Part VI.	3a		
b		e organization exercise a substantial degree of direction over the policies, programs, and activities of each			

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

# Friends and Foundation of the San

Schedule A (Form 990 or 990-EZ) 2019 Francisco Public Library

9<u>4-6085452 Page 6</u>

Pa	Type III Non-Functionally Integrated 509(a)(3) Supporting	g Orga	anizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	g trust o	n Nov. 20, 1970 (explain in	Part VI). See instructions. A
	other Type III non-functionally integrated supporting organizations must co	mplete S	Sections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
	factors (explain in detail in <b>Part VI</b> ):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
_3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions).	4		
_5_	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
_6	Multiply line 5 by .035.	6		
_7_	Recoveries of prior-year distributions	7		
_8_	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functionall	y integra	ated Type III supporting org	anization (see
	instructions).			

Schedule A (Form 990 or 990-EZ) 2019

Par	rt V   Type III Non	-Functionally Integrated 509	(a)(3) Supporting Orga	anizations <sub>(continued)</sub>	
Secti	ion D - Distributions				Current Year
1	Amounts paid to suppo	orted organizations to accomplish exe	mpt purposes		
2	Amounts paid to perfor	m activity that directly furthers exemp	ot purposes of supported		
	organizations, in excess				
3	Administrative expense				
4	Amounts paid to acquir				
5	Qualified set-aside amo				
6	Other distributions (des	scribe in <b>Part VI</b> ). See instructions.			
7	Total annual distributi	ons. Add lines 1 through 6.			
8	Distributions to attentiv	re supported organizations to which the	ne organization is responsive	e	
	(provide details in Part	VI). See instructions.			
9	Distributable amount fo	or 2019 from Section C, line 6			
10	Line 8 amount divided	by line 9 amount			
Secti	ion E - Distribution Allo	ocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1	Distributable amount fo	or 2019 from Section C, line 6			
2	Underdistributions, if a	ny, for years prior to 2019 (reason-			
	able cause required- ex	plain in <b>Part VI</b> ). See instructions.			
3	Excess distributions ca	rryover, if any, to 2019			
а	From 2014				
b	From 2015				
С	From 2016				
d	From 2017				
е	From 2018				
f	Total of lines 3a throug	h e			
g	Applied to underdistrib	utions of prior years			
h	Applied to 2019 distrib	utable amount			
i	Carryover from 2014 no	ot applied (see instructions)			
j	Remainder. Subtract lin	nes 3g, 3h, and 3i from 3f.			
4	Distributions for 2019 f	rom Section D,			
	line 7:	\$			
а	Applied to underdistrib	utions of prior years			
b	Applied to 2019 distrib	utable amount			
С	Remainder. Subtract lin	nes 4a and 4b from 4.			
5	Remaining underdistrib	utions for years prior to 2019, if			
	any. Subtract lines 3g a	and 4a from line 2. For result greater			
	than zero, explain in Pa	rt VI. See instructions.			
6	Remaining underdistrib	utions for 2019. Subtract lines 3h			
	and 4b from line 1. For	result greater than zero, explain in			
	Part VI. See instruction	IS.			
7	Excess distributions of	carryover to 2020. Add lines 3j	<u> </u>		
	and 4c.				
8	Breakdown of line 7:				
а	Excess from 2015				
b	Excess from 2016				
С	Excess from 2017				
d	Excess from 2018				
	Excess from 2019				

Schedule A (Form 990 or 990-EZ) 2019

## Friends and Foundation of the San

Schedule A (Form 990 or 990-EZ) 2019 Francisco Public Library 94-6085452 Page 8 Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

#### **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

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

Friends and Foundation of the San

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

Francisco Public Library

Employer identification number 94-6085452

Par	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Fund	s or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lin	e 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advi	ised funds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes
6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that grant funds can be	e used only
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose	e conferring
	impermissible private benefit?		Yes No
Par	t II Conservation Easements. Complete if the org	ganization answered "Yes" on Form 990,	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (for example, recrea	ation or education) Preservation o	f a historically important land area
	Protection of natural habitat	Preservation o	f a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualit	fied conservation contribution in the form	
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		
b	Total acreage restricted by conservation easements		
С	Number of conservation easements on a certified historic str		
d	Number of conservation easements included in (c) acquired		ture
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the	ne organization during the tax
	year ▶		
4	Number of states where property subject to conservation ear		
5	Does the organization have a written policy regarding the per		
_	violations, and enforcement of the conservation easements i		
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing cor	nservation easements during the year
_			
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conserv	ation easements during the year
•			0(1-)(4)(D)(2)
8	Does each conservation easement reported on line 2(d) above	•	
^	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservati	•	
	balance sheet, and include, if applicable, the text of the footr	lote to the organization's linancial stater	nents that describes the
Par	organization's accounting for conservation easements.  † III Organizations Maintaining Collections or	f Δrt Historical Treasures or (	Other Similar Assets
· ui	Complete if the organization answered "Yes" on Form		other emmar 7,000to.
12	If the organization elected, as permitted under FASB ASC 95		and halance sheet works
ıu	of art, historical treasures, or other similar assets held for put	•	
	service, provide in Part XIII the text of the footnote to its final	, ,	•
h	If the organization elected, as permitted under FASB ASC 95		
-	art, historical treasures, or other similar assets held for public		
	provide the following amounts relating to these items:	o oximplicity, cadeation, or recognitivities	anoranoe or pasite service,
	(i) Revenue included on Form 990, Part VIII, line 1		<b>&gt;</b> \$
			<b>L</b> .
2	If the organization received or held works of art, historical tre		
_	the following amounts required to be reported under FASB A		g, p. 5 g
а	Revenue included on Form 990, Part VIII, line 1	_	<b>&gt;</b> \$
b	Assets included in Form 990, Part X		

# Friends and Foundation of the San

Schedule D (Form 990) 2019

Francisco Public Library

94-6085452 Page 2	2	Page	2	5	4	5	8	0	6	4 –	9
-------------------	---	------	---	---	---	---	---	---	---	-----	---

Pai	irt III   Organizations Maintaining	Collections of A	t, Historical Tr	easures, or Oth	ner Simila	ar Asse	<b>ts</b> (continue	ed)		
3	Using the organization's acquisition, acces	ssion, and other record	s, check any of the	following that make	significant	use of its				
	collection items (check all that apply):									
а	Public exhibition	d	Loan or excl	nange program						
b	Scholarly research	е	Other							
С	Preservation for future generations									
4	Provide a description of the organization's	collections and explain	n how they further th	ne organization's ex	empt purpo	se in Par	XIII.			
5	During the year, did the organization solici	t or receive donations	of art, historical trea	sures, or other simil	ar assets		_			
	to be sold to raise funds rather than to be						Yes	No_		
Pai	rt IV Escrow and Custodial Arra	_	ete if the organizatio	n answered "Yes" o	n Form 990	, Part IV,	line 9, or			
	reported an amount on Form 990, I	· · · · · · · · · · · · · · · · · · ·								
1a	Is the organization an agent, trustee, custo						7			
	on Form 990, Part X?					L	Yes	└── No		
b	If "Yes," explain the arrangement in Part X	III and complete the fo	llowing table:							
							Amount			
С	0 0									
d	<b>9</b> ,									
е	<b>5</b> ,									
f	• • • • • • • • • • • • • • • • • • • •						1,,			
	3				•		Yes	∐_ No		
	o If "Yes," explain the arrangement in Part X Irt V Endowment Funds. Complet									
Fai	Endowment i unus. Complet			(c) Two years back	1	ooro book	(a) Four v	oro book		
4.	Deginning of year balance	(a) Current year 5,364,707.	(b) Prior year 5,182,956.	5,056,498.	(d) Three y	20,215.	(e) Four ye	11,994.		
_	0 0 ,	· <del> </del>	3,102,330.	3,030,430.	±,0	20,213.	Ξ,/	11,004.		
b										
c d		- /	101,731.	120,130,		30,203.		37,137.		
	0.1									
·	and programs							28,916.		
f										
g g			5,364,707.	5,182,956,	5.0	56,498.	4.8	20,215.		
2	Provide the estimated percentage of the c				, ,	,	,	<u>,                                      </u>		
а			%	,,,						
b			_							
С	Term endowment ▶ 24.71	<del></del>								
	The percentages on lines 2a, 2b, and 2c s	— hould equal 100%.								
За	Are there endowment funds not in the pos		ation that are held a	nd administered for	the organiz	ation				
	by:						Y	es No		
	(i) Unrelated organizations						3a(i)	X		
	(ii) Related organizations							X		
b							3b			
4	Describe in Part XIII the intended uses of		wment funds.							
Pai	rt VI Land, Buildings, and Equip									
	Complete if the organization answe	red "Yes" on Form 990	), Part IV, line 11a. S	ee Form 990, Part	K, line 10.					
	Description of property	(a) Cost or o		' '	Accumulate	d	(d) Book v	alue		
		basis (investn	nent) basis	other) d	epreciation					
	Land									
	Buildings			- 200	E42 E4		2.44	752		
	1			5,322.	543,56			753.		
	I Equipment			8,229.	232,36			,866.		
	Other			1,093.	276,16	7 •		,926. ,545.		
rota	al. Add lines 1a through 1e. (Column (d) mus	t equal Form 990, Part	x, column (B), line 1	UC.)			3/4	,545.		

Schedule D (Form 990) 2019

		l Foundation o		
Schedule D (Form 990)		ublic Library	•	94-6085452 <sub>Page</sub>
	ents - Other Securities.			
	if the organization answered "Yes"			
	ity or category (including name of security)	(b) Book value	(c) Method of valuation: Cos	st or end-of-year market value
	s			
	interests			
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
	I Form 990, Part X, col. (B) line 12.) ▶			
Part VIII Investm	nents - Program Related.			
	if the organization answered "Yes"			
(a) Desci	ription of investment	(b) Book value	(c) Method of valuation: Cos	st or end-of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Col. (b) must equal	I Form 990, Part X, col. (B) line 13.) ▶			
Part IX Other A	ssets.			
Complete	if the organization answered "Yes"	on Form 990, Part IV, line	11d. See Form 990, Part X, line 1	5.
	(a)	Description		(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	t equal Form 990, Part X, col. (B) lin	ne 15.)		▶
Part X Other L	iabilities.			
Complete	if the organization answered "Yes"	on Form 990, Part IV, line	11e or 11f. See Form 990, Part X	(, line 25.
1.	(a) Description of liability			(b) Book value
(1) Federal income	taxes			
(2)				
(3)				
(4)				
(5)				
(6)	· · · · · · · · · · · · · · · · · · ·			

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) 2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII... X

(7) (8) Francisco Public Library

Ра	rt XI Reconciliation of Revenue per Audited Finan	cial Statements With	Revenue per R	eturr	1.
	Complete if the organization answered "Yes" on Form 990,	Part IV, line 12a.			
1	Total revenue, gains, and other support per audited financial states	ments		1	4,518,043.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	730,468.		
b	Donated services and use of facilities	2b	598,202.		
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines <b>2a</b> through <b>2d</b>			2e	1,328,670.
3	Subtract line 2e from line 1			3	3,189,373.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	23,789.		
b	Other (Describe in Part XIII.)	4b			
С	Add lines <b>4a</b> and <b>4b</b>			4c	23,789.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part			5	3,213,162.
Pa	irt XII Reconciliation of Expenses per Audited Final	ncial Statements Wit	h Expenses per	Retu	rn.
	Complete if the organization answered "Yes" on Form 990,				
1	Complete if the organization answered "Yes" on Form 990, Total expenses and losses per audited financial statements			1	4,211,056.
1 2	Total expenses and losses per audited financial statements  Amounts included on line 1 but not on Form 990, Part IX, line 25:			1	4,211,056.
-	Total expenses and losses per audited financial statements		598,202.	1	4,211,056.
2	Total expenses and losses per audited financial statements			1	4,211,056.
2 a	Total expenses and losses per audited financial statements	2a 2b		1	4,211,056.
2 a	Total expenses and losses per audited financial statements  Amounts included on line 1 but not on Form 990, Part IX, line 25:  Donated services and use of facilities  Prior year adjustments  Other losses	2a 2b 2c		1	
2 a b	Total expenses and losses per audited financial statements  Amounts included on line 1 but not on Form 990, Part IX, line 25:  Donated services and use of facilities  Prior year adjustments  Other losses  Other (Describe in Part XIII.)  Add lines 2a through 2d	2a 2b 2c 2d	598,202.	1 2e	598,202.
2 a b c	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	2a 2b 2c 2d	598,202.		
2 a b c	Total expenses and losses per audited financial statements  Amounts included on line 1 but not on Form 990, Part IX, line 25:  Donated services and use of facilities  Prior year adjustments  Other losses  Other (Describe in Part XIII.)  Add lines 2a through 2d	2a 2b 2c 2d	598,202.	2e	598,202.
2 a b c d e	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1:	2a   2b   2c   2d	598,202.	2e	598,202.
2 a b c d e 3	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b	2a   2b   2c   2d	598,202.	2e	598,202. 3,612,854.
2 a b c d e 3 4 a	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b	2a   2b   2c   2d	23,789.	2e	598,202. 3,612,854. 23,789.
2 a b c d e 3 4 a b c 5	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.)	2a   2b   2c   2d	23,789.	2e 3	598,202. 3,612,854.

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

### Part V, line 4:

Friends' endowment consists of five funds established for a variety of purposes and includes donor-restricted funds. Net assets associated with this endowment are classified and reported based on the existence or absence of donor-imposed restrictions.

Friends has adopted investment and spending policies for endowment assets that attempt to preserve the purchasing power of the Endowment Fund and at the same time provide a regular and growing distribution of funds for the use of Friends, consistent with the terms of the Endowment Fund Distribution Policy and the terms governing each of the individual endowment funds. A balanced approach is to be taken between risk,

Part XIII   Supplemental Information (continued)
preservation of capital, income and growth.
Part X, Line 2:
Description of Uncertain Tax Positions Under FIN 48
Friends is exempt from taxation under Internal Revenue Code Section
501(c)(3) and California Revenue and Taxation Code Section 23701d.
Generally accepted accounting principles provide accounting and disclosure
guidance about positions taken by an organization in its tax returns that
might be uncertain. Management has considered its tax positions and
believes that all of the positions taken by Friends in its federal and
state exempt organization tax returns are more likely than not to be
sustained upon examination. Friends' returns are subject to examination by
federal and state taxing authorities, generally for three and four years,
respectively, after they are filed.

#### SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

# **Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

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

OMB No. 1545-0047 **2019** 

Open to Public Inspection

rianno or ano organization	nd Founda Public L	tion of the	: San				Employer identification number $94-6085452$
Part I General Information on Grants a		<u> </u>				I	
Does the organization maintain records criteria used to award the grants or assi     Describe in Part IV the organization's pr     Part II Grants and Other Assistance to recipient that received more than	stance? ocedures for monit Domestic Organi	toring the use of grant zations and Domesti	funds in the Unite	od States.			Yes X No
(a) Name and address of organization or government	( <b>b)</b> EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
San Francisco Public Library 100 Larkin Street San Francisco, CA 94102	94-6000417		690,655.	0.			Support San Francisco Public Library and the surrounding community members.
,			,				
2 Enter total number of section 501(c)(3) a	and government or	ganizations listed in th	ne line 1 table	•		-	<b>&gt;</b>

3 Enter total number of other organizations listed in the line 1 table

Schedule I (Form 990) (2019) Francisco Publ	ic Librar	У			94-6085452	Page
Part III Grants and Other Assistance to Domestic Individual Part III can be duplicated if additional space is needed	als. Complete if the	e organization answ	rered "Yes" on Form	990, Part IV, line 22.		· ·
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash	assistance
Part IV Supplemental Information. Provide the information re	equired in Part I, lin	ne 2; Part III, columi	n (b); and any other a	dditional information.		

#### SCHEDULE J (Form 990)

**Compensation Information** 

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

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

Attach to Form 990.

► Attach to Form 990.

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

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

**Questions Regarding Compensation** 

Department of the Treasury

Internal Revenue Service

Part I

Friends and Foundation of the San Francisco Public Library

Employer identification number

94-6085452

No Yes 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax indemnification and gross-up payments Health or social club dues or initiation fees Personal services (such as maid, chauffeur, chef) Discretionary spending account b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain \_\_\_\_\_ 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a? 3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. X Compensation committee X Compensation survey or study Independent compensation consultant X Approval by the board or compensation committee Form 990 of other organizations During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization: X a Receive a severance payment or change-of-control payment? X b Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b X c Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: Х a The organization? 5a  $\overline{\mathbf{x}}$ **b** Any related organization? If "Yes" on line 5a or 5b, describe in Part III. 6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: Х a The organization? X **b** Any related organization? 6b If "Yes" on line 6a or 6b, describe in Part III. 7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III X 8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III Х If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

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

Schedule J (Form 990) 2019

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

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

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

		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation		(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)	
(A) Name and Title		(i) Base (ii) Bonus & incentive compensation		(iii) Other reportable compensation	compensation	Denents	(5)(1)-(0)	reported as deferred on prior Form 990	
(1) Marie Ciepiela	(i)	149,843.	0.	0.	4,772.	23,941.	178,556.	0.	
Executive Director	(ii)	0.	0.	0.	0.	0.	0.	0.	
(2) Bob Daffeh	(i)	135,384.	0.	0.	4,282.	23,599.			
Dir. of Finance & Admin.	(ii)	0.	0.	0.	0.	0.	0.	0.	
(3) Craig Palmer	(i)	135,945.	0.	0.	4,299.	23,488.	163,732.	0.	
Director of Development	(ii)	0.	0.	0.	0.	0.	0.	0.	
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								

Schedule J (Form 990) 2019

Schedule J (Form 990) 2019 Francisco Public Library	94-6085452 Page 3
Part III Supplemental Information	
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part III, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part III, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part III, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part III, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part III, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and 6b, 6b, 7b, 6b, 6b, 6b, 7b, 6b, 7b, 6b, 7b, 6b, 7b, 7b, 7b, 7b, 7b, 7b, 7b, 7b, 7b, 7	rt II. Also complete this part for any additional information.

#### **SCHEDULE M** (Form 990)

**Noncash Contributions** 

OMB No. 1545-0047

19

Open to Public . Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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

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

Friends and Foundation of the San Francisco Public Library

Employer identification number 94-6085452

Par	tΙ	Types	of Property							
	1			(a) Check if applicable	(b)  Number of contributions or litems contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line	(d) Method of de noncash contribu		•	s
1	۸,۲	Marks of	art		items contributed	Tomin 990, i art viii, iiile	19			
2			art treasures							
3										
			interests							
4			olications							
5			ousehold goods							
6			r vehicles							
7			nes							
8			pperty	X	1	150,03	5 FM7			
9			blicly traded			130,03	7 • II II V			
10			osely held stock							
11		interests	rtnership, LLC, or							
12			scellaneous							
13			ervation contribution -							
	Histo	oric structi	ures							
14			ervation contribution - Other							
15			esidential							
16										
17										
18										
19										
20										
21										
22			acts							
23			imens							,
24			artifacts							,
25		er 🕨 (	(							,
26	Othe	er 🕨 (								
27	Othe	er 🕨 (	)							
28	Othe	er 🕨 (	)							
29	Num	ber of For	ms 8283 received by the organi	zation durin	g the tax year for c	ontributions				
	for w	hich the c	organization completed Form 82	83, Part IV,	Donee Acknowled	gement 29				
									Yes	No
30a	Durir	ng the yea	r, did the organization receive b	y contributio	on any property rep	oorted in Part I, lines 1 th	ough 28, that it			
must hold for at least three years from the date of the initial contribution, and which isn't required to be used for										
	exempt purposes for the entire holding period?						30a		X	
<b>b</b> If "Yes," describe the arrangement in Part II.										
31	Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?						31		X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash										
	contributions?						32a		X	
b	If "Yes," describe in Part II.									
33	If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked,									
	describe in Part II.									

Friends and Foundation of the San Francisco Public Library 94-6085452 Schedule M (Form 990) 2019 Page 2 Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information. Schedule M, Part I, Column (b): The number of contributors is based on the quantity of contributors.

Schedule M (Form 990) 2019

#### SCHEDULE O

Internal Revenue Service

(Form 990 or 990-EZ) Department of the Treasury

## Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ. ► Go to www.irs.gov/Form990 for the latest information. Open to Public

OMB No. 1545-0047

Inspection

Name of the organization

Friends and Foundation of the San Francisco Public Library

Employer identification number 94-6085452

Form 990, Part I, Line 1, Description of Organization Mission: Friends of the San Francisco Public Library (Friends) is a member-supported, nonprofit organiztion that advocates, fundraises, and provides critical support for the San Francisco Public Library ("SFPL") and its mission for equitable access to resources for everyone. Friends is dedicated to creating, stewarding, and supporting one of the best libary systems in the country.

Form 990, Part III, Line 1, Description of Organization Mission: Friends supports the free public libraries of San Francisco. We provide funding and conduct advocacy and outreach to ensure that all people have equal access to the information, resources and support that our libraries provide. Friends believes that libraries are anchors for thriving neighborhoods, and that an excellent library system is critical to the health of our city.

Form 990, Part III, Line 4a, Program Service Accomplishments: Music Festival, and the publication of At the Library, a free newsletter of activities at the Main library and the 27 branches. Friends's funds also support professional development for library staff, including paying for specialized training and conferences, and grants to Librarians, to pilot new innovative services that if successful, are often expanded system wide.

Through Friends, community members express their support and aspirations for the SFPL as:

Name of the organization	Friends and Foundation of the San Francisco Public Library	Employer identification number $94-6085452$
- Persuasive	Advocates committed to a strong and respons	ive library
with reliable	public funding.	
- Engaged Cha	mpions advancing the SFPL's mission for com	munity
literacy and e	expansive free resources and opportunities for	or everyone.
- Generous in	vestors bridging the funding gap between who	at the city
provides and t	he cost of additional programs, resources as	nd services
that San Franc	iscans want and need.	
Form 990, Part	III, Line 4b, Program Service Accomplishme	nts:
Operations int	to the Book Program, embracing its activitie	s more
accurately and	l fueling its growth as a valuable community	asset that
supports the S	FPL's mission for literacy and literary eng	agement. The
Book Programs'	s four fundamental goals balance literacy as	nd a national
model for envi	ronmental responsibility. These goals are to	0:
- Increase ac	cess to low-cost books and media through mu	ltiple venues
of convenience	e and affordability.	
- Redirect fr	ee books from the traditional market to und	erserved and
low-income chi	ldren and families.	
- Promote lit	erary engagement through free literary acti	vities.
- Keep more t	han one million books and media out of land	fill and
recycling plan	ts each year.	

Employer identification number 94-6085452

Form 990, Part III, Line 4c, Program Service Accomplishments:

library by renewing the Library Preservation Fund (2007, Prop D). We

continue to work with elected officials, community groups and the

library administration to ensure a premier library system for San

Francisco.

Form 990, Part III, Line 4d, Other Program Services:

Volunteer Program:

Friends has a robust volunteer programs in which around 1,400

volunteers help sell books in the CBP, support library and Friends'

literary events, and the contribute to our library advocacy efforts by educating the public about the library preservation fund and promoting patronage of the 28 libraries.

The Lisa Brown & Daniel Handler Writer's Residency at Friends:

Made possible by the generosity of Daniel Handler and Lisa Brown, the residency is designed to provide five writers with free, adequate and accessible space in which to produce creative work, and to connect writers with the San Francisco Public Library in the course of producing and sharing their work in the community. Five resident authors now work in designated space the Friends office (the writers hive) where they have 24 hour access to the office and the amenities of a network, printers, and supplies. Residents are also connected to one branch library for the purpose of showcasing their talents and engaging directly with patrons.

Expenses \$ 143,024. including grants of \$ 0. Revenue \$ 0.

Name of the organization Friends and Foundation of the San Francisco Public Library

Employer identification number 94-6085452

Form 990, Part VI, Section B, line 11b:

The audit committee reviews and approves the Form 990 and then forwards accepted Form 990 to all board members for acceptance before it is filed.

Form 990, Part VI, Section B, Line 12c:

It is Friends of SFPL's policy that employees and board members acting on behalf of the Friends be free from conflicts of interest that could influence their judgment, objectivity or loyalty to the organization. The following policy and procedures apply. No member of the board of directors shall participate in any discussion or vote on any matter in which he or she or a member of his or her immediate family has potential conflict of interest due to having material economic involvement regarding the matter being discussed when such a situation presents itself. The director must announce his or her potential conflict, disqualify himself or herself, and be excused from the meeting until discussion is over on the matter involved. The chair of the meeting is expected to make inquiry if such conflict appears to exist and the board member has not made it known. Employees are to avoid any conflict of interest and even the appearance of a conflict of interest. Potential conflict of interest or the appearance of a conflict of interest is to be reported to the executive director or supervisor immediately.

Employees must take the following steps to avoid conflict or appearance of an impropriety:

- Request ED's approval of outside activities that may pose a real or potential conflict of interest
- Avoid personal relationship with other Friends employees where parties in the relationship may receive or give unfair advantage or preferential treatments because of relationship

Employer identification number 94-6085452

- Avoid actions or relationships that might conflict or appear to conflict with your job responsibilities or the interest of friends
- Avoid accepting gifts, money or gratuities from persons or entities

  performing or seeking to perform services under contract with the

  organization
- Avoid receiving personal honoraria for services you perform that are closely related to your work at the Friends. Obtain ED or supervisor approval for occasional honoraria
- Not use nonpublic Friends information for your personal gain or advantage or for the gain or advantage or another
- Employees are prohibited from hiring family members when they play a dual role in the decision making.

A policy acknowledgement form is reviewed and signed by board of directors, committee members, officers, staff members and certain consultants to ensure no member of the board of directors, or any of its committees, shall derive any personal profit or gain, directly or indirectly, by reason of his or her participation with the Friends of the San Francisco Public Library. Each individual shall disclose to the organization any personal interest which he or she may have in any matter pending before the organization and shall refrain from participating in any decision on such matter. Also, any member of the board, any committee, or staff who is an officer, client organization or vendor of the Friends shall identify his or her affiliation with such agency or agencies. Further, in connection with any committee or board action specifically directed to that agency, he or she shall not participate in the decision affecting that agency and the decision must be made and/or ratified by the full board. Any member of the board, any committee, staff and certain consultants shall refrain from

Name of the organization Friends and Foundation of the San Francisco Public Library

Employer identification number 94-6085452

obtaining any list of Friends' clients/members for personal or private solicitation purposes at any time during the term of their affiliation.

Form 990, Part VI, Section B, Line 15:

In reviewing and approving the compensation, the Board of Directors of

Friends through the executive/compensation committee (the Committee) will

utilize the following process:

- 1. Impartial decision makers. The compensation arrangement must be approved in advance by the committee comprising entirely of individuals who do not have a conflict of interest with respect to the compensation arrangement for executives, officers or key employees.
- 2. Comparability data. When the committee is considering compensation to executives, officers and key employees, it must rely on comparability data that demonstrate the fair market value obtained from independent source.
- 3. Documentation. The committee must document how it reached its decisions, including the data on which it relied. The terms of the compensation, the date it was approved, committee members who were present and those who voted in favor.
- 4. Conflict of interest. The committee must document any actions taken with respect to consideration of the compensation by anyone who is otherwise a member of the committee but who had a conflict of interest with respect to the decision on the compensation.

Form 990, Part VI, Section C, Line 19:

Through all public listings with the IRS, in-person inspection and copies allowed upon request from the public.