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ARMANINO^{LLP}

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Form 990
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)

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

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

AF	or the	2016 calendar year, or tax year beginning and	ending					
	heck if pplicabl	c Name of organization		D Employer identified	cation number			
X	Addre] chang	PUBLIC LIBRARY OF SCIENCE						
	Name] Chang	Doing business as		68-04	92065			
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number	r			
	Final return		225	(415)	624-1200			
	termin ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	63,114,617.			
	Amen	H(a) Is this a group re	eturn					
	Applic tion	F Name and address of principal officer: A CHARD HEWITT		for subordinates	? Yes 🗴 No			
	pendir	⁹ SAME AS C ABOVE		H(b) Are all subordinates in	cluded? Yes No			
<u>I</u> T	ax-ex	empt status: 🗴 501(c)(3) 🚺 501(c) ()◀ (insert no.) 🚺 4947(a)(1)	or 📃 527	If "No," attach a	list. (see instructions)			
		e: WWW.PLOS.ORG		H(c) Group exemption				
		organization: 🕱 Corporation 🦳 Trust 🦳 Association 🦳 Other 🕨	L Year	of formation: 2001	State of legal domicile: CA			
Pa		Summary						
a		Briefly describe the organization's mission or most significant activities: <u>COMMIT</u>	TED TO M	AKING THE WORLD'S				
Governance		SCIENTIFIC AND MEDICAL LITERATURE A PUBLIC RESOURCE.						
erne		Check this box 🕨 🛄 if the organization discontinued its operations or dispos	sed of more	than 25% of its net ass	sets.			
ove					7			
		Number of independent voting members of the governing body (Part VI, line 1b)			6			
es		Total number of individuals employed in calendar year 2016 (Part V, line 2a) \ldots			197			
iviti		Total number of volunteers (estimate if necessary)			7086			
Activities &	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		474,914.				
	b	Net unrelated business taxable income from Form 990-T, line 34	<u></u>	7b	0.			
				Prior Year	Current Year			
e		Contributions and grants (Part VIII, line 1h)		208,446.	7,215.			
Revenue		Program service revenue (Part VIII, line 2g)	42,840,366.	37,357,740.				
Sev		Investment income (Part VIII, column (A), lines 3, 4, and 7d)		136,846.	-315,917.			
_		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	332,266.	339,112.				
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		43,517,924.	37,388,150.			
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.			
		Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.			
ses		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		22,096,765.	21,911,293.			
Expenses		Professional fundraising fees (Part IX, column (A), line 11e)	0	0.	0.			
хр		Total fundraising expenses (Part IX, column (D), line 25)		20 954 020	19 109 919			
		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		20,854,930. 42,951,695.	17,127,717.			
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)			39,039,010.			
s		Revenue less expenses. Subtract line 18 from line 12		566,229.	-1,650,860.			
ts or unces	00			eginning of Current Year 36,175,974.	End of Year 34,744,489.			
Net Assets (Fund Balanc	20	Total assets (Part X, line 16)		5,530,710.	4,953,660.			
let ∕ ind	21	Total liabilities (Part X, line 26) Net assets or fund balances. Subtract line 21 from line 20		30,645,264.	29,790,829.			
ZI 22 Net assets or fund balances. Subtract line 21 from line 20 30,645,264. 29,790,8 Part II Signature Block								
		Ities of perjury, I declare that I have examined this return, including accompanying schedules	e and etatem	ents and to the best of my	knowledge and belief it is			
		t, and complete. Declaration of preparer (other than officer) is based on all information of wh			KIIOWIEUYE AIIU DEIIEI, IL IS			
uue,	COLLEC	י, מות כסווףוכני. בכטמומנוטו טו פרפאמים (טנווסו נוומו טוונכו) וא במצבע טו מו וווטרוומנוטון טו או ג	non preparei	nas any knowleuge.				

Sign	Signature of officer		Date								
Here	RICHARD HEWITT, CFO										
	Type or print name and title										
	Print/Type preparer's name	Preparer's signature 1 Date									
Paid	KATY BROWN	Ulaturgen 1	0/16/17 if p00650274								
Preparer	Firm's name 🕒 ARMANINO LLP	jac	Firm's EIN 94-6214841								
Use Only	Firm's address ▶ 12657 ALCOSTA BLVD, STE.	500									
	SAN RAMON, CA 94583-4600		Phone no.925-790-2600								
May the II	May the IRS discuss this return with the preparer shown above? (see instructions)										

632001 11-11-16 LHA For Paperwork Reduction Act Notice, see the separate instructions.



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Pa	rt III Statement of Program Service Accomplishments		X
1	Check if Schedule O contains a response or note to any line in this Part III Briefly describe the organization's mission: PLEASE SEE SCHEDULE O FOR COMPLETE DESCRIPTION OF THE ORGANIZATION'S MISSION.		<u>A</u>
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	[Yes X No
3	If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services?	F	Yes X No
4	If "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest program services, as r		
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other revenue, if any, for each program service reported.		
4a	SCIENCE AND MEDICAL PUBLISHING ARE THE CORE OF PLOS PROGRAM EXPENSE AT	e\$	36,882,826.)
	OVER \$30 MILLION. THIS PAST YEAR PLOS PUBLISHED MORE THAN 25,000 RESEARCH ARTICLES TOGETHER WITH PERSPECTIVES, ESSAYS AND EDITORIALS		
	DOCUMENTING THE OBSERVATIONS AND DISCOVERIES OF A DIVERSE SCIENTIFIC		
	COMMUNITY. A GLOBAL POOL OF MORE THAN 7,000 ACADEMIC EDITORS AND 78,000		
	REVIEWERS CONTRIBUTED TO BRINGING THIS WORK TO THE PUBLIC. THE SCOPE OF		
	PLOS JOURNALS INCLUDES PLOS ONE, THE FIRST AND LARGEST		
	MULTIDISCIPLINARY OA JOURNAL PUBLISHING ALL TECHNICALLY VALID AND		
	ETHICAL RESEARCH, REGARDLESS OF ANTICIPATED IMPACT; PLOS BIOLOGY,		
	PUBLISHING ARTICLES OF EXCEPTIONAL SIGNIFICANCE, ORIGINALITY AND		
	RELEVANCE IN ALL AREAS OF BIOLOGICAL SCIENCE, FROM MOLECULES TO		
	ECOSYSTEMS TO DATA-DRIVEN META-RESEARCH; (CONTINUED ON SCHEDULE O).		
4b	(Code:) (Expenses \$ including grants of \$) (Revenue	ie \$)
4c	(Code:) (Expenses \$ including grants of \$) (Revenue)	.e \$)
4d	Other program services (Describe in Schedule O.)		,
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses 30, 353, 347.		

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Part IV Checklist of Required Schedules

PUBLIC LIBRARY OF SCIENCE

Pa	rt IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X

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	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?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		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,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	x	X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Δ	
Ť	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		х	
40-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Δ	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	10-	х	
L	Schedule D, Parts XI and XII	12a	А	
D	Was the organization included in consolidated, independent audited financial statements for the tax year?	12b		x
13	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		x
	Is the organization a school described in section 170(b)(1)(A)(II)? <i>If "Yes," complete Schedule E</i>	14a	x	
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	1-14		
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	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			
	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		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G. Part III	19		X

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Pa	t IV Checklist of Required Schedules (continued)			U
			Yes	No
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		x
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? 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			
	Schedule J	23	х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	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		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
200	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
h	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, 6, or 22 for receivables from or payables to any current or	205		
20	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes."			
		26		x
27	<i>complete Schedule L, Part II</i> Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	20		
21	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
20	instructions for applicable filing thresholds, conditions, and exceptions):			
а		28a		x
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV			x
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	200		
U	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M			x
29 30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	23		
30	contributions? If "Yes." complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations?	30		
31		31		x
32	<i>If</i> "Yes," <i>complete Schedule N, Part I</i> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes," <i>complete</i>	31		
32		32		x
22	Schedule N, Part II	32		
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	33		x
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			x
05-	Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		
a	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	0.51		
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		<u> </u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			.
0-	If "Yes," complete Schedule R, Part V, line 2	36	<u> </u>	x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
~-	and that is treated as a partnership for federal income tax purposes? 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?		v	
	Note. All Form 990 filers are required to complete Schedule O	38	Х	

Form 990 (2016)

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Par	t V Statements Regarding Other IRS Filings and Tax Compliance							
	Check if Schedule O contains a response or note to any line in this Part V							
			Yes	No				
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 1a	.16						
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b	0						
с	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming							
	(gambling) winnings to prize winners?	. 1c	х					
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,							
24		.97						
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	_	х					
D	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)							
20			x					
	Did the organization have unrelated business gross income of \$1,000 or more during the year?		x					
	If "Yes," has it filed a Form 990-T for this year? <i>If "No," to line 3b, provide an explanation in Schedule O</i>	<u>3b</u>	А					
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a		v					
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	<u>4a</u>	X					
b	If "Yes," enter the name of the foreign country: VIITED KINGDOM	-						
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).							
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			X				
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			X				
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	<u>5</u> c						
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit							
	any contributions that were not tax deductible as charitable contributions?	. <u>6a</u>		X				
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts							
	were not tax deductible?	. 6b						
7	Organizations that may receive deductible contributions under section 170(c).							
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor	r? 7a		x				
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	. 7b						
с	c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required							
	to file Form 8282?	. 7c		x				
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d							
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			x				
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			X				
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?							
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C							
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the							
-	sponsoring organization have excess business holdings at any time during the year?	8						
9	Sponsoring organizations maintaining donor advised funds.							
a		9a						
b								
10	Section 501(c)(7) organizations. Enter:							
a	Initiation fees and capital contributions included on Part VIII, line 12							
-		_						
b		_						
11	Section 501(c)(12) organizations. Enter:							
a	Gross income from members or shareholders 11a	-						
b	Gross income from other sources (Do not net amounts due or paid to other sources against							
	amounts due or received from them.)							
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a						
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	_						
13	Section 501(c)(29) qualified nonprofit health insurance issuers.							
а	Is the organization licensed to issue qualified health plans in more than one state?	. 13a						
	Note. See the instructions for additional information the organization must report on Schedule O.							
b	Enter the amount of reserves the organization is required to maintain by the states in which the							
	organization is licensed to issue qualified health plans 13b							
с	Enter the amount of reserves on hand 13c							
	Did the organization receive any payments for indoor tanning services during the tax year?	. 14a		X				
b	If "Yes," has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule O	14b						
			000					

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Pa	t VI Governance, Management, and Disclosure For each "Yes" response to lines 2 thro	ough 7	b below, and for a	a "No" re	espons	e
	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S	See ins	structions.			
	Check if Schedule O contains a response or note to any line in this Part VI					X
Sec	tion A. Governing Body and Management					
					Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a		7		
	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 in Schedule O.					
b	Enter the number of voting members included in line 1a, above, who are independent	1b		6		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	with a	ny other			
	officer, director, trustee, or key employee?			2		X
3	Did the organization delegate control over management duties customarily performed by or under the	direct	supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?			3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 99	0 was	filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's asse	ts?		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 app	oint o	ne or			
	more members of the governing body?			7a		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, sto	ckhol	ders, or			
	persons other than the governing body?			7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	by the	following:			
а	The governing body?			8a	Х	
b	Each committee with authority to act on behalf of the governing body?			8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reach	hed at	the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Rev					
					Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such cha	pters,	affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?			10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body	before	e filing the form?	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.					
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise t	o confl	icts?	12b	Х	
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Ye	es," de	scribe			
	in Schedule O how this was done			12c	Х	
13	Did the organization have a written whistleblower policy?			13	Х	
14	Did the organization have a written document retention and destruction policy?			14	Х	
15	Did the process for determining compensation of the following persons include a review and approval	by ind	ependent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					
а	The organization's CEO, Executive Director, or top management official			15a	X	
b	Other officers or key employees of the organization			15b	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	ent wi	th a			
	taxable entity during the year?			16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	•	•			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organiz	zation	S			
	exempt status with respect to such arrangements?	<u></u>		16b		
Sec	tion 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 (or 1024 if applicable), 990, and 990-T (Sectio	n 501(c)(3)s only)	available	e	
	for public inspection. Indicate how you made these available. Check all that apply.					
	X Own website Another's website X Upon request Other (explain i					
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conf	lict of	interest policy, an	d financ	ial	
	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 book	ks and	records:			
	SUSAN AU, DIRECTOR OF FINANCE AND ACCOUNTING - (415) 624-1200					
	1160 BATTERY STREET, NO. 225, SAN FRANCISCO, CA 94111					

Form 990 (2		68-0492065	Page 7							
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Comp	ensated								
	Employees, and Independent Contractors									
	Check if Schedule O contains a response or note to any line in this Part VII									
Section A.	Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees									
4 - 0	- Or which this table for all and a second of the ball of Decent and a second of the decent of the second of the s									

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

Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A)	(B)	(C)		(D)	(E)	(F)				
Name and Title	Average	(10		Pos	itior			Reportable	Reportable	Estimated
	hours per	box	(do not check more than one box, unless person is both an officer and a director/trustee)		compensation	compensation	amount of			
	week		cer ar I	nd a d I	irecto	r/trus T	tee)	from	from related	other
	(list any	ector.						the	organizations	compensation
	hours for	or dir	e			ated		organization	(W-2/1099-MISC)	from the
	related	ustee	trustee		e	pens		(W-2/1099-MISC)		organization
	organizations below	ual tr	ional		ploye	t com				and related organizations
	line)	ndividual trustee or director	In stitutio nal 1	Officer	Key employee	Highest compensated employee	Former			organizations
(1) PATRICK O. BROWN (TO OCT 6)	5.00				Ť	1				
BOARD MEMBER/CO-FOUNDER		х						0.	Ο.	0.
(2) MICHAEL W. CARROLL	5.00									
BOARD MEMBER		х						0.	0.	0.
(3) MICHAEL B. EISEN	5.00									
BOARD MEMBER/CO-FOUNDER		Х						0.	0.	0.
(4) HEATHER JOSEPH (TO MAY 26)	5.00									
BOARD MEMBER		X						0.	0.	0.
(5) DAVID LIDDLE	5.00									
BOARD MEMBER		Х						0.	0.	0.
(6) ROBIN LOVELL-BADGE	5.00									
BOARD MEMBER		Х						0.	0.	0.
(7) MEREDITH T. NILES	5.00									
BOARD MEMBER		Х						0.	0.	0.
(8) ROSALIND L. SMYTH (TO MAR 31)	5.00									
BOARD MEMBER		Х						0.	0.	0.
(9) GARY E. WARD	5.00									
BOARD CHAIR		Х		X				0.	0.	0.
(10) ELIZABETH MARINCOLA	40.00									
CEO		Х		х				485,561.	0.	31,817.
(11) RICHARD HEWITT	40.00									
CFO				X				304,059.	0.	30,164.
(12) RAY CAMPBELL	40.00									
GENERAL COUNSEL & SECRETARY				X				190,854.	0.	13,550.
(13) CATHERINE RAYHILL	40.00									
CHIEF TECHNOLOGY OFFICER					X			278,179.	0.	29,358.
(14) VERONIQUE KIEMER	40.00									
EXECUTIVE DIRECTOR					х			275,557.	0.	25,602.
(15) LOUISE PAGE	40.00									
PUBLISHER		<u> </u>			х			267,981.	0.	10,600.
(16) HELEN ATKINS	40.00									
DIRECTOR, PUBLISHING SERVICES		<u> </u>				x		197,420.	0.	14,771.
(17) SUSAN AU	40.00									
DIRECTOR, FINANCING & ACCTG						X		194,766.	0.	14,699.

Form 990 (2016) PUBLIC LIBRA	RY OF SCIEN	CE							68-04	9206	5	P	age 8
Part VII Section A. Officers, Directors, Trus	tees, Key Emp	ploy	ees,	anc	l Hig	ghes	t C	ompensated Employee	s (continued)				
(A) Name and title	(B) Average hours per week	box offi	not c , unle:	Pos heck ss per	more rson i	than o s both r/trust	an	(D) Reportable compensation from	(E) Reportable compensatio from related	n		(F) stimate nount other	
	(list any hours for related organizations below line)	Individual trustee or director	In stitutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organization: (W-2/1099-MIS		fr org an	pensa om th anizat d relat anizati	e ion ed
(18) NICHOLAS PETERSON	40.00												
DIRECTOR SOFTWARE DEVELOPMENT						Х		186,837.		0.		26,	949.
(19) LAURENCE PEIPERL	40.00					x		101 610		٥.		21	124
CHIEF EDITOR (20) PAULA CARTER	40.00					~		181,612.		<u> </u>		21,	124.
DIRECTOR, PMO						x		173,951.		0.		14,	722.
		-											
								2 726 777		0.		222	256
1b Sub-total c Total from continuation sheets to Part VI								2,736,777.		0.		233,	356. 0.
d Total (add lines 1b and 1c)								2,736,777.		0.		233,	356.
2 Total number of individuals (including but n							o re	eceived more than \$100,	000 of reportable	,			
compensation from the organization													53
										ſ		Yes	No
3 Did the organization list any former officer,	-			-	·			•			2		х
line 1a? If "Yes," complete Schedule J for sFor any individual listed on line 1a, is the su											3		
and related organizations greater than \$150			•						e e		4	х	
5 Did any person listed on line 1a receive or a													
rendered to the organization? If "Yes," com	plete Schedule	ə J fo	or sı	ıch ı	oers	on .					5		х
Section B. Independent Contractors													
1 Complete this table for your five highest con the organization. Report compensation for								the organization's tax y		ensat			
(A) Name and business	address							(B) Description of s	ervices	C	ompe	;) nsatio	n
KAUFMAN WILLS FUSTING & COMPANY 1010 STREEPER ST., S, BALTIMORE, MD :	01001							EDITORIAL SERVICES			1	791	343.
MUTUALLY HUMAN SOFTWARE, LLC, 401 HA							-	EDITORIAL DERVICES			1	,,,,,	545.
SUITE 430, GRAND RAPIDS, MI 49503								SOFTWARE DEVELOPME	NT		1	,707,	025.
EDITORIAL OFFICE LTD, 21 LION CLOSE,												6 F 6	
3HL, OVERTON, HAMPSHIRE, UNITED KING							_	EDITORIAL SERVICES			1	,656,	700.
APEX COVANTAGE, LLC, 198 VAN BUREN S' 200 PRESIDENTS PLAZA, HERNDON, VA 201								PRODUCTION SERVICE	s		1	618.	949.
J&J EDITORIAL							-				_		
201 SHANNON OAKS CIR. #124, CARY, NC	27511							EDITORIAL SERVICES			1	,416,	053.
2 Total number of independent contractors (in \$100.000 of compensation from the organized structure)	•	ot lin	niteo	d to f	thos 21		ed	above) who received mo	ore than				

rm 990 (art VII		LIBRARY OF S	CIENCE			68-049206	5 Pag
			or poto to opy ling	in this Dort VIII			Г
	Check if Schedule O cont	ans a response		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluc from tax unde sections 512 - 514
<u>ო</u> 1 a	Federated campaigns	1a					012 011
~	Membership dues						
g c	Fundraising events						
ra Zara	Related organizations						
ji e	Government grants (contribut						
ξ, f	All other contributions, gifts, gran						
her	similar amounts not included abo		7,215.				
ō g	Noncash contributions included in lines	1a-1f: \$					
h an	Total. Add lines 1a-1f	-		7,215.			
			Business Code				
2 a	PUBLICATION FEES, NET		519130	36,772,796.	36,772,796.		
a b	ADVERTISING		519130	474,914.		474,914.	
onu c	REPRINTS		519130	75,030.	75,030.		
a d	CO-DEV REV		519130	35,000.	35,000.		
2 a b c d e f							
f	All other program service reve	enue					
g	Total. Add lines 2a-2f			37,357,740.			
3	Investment income (including	dividends, intere	est, and				
	other similar amounts)			594,580.			594,5
4	Income from investment of ta						
5	Royalties		►				
		(i) Real	(ii) Personal				
6 a	Gross rents	339,112.					
b	Less: rental expenses	0.					
	Rental income or (loss)	339,112.					
d	Net rental income or (loss)	. <u>.</u>	►	339,112.			339,1
7 a	Gross amount from sales of	(i) Securities	(ii) Other				
	assets other than inventory	24,815,970.					
b	Less: cost or other basis						
	and sales expenses	25,725,809.					
с	Gain or (loss)	-909,839.	-658.				
d	Net gain or (loss)		▶	-910,497.			-910,4
, 8 a	Gross income from fundraisin	g events (not					
	including \$	of					
b	contributions reported on line						
	Part IV, line 18						
b	Less: direct expenses						
′ c	Net income or (loss) from fund	draising events	>				
9 a	Gross income from gaming ad						
	Part IV, line 19						
b	Less: direct expenses	b					
с	Net income or (loss) from gam	ning activities	·				
10 a	Gross sales of inventory, less						
	and allowances						
b	Less: cost of goods sold	b					
c	Net income or (loss) from sale						
	Miscellaneous Revenu		Business Code				
11 a							
b			ļļ				
С							
	All other revenue						
е	Total. Add lines 11a-11d						
12	Total revenue. See instructions.		🕨	37,388,150.	36,882,826.	474,914.	23,1

Form 990 (2016) PUBLIC LIBRARY OF SC Part IX Statement of Functional Expenses PUBLIC LIBRARY OF SCIENCE

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Do	Check if Schedule O contains a respons	(A)	his Part IX (B) Program service	(C)	(D)
	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				
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,	1 042 292	1 406 626	E26 646	
-	trustees, and key employees	1,943,282.	1,406,636.	536,646.	
6	Compensation not included above, to disqualified				
	persons (as defined under section $4958(f)(1)$) and				
7	persons described in section 4958(c)(3)(B)	16,259,704.	11,685,752.	4,573,952.	
7 0	Other salaries and wages	10,200,104.	,000,702.	=,5,5,354.	
8	Pension plan accruals and contributions (include	606,578.	435,944.	170,634.	
9	section 401(k) and 403(b) employer contributions)	1,742,635.	1,317,589.	425,046.	
9 0	Other employee benefits	1,359,094.	1,014,474.	344,620.	
1	Payroll taxes Fees for services (non-employees):	1,000,001.	-, • , - , - , - , - , - , - , - , -		
a	Management				
a b		25,557.	2,678.	22,879.	
с С	Legal Accounting	64,985.		64,985.	
d	· · · · ·				
۵ ۵	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	59,066.		59,066.	
g		, -		,	
9	column (A) amount, list line 11g expenses on Sch O.)	1,318,294.	941,189.	377,105.	
2	Advertising and promotion	573,303.	538,377.	34,926.	
3	Office expenses		,		
4	Information technology	1,051,488.	626,435.	425,053.	
5	Royalties				
6	Occupancy	1,924,470.	1,586,958.	337,512.	
7	Travel	980,298.	636,394.	343,904.	
8	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
9	Conferences, conventions, and meetings				
0	Interest				
1	Payments to affiliates				
2	Depreciation, depletion, and amortization	933,676.	753,335.	180,341.	
3	Insurance	100,417.		100,417.	
4	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	PRODUCTION COSTS	9,174,467.	9,174,467.		
a b	OTHER EXPENSES	485,876.	221,791.	264,085.	
с С	TRAINING & RECRUITMENT	327,323.	11,328.	315,995.	
d	BAD DEBT	108,497.	, ,	108,497.	
e		, ,		,	
5	Total functional expenses. Add lines 1 through 24e	39,039,010.	30,353,347.	8,685,663.	
6	Joint costs. Complete this line only if the organization	. ,	. ,		
-	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here Figure if following SOP 98-2 (ASC 958-720)				

990 (i rt X	2016) PUBLIC LIBRARY OF SCI Balance Sheet	ENCE			68-	0.
	Check if Schedule O contains a response or note	to any	lino in this Part V			
		to any		(A) Beginning of year		<u></u>
1	Cash - non-interest-bearing	1,757,207.	1	_		
2	Savings and temporary cash investments	·····	280,747.	2		
3	Pledges and grants receivable, net				3	
4	Accounts receivable, net			1,845,245.	4	
5	Loans and other receivables from current and for					
	trustees, key employees, and highest compensat					
	Part II of Schedule L		5	_		
6	Loans and other receivables from other disqualifi	ons (as defined under				
	section 4958(f)(1)), persons described in section	4958(c)((3)(B), and contributing			
	employers and sponsoring organizations of section					
	employees' beneficiary organizations (see instr).				6	_
7	Notes and loans receivable, net			55,943.	7	
8	Inventories for sale or use		······ _		8	_
9	Prepaid expenses and deferred charges			814,430.	9	_
10a						
	basis. Complete Part VI of Schedule D	10a				
b	Less: accumulated depreciation		4,128,171.	8,668,701.	10c	
11	Investments - publicly traded securities			21,583,164.	11	
12	Investments - other securities. See Part IV, line 1			1,162,135.	12	
13	Investments - program-related. See Part IV, line 1			13		
14	Intangible assets		·····		14	_
15			······ _	8,402.	15	
16	Total assets. Add lines 1 through 15 (must equa			36,175,974.	16	
17	Accounts payable and accrued expenses		<u> </u>	3,278,820.	17	
40	Granta payabla		40			

			· - · - ·	10	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	36,175,974.	16	34,744,489.
	17	Accounts payable and accrued expenses	3,278,820.	17	3,072,923.
	18	Grants payable		18	
	19	Deferred revenue	563,879.	19	513,967.
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
s	22	Loans and other payables to current and former officers, directors, trustees,			
itie		key employees, highest compensated employees, and disqualified persons.			
Liabilities		Complete Part II of Schedule L		22	
Ľ	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	1,688,011.	25	1,366,770.
	26	Total liabilities. Add lines 17 through 25	5,530,710.		4,953,660.
		Organizations that follow SFAS 117 (ASC 958), check here 🕨 🕱 and			
s		complete lines 27 through 29, and lines 33 and 34.			
ЭС	27	Unrestricted net assets	30,523,505.	27	29,790,829.
alar	28	Temporarily restricted net assets	121,759.	28	0.
Ë B	29	Permanently restricted net assets		29	
Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here			
οr		and complete lines 30 through 34.			
ţs	30	Capital stock or trust principal, or current funds		30	
et Assets	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
μĂ	32	Retained earnings, endowment, accumulated income, or other funds		32	
R	33	Total net assets or fund balances	30,645,264.	33	29,790,829.
	34	Total liabilities and net assets/fund balances	36,175,974.	34	34,744,489.
					Form 990 (2016)

Form **990** (2016)

(B) End of year

Assets

1,306,108. 280,747.

1,902,852.

57,497.

775,280.

10,139,000.

20,274,603.

8,402.

Form	990 (2016) PUBLIC LIBRARY OF SCIENCE	68-0492065	5	Pa	_{ge} 12
	rt XI Reconciliation of Net Assets				2
	Check if Schedule O contains a response or note to any line in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	37,	388,	150.
2	Total expenses (must equal Part IX, column (A), line 25)	2	39,	039,	010.
3	Revenue less expenses. Subtract line 2 from line 1	3	-1,	650,	860.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	30,	645,	264.
5	Net unrealized gains (losses) on investments	5		899,	574.
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 in Schedule O)	9		103,	149.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	29,	790,	829.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII		<u> </u>		X
				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 (D.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	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	· ·		77	
	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 in Scher				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sing	gle Audit			v
	Act and OMB Circular A-133?	·····	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requir				
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	000	(0010)

Form **990** (2016)

(Form 990 or 990-EZ)

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.

2016	
Open to Public Inspection	

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/fo	rm990.	Inspection
	Employer	identification number

		LIBRARY OF SCI						68-0492065		
Part I	Reason for Public (Charity Status (/	All organizations must co	mplete th	is part.) Se	e instructions.				
The organ	nization is not a private found	ation because it is: (F	For lines 1 through 12, cl	neck only (one box.)					
1	A church, convention of ch	urches, or associatio	n of churches described	in sectio	n 170(b)(1	I)(A)(i).				
2	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).)									
3	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).									
4	A medical research organiz	ation operated in cor	njunction with a hospital	described	in sectio	n 170(b)(1)(A)(i	i ii). Enter	the hospital's name,		
	city, and state:									
5	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in									
	section 170(b)(1)(A)(iv). (C	Complete Part II.)								
6	A federal, state, or local gov	vernment or governm	nental unit described in	section 17	70(b)(1)(A)	(v).				
7	An organization that norma	Ily receives a substar	ntial part of its support fr	om a gove	ernmental	unit or from the	general	oublic described in		
	section 170(b)(1)(A)(vi). (C	•		U U			•			
8	A community trust describe		(1)(A)(vi). (Complete Parl	: 11.)						
9	An agricultural research org				ed in conju	inction with a la	and-grant	college		
	or university or a non-land-g	-			-		-	-		
	university:		, , , , , , , , , , , , , , , , , , ,		, ,	,	0			
10 X	An organization that norma	Ily receives: (1) more	than 33 1/3% of its supp	port from c	contributio	ns, membershij	p fees, an	d gross receipts from		
	activities related to its exem									
	income and unrelated busir	ness taxable income	(less section 511 tax) fro	m busines	ses acqui	red by the orga	nization a	after June 30, 1975.		
	See section 509(a)(2). (Con	mplete Part III.)								
11	An organization organized a	and operated exclusi	vely to test for public sat	ety. See	section 50	09(a)(4).				
12	An organization organized a	and operated exclusi	vely for the benefit of, to	perform tl	he functio	ns of, or to carr	y out the	purposes of one or		
	more publicly supported or	ganizations describe	d in section 509(a)(1) o	r section	509(a)(2).	See section 50)9(a)(3). (Check the box in		
	lines 12a through 12d that	describes the type of	f supporting organizatior	and com	plete lines	12e, 12f, and 1	2g.			
a	Type I. A supporting orga	anization operated, s	upervised, or controlled	by its supp	ported org	anization(s), typ	ically by	giving		
	the supported organization	on(s) the power to reg	gularly appoint or elect a	majority o	of the direc	tors or trustees	s of the su	upporting		
	organization. You must o	complete Part IV, Se	ections A and B.							
b	Type II. A supporting org	anization supervised	or controlled in connect	ion with its	s supporte	d organization	s), by hav	ving		
	control or management o	f the supporting orga	anization vested in the sa	ame perso	ns that co	ntrol or manage	e the supp	ported		
	organization(s). You mus	t complete Part IV,	Sections A and C.							
с 🗌	Type III functionally inte	grated. A supporting	g organization operated	in connect	tion with, a	and functionally	integrate	ed with,		
	its supported organization	n(s) (see instructions)). You must complete F	Part IV, Se	ctions A,	D, and E.				
d	Type III non-functionally	integrated. A supp	orting organization oper	ated in cor	nnection v	vith its supporte	ed organiz	zation(s)		
	that is not functionally int	egrated. The organiz	ation generally must sati	sfy a distr	ibution rec	quirement and a	an attentiv	/eness		
	requirement (see instructi	ions). You must con	nplete Part IV, Sections	A and D,	and Part	V .				
е 🗌	Check this box if the orga	anization received a v	written determination from	m the IRS	that it is a	Type I, Type II,	Type III			
	functionally integrated, or	Type III non-functior	nally integrated supportir	ng organiz	ation.					
	er the number of supported o	• • • • • • • • • • • • • • • • • • • •								
	vide the following information			(iv) is the orac	anization listed					
	(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10	in your governi	ng document?	(v) Amount of r support (see ins		(vi) Amount of other support (see instructions)		
	organization		above (see instructions))	Yes	No	Support (See ins				
Total										
rulai						1		1		

Schedule A (Form 990 or 990 EZ) 2016 PUBLIC LIBRARY OF SCIENCE

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.)

Se	ction A. Public Support		_	-		_	-
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization'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)						
	Public support. Subtract line 5 from line 4. ction B. Total Support						
		() 22/2	(1) 00/0	() 22()	()) 00 (7	() 00/0	(0
	ndar year (or fiscal year beginning in) 🕨	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
-	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	5						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
	Total support. Add lines 7 through 10					40	
	Gross receipts from related activities,					12	
13	•	-			•		
Se	organization, check this box and stor ction C. Computation of Publi						
	Public support percentage for 2016 (I		-	column (f))		14	%
15						15	%
	a 33 1/3% support test - 2016. If the c					· · ·	
100	stop here. The organization qualifies	-					
ł	33 1/3% support test - 2015. If the c		-				
	and stop here. The organization qual						
17:	a 10% -facts-and-circumstances test						
	and if the organization meets the "fac						-
	meets the "facts-and-circumstances"			-	-	-	
ł	10% -facts-and-circumstances test	-	-	• • • •			
•	more, and if the organization meets th	-	-				
	organization meets the "facts-and-circ						►
18	Private foundation. If the organizatio						s

Schedule A (Form 990 or 990-EZ) 2016

Schedule A (Form 990 or 990-EZ) 2016 PUBLIC LIBRARY OF SCIENCE

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

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

Section A. Public Support Calendar year (or fiscal year beginning in) (c) 2014 (d) 2015 (a) 2012 (b) 2013 (e) 2016 (f) Total 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 81,797 7,215 337,184. 445,110 208,446. 1,079,752. 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the 32,914,369 45,540,615. 44,310,230 42,343,985. 36,882,826. 201,992,025. organization's tax-exempt purpose 3 Gross receipts from activities that are not an unrelated trade or business under section 513 4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 5 The value of services or facilities furnished by a governmental unit to the organization without charge 33,251,553 45,985,725 44,392,027 42,552,431, 36,890,041 203,071,777. 6 Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and Ο. 3 received from disqualified persons b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year 0. c Add lines 7a and 7b 0. 203,071,777. 8 Public support. (Subtract line 7c from line 6.) Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2012 (b) 2013 (c) 2014 (d) 2015 (e) 2016 (f) Total 9 Amounts from line 6 33,251,553 45,985,725 44,392,027 42,552,431 36,890,041 203,071,777. 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties 393,561, 719,523, 1,077,267. 1,180,467, 933,692, 4,304,510. and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 193,521. 117,567 72,456 3,498 511,128 791 979 1,077,267 1,183,965 933,692 4,498,031. c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on **12** Other income. Do not include gain or loss from the sale of capital 785 688 2,698 832 5,003. assets (Explain in Part VI.) 33,763,466. 46,778,392. 45,471,992. 43,737,228. 207,574,811. 37,823,733. **13** Total support. (Add lines 9, 10c, 11, and 12.) 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ► Section C. Computation of Public Support Percentage 97.83 % Public support percentage for 2016 (line 8, column (f) divided by line 13, column (f) 15 15 97.76 16 Public support percentage from 2015 Schedule A, Part III, line 15 16 % Section D. Computation of Investment Income Percentage 2.17 17 17 Investment income percentage for 2016 (line 10c, column (f) divided by line 13, column (f) % 2.05 18 18 Investment income percentage from 2015 Schedule A, Part III, line 17 % 19a 33 1/3% support tests - 2016. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2015. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

10b

Yes No

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

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			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
C	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 B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
_	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	-		
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	-		
<u></u>	supported organizations played in this regard.	3		
	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
a	The organization satisfied the Activities Test. <i>Complete line 2 below.</i>			
b	The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>			
c	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instruction of the second sec	uctions).		
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined	•		
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these	0.		
~	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	0		
	trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	<u></u>		
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	<u>3b</u>		0040

Schedule A (Form 990 or 990-EZ) 2016

Ра	Type III Non-Functionally Integrated 509(a)(3) Supporting	Orgar	nizations				
1	1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI.) See instructions.						
	other Type III non-functionally integrated supporting organizations must con	nplete Se	ections 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 Part VI):						
2	Acquisition indebtedness applicable to non-exempt-use assets	2					
3	Subtract line 2 from line 1d	3					
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,						
	see instructions)	4					
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5					
6	Multiply line 5 by .035	6					
7	Recoveries of prior-year distributions	7					
8	Minimum Asset Amount (add line 7 to line 6)	8					
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					
-			a d Tura a III au mara autima a suar				

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

Schedule A (Form 990 or 990-EZ) 2016

Schedule A (Form 990 or 990-EZ) 2016 PUBLIC LIBRARY OF SCIENCE
Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

	t V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	nizations (continued)	
Secti	on D - Distributions		(0011111000)	Current Year
1	Amounts paid to supported organizations to accomplish exe			
2	Amounts paid to perform activity that directly furthers exemp			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	3		
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions			
7	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to which the	ne organization is responsive		
	(provide details in Part VI). See instructions			
9	Distributable amount for 2016 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
		(i)	(ii)	(iii)
Secti	on E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions Pre-2016	Distributable Amount for 2016
1	Distributable amount for 2016 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2016 (reason-			
	able cause required- explain in Part VI). See instructions			
3	Excess distributions carryover, if any, to 2016:			
а				
b				
с	From 2013			
d	From 2014			
е	From 2015			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2016 distributable amount			
i	Carryover from 2011 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2016 from Section D,			
	line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2016 distributable amount			
с	Remainder. Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2016, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions			
6	Remaining underdistributions for 2016. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions			
7	Excess distributions carryover to 2017. Add lines 3j			
	and 4c			
8	Breakdown of line 7:			
а				
b	Excess from 2013			
с	Excess from 2014			
d	Excess from 2015			
е	Excess from 2016			

Schedule A (Form 990 or 990-EZ) 2016

Schedule A	(Form 990 or 990-EZ) 2016 PUBLIC LIBRARY OF SCIENCE Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or	68-0492065	Page 8
	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 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 D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any addition (See instructions.)	and 2; Part IV, Section /, Section B, line 1e; Pa	rt V,

601		Financial Statements		L	OMB No. 154	15-0047	
(Form	HEDULE D 1 990)	Complete if the organ	Final Clai Statements ization answered "Yes" on Form 990, 1a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b			201	16
	nent of the Treasury	► At	tach to Form 990.			Open to Inspection	
-	Revenue Service	Information about Schedule D (Form	990) and its instructions is at <u>www.irs.</u>	-		•	
Name	e of the organizatio	PUBLIC LIBRARY OF SCIENCE			-	entificatior -0492065	number
Par	t I Organiza	tions Maintaining Donor Advised	Funds or Other Similar Funds o	r Accour			e
		answered "Yes" on Form 990, Part IV, line 6					•
			(a) Donor advised funds	(b) Fun	ds and o	ther accour	nts
1	Total number at en	d of year		.,			
		contributions to (during year)					
		grants from (during year)					
		end of year					
5							
	-	n's property, subject to the organization's ex	-			Yes	No
6		n inform all grantees, donors, and donor adv					
	for charitable purpo	oses and not for the benefit of the donor or d	onor advisor, or for any other purpose co	onferring			
	impermissible priva	te benefit?				Yes	No No
Par	t II Conserva	tion Easements. Complete if the organ	nization answered "Yes" on Form 990, Pa	art IV, line 7.			
1		ervation easements held by the organization					
	Preservation	of land for public use (e.g., recreation or edu	cation) Preservation of a histo	rically impor	tant land	area	
	Protection of	natural habitat	Preservation of a certif	ied historic :	structure		
	Preservation	of open space					
2		hrough 2d if the organization held a qualified	d conservation contribution in the form of	a conserva	tion ease	ment on th	e last
	day of the tax year.					he End of the	
а	• •	nservation easements		2a			
	-	ation easements on a certified historic struct		·····			
		ation easements included in (c) acquired afte					
		al Register					
3		ation easements modified, transferred, relea			durina th	e tax	
	year 🕨		, 3	5	5		
4		 here property subject to conservation easer	nent is located				
5		on have a written policy regarding the period					
		rcement of the conservation easements it ho			Г	Yes	No
6	,	hours devoted to monitoring, inspecting, ha				uring the ve	ar
	•		.			0,	
7	Amount of expense	 is incurred in monitoring, inspecting, handlin	g of violations, and enforcing conservation	on easemen [.]	ts during	the year	
	▶\$		- · · · · · ·		5	-	
8		ation easement reported on line 2(d) above s	satisfy the requirements of section 170(h)	(4)(B)(i)			
	and section 170(h)(4)(B)(ii)?				Yes	No No
9		e how the organization reports conservation			nd balanc	e sheet, an	d
		e, the text of the footnote to the organization	•				
	conservation easen	-		U		U	
Par	t III Organiza	tions Maintaining Collections of A	rt, Historical Treasures, or Oth	er Simila	r Asset	s.	
	Complete if	the organization answered "Yes" on Form 99	90, Part IV, line 8.				
1 a	If the organization e	elected, as permitted under SFAS 116 (ASC	958), not to report in its revenue stateme	nt and bala	nce sheet	t works of a	ırt,
	U U	or other similar assets held for public exhib					
		note to its financial statements that describe				,	,
b		elected, as permitted under SFAS 116 (ASC		nd balance	sheet wo	rks of art. h	istorical
	-	similar assets held for public exhibition, educ					

	relating to these items:					
	(i) Revenue included on Form 990, Part VIII, line 1	►	\$			
	(ii) Assets included in Form 990, Part X	►	\$			
2	If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide					
	the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:					
а	Revenue included on Form 990, Part VIII, line 1	►	\$			
b	Assets included in Form 990, Part X		\$			

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 632051 08-29-16 Schedule D (Form 990) 2016

Sche		ARY OF SCIENCE					68-049			ge 2
Par	t III Organizations Maintaining C	ollections of Ar	t, Historical Ti	reasures, o	r Other	Similar	Assets	(continu	ied)	
3	Using the organization's acquisition, accession	on, and other record	s, check any of the	e following tha	t are a sigr	nificant u	se of its c	ollection it	tems	
	(check all that apply):									
а	Public exhibition	d	Loan or ex	kchange progr	ams					
b	Scholarly research	e	e 🗌 Other							
с	Preservation for future generations									
4	Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.									
5	During the year, did the organization solicit o	r receive donations o	of art, historical tre	asures, or oth	er similar a	ssets		_		
_	to be sold to raise funds rather than to be maintained as part of the organization's collection?									
Par	t IV Escrow and Custodial Arrange		ete if the organizat	ion answered	"Yes" on F	orm 990	, Part IV, I	ine 9, or		
	reported an amount on Form 990, Par									
1a	Is the organization an agent, trustee, custodi		•					-		
	on Form 990, Part X?						L	Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the fol	lowing table:							
								Amount		
	Beginning balance					1c				
	Additions during the year					1d				
e	Distributions during the year					1e				
t	Ending balance							7 •		
	Did the organization include an amount on Fo				-	/?	∟	Yes	\square	No
Par	If "Yes," explain the arrangement in Part XIII. t V Endowment Funds. Complete i					<u></u>				
				(c) Two yea			aare back	(e) Four y	voare b	
10	Paginning of year balance	(a) Current year	(b) Prior year		IS DALK (J IIIEE y	Eais Dauk	(e) Four y	ears D	aun
1a 5	Beginning of year balance									
0	Contributions Net investment earnings, gains, and losses									
с d	Grants or scholarships									
u	Other expenditures for facilities									
e										
f	and programsAdministrative expenses									
g										
2	Provide the estimated percentage of the curr		e (line 1a, column	(a)) held as:						
- a	Board designated or quasi-endowment	•	%							
b	Permanent endowment	%								
	Temporarily restricted endowment									
•	The percentages on lines 2a, 2b, and 2c show									
3a	Are there endowment funds not in the posses		ation that are held	and administe	red for the	organiza	ition			
	by:	0				0			/es	No
	(i) unrelated organizations							3a(i)		
								3a(ii)		
b	If "Yes" on line 3a(ii), are the related organiza							3b		
4	Describe in Part XIII the intended uses of the	organization's endo	wment funds.							
Par	t VI Land, Buildings, and Equipm	ent.								
	Complete if the organization answered	d "Yes" on Form 990), Part IV, line 11a.	See Form 990), Part X, lir	ne 10.				
	Description of property	(a) Cost or o basis (investr	• • •	st or other is (other)	1	cumulate reciation	d	(d) Book	value	
1a	Land									
	Buildings									
	Leasehold improvements			1,128,927.		853,	139.	2	275,7	88.
	Equipment			2,318,588.		1,675,	242.	6	43,3	46.
	Other		1	0,819,656.		1,599,	790.	9,2	19,8	66.
Tota	. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part	X. column (B), line	10c.)				10,1	.39,0	00.

Schedule D (Form 990) 2016

Part VII Investments - Other Securities.

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

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

Part VIII Investments - Program Related.

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

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

Part IX Other Assets.

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

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

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) ACCRUED PAYROLL LIABILITIES	1,366,770.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total (O-1) man (h) must a must Farmer 000. Dout V. and (B) (inc. 05.)	1 366 770

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)

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

Sche	dule D (Form 990) 2016 PUBLIC LIBRARY OF SCIENCE			68-049	2065 Page 4
Par	t XI Reconciliation of Revenue per Audited Financial State	ements With R	evenue per Ret	turn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line	e 12a.			
1	Total revenue, gains, and other support per audited financial statements			1	38,184,575.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	899,574.		
b	Donated services and use of facilities	2b			
с	Recoveries of prior year grants				
d	Other (Describe in Part XIII.)	2d	-103,149.		
е	Add lines 2a through 2d			2e	796,425.
3	Subtract line 2e from line 1			3	37,388,150.
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			
b	Other (Describe in Part XIII.)	4b			
с	c Add lines 4a and 4b				0.
5	5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)				37,388,150.
Pa	t XII Reconciliation of Expenses per Audited Financial Stat		Expenses per R	eturn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line	e 12a.			
1	Total expenses and losses per audited financial statements			1	39,039,010.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
с	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	0.
3	Subtract line 2e from line 1			3	39,039,010.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
с	Add lines 4a and 4b			4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18,)		5	39,039,010.
Pa	rt XIII Supplemental Information.				

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

PART X, LINE 2:

PLOS HAS RECEIVED NOTIFICATION FROM THE INTERNAL REVENUE SERVICE AND THE

STATE OF CALIFORNIA THAT IT QUALIFIES FOR TAX-EXEMPT STATUS UNDER SECTION

501(C)(3) OF THE INTERNAL REVENUE CODE AND SECTION 27301D OF THE

CALIFORNIA REVENUE AND TAXATION CODE. THE EXEMPTIONS ARE SUBJECT TO

PERIODIC REVIEW BY THE FEDERAL AND STATE TAXING AUTHORITIES AND MANAGEMENT

IS CONFIDENT THAT PLOS CONTINUES TO SATISFY ALL FEDERAL AND STATE STATUTES

IN ORDER TO QUALIFY FOR CONTINUED TAX EXEMPTION STATUS. PLOS MAY

PERIODICALLY RECEIVE UNRELATED BUSINESS INCOME (SUCH AS ADVERTISING

INCOME, ETC.) REQUIRING PLOS TO FILE SEPARATE TAX RETURNS UNDER FEDERAL

AND STATE STATUTES. PLOS ALSO HAS CERTAIN TRANSACTIONS REQUIRING THE

PAYMENT OF VALUE ADDED TAXES. UNDER SUCH CONDITIONS, PLOS CALCULATES AND

Part XIII Supplemental Information (continued)

ACCRUES THE APPLICABLE TAXES. PLOS IS NOT SUBJECT TO EXAMINATION BY TAXING

AUTHORITIES, NOR FOR ANY PRIOR YEARS.

PLOS ASSESSES TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN AGAINST

MORE-LIKELY-THAN-NOT RECOGNITION THRESHOLD AND MEASUREMENT ATTRIBUTES FOR

FINANCIAL STATEMENT RECOGNITION. BASED ON AN ANALYSIS PREPARED BY PLOS, IT

WAS DETERMINED THAT PLOS BELIEVES THAT IT HAS APPROPRIATE SUPPORT FOR ANY

TAX POSITIONS TAKEN, AND AS SUCH, DOES NOT HAVE ANY UNCERTAIN TAX

POSITIONS THAT ARE MATERIAL TO THE FINANCIAL STATEMENTS.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

LOSS ON EXCHANGE RATE

-103,149.

SCHEDULE F (Form 990)				ivities Outside the Ur n answered "Yes" on Form 990, Part			OMB No. 1545-0047
•	tment of the Treasury	-	-	Attach to Form 990.			Open to Public
Intern	al Revenue Service	Information about	out Schedule F	(Form 990) and its instructions is at	www.irs.gov/fo		Inspection
Nam	e of the organization					Employer ider	ntification number
PUB	LIC LIBRARY OF SC					68-049206	
Pa	rt I General In	formation on A	ctivities Out	side the United States. Comple	ete if the orgar	ization answered	"Yes" on
		rt IV, line 14b.					
1	-	-		ds to substantiate the amount of its gra the selection criteria used to award the		· · · · · · · · · · · · · · · · · · ·	Yes No
2	For grantmakers. D United States.	escribe in Part V the	e organization's	procedures for monitoring the use of its	s grants and ot	her assistance o	utside the
3		. (The following Part	I, line 3 table ca	an be duplicated if additional space is n	eeded.)		
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, pro- gram services, investments, grants to recipients located in the region)	is a pro describe	vity listed in (d) gram service, e specific type (s) in the region	(f) Total expenditures for and investments in the region
EUR	OPE (INCLUDING						
ICE	LAND & GREENLAND)	,					
	LBANIA, ANDORRA,				EDITORIAL :	SUPPORT TO	
AUS	TRIA, BELGIUM	1	51	PROGRAM SERVICES	SERVE U.S.	OPERATIONS.	3,458,551.
3 a	Sub-total	1	51				3,458,551.
	Total from continuat sheets to Part I	ion	0				0.
С	Totals (add lines 3a and 3b)	1	51				3,458,551.

Statement of Activities Outside the United States

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

Schedule F (Form 990) 2016

OMB No. 1545-0047

Schedule	F (Form 990) 2016	PUBLIC LIBRARY
Part II	Grants and Other Assi	istance to Organization

ns or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any

recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

PUBLIC LIBRARY OF SCIENCE

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)	
2 Enter total number of	recipient organizatior	ns listed above that are r	ecognized as charities by the f	oreign country, ı	recognized as tax-exe	empt by	1	1	
			501(c)(3) equivalency letter						
3 Enter total number of other organizations or entities									

Schedule F (Form 990) 2016

Schedule	F (Form 990) 2016	PUBLIC LIBRARY OF SCIENCE	68-0492065
Part III	Grants and Other A	Assistance to Individuals Outside the United States.	Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

BLIC LIBRARY OF SCIENCE

Part III can be	duplicated if additional	l space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)

Schedule F (Form 990) 2016

Page 3

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

Schedule F (Form 990) 2016

Part V Supplemental Information

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

CHEDULE J	Compensation Information	1	OMB No. 15	45-0047
Form 990)	For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees		20 ⁻	16
	Complete if the organization answered "Yes" on Form 990, Part IV, line 23.		Open to I	
epartment of the Treasury ternal Revenue Service	 Attach to Form 990. Information about Schedule J (Form 990) and its instructions is at www.irs.gov/for 	rm000	Inspec	
ame of the organizati		Employer i	dentification	number
-	PUBLIC LIBRARY OF SCIENCE	68-0	492065	
Part I Questio	ns Regarding Compensation			
·				Yes No
1a Check the approp	riate 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 perso	nal use		
Travel for co	npanions	sidence		
Tax indemni	cation and gross-up payments Health or social club dues or initiation fee	s		
Discretionary	spending account Personal services (such as, maid, chauffe	ur, chef)		
b If any of the boxes	on line 1a are checked, did the organization follow a written policy regarding payment or			
reimbursement or	provision of all of the expenses described above? If "No," complete Part III to explain		1b	
2 Did the organizati	on require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
trustees, and offic	ers, including the CEO/Executive Director, regarding the items checked on line 1a?		2	
3 Indicate which, if	any, of the following the filing organization used to establish the compensation of the organiza	tion's		
CEO/Executive Di	rector. Check all that apply. Do not check any boxes for methods used by a related organization	on to		
establish compen	sation of the CEO/Executive Director, but explain in Part III.			
X Compensation	n committee X Written employment contract			
X Independent	compensation consultant X Compensation survey or study			
Form 990 of	other organizations X Approval by the board or compensation c	ommittee		
During the year, d	d any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
organization or a	elated organization:			
	ce payment or change-of-control payment?			X
	eceive payment from, a supplemental nonqualified retirement plan?			X
	eceive payment from, an equity-based compensation arrangement?		4c	X
If "Yes" to any of	ines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
-	c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
	on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensatio	n		
contingent on the				v
				X
	zation?		5b	X
	or 5b, describe in Part III.			
	on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensatio	n		
contingent on the				v
a The organization?			<u>6a</u>	X
	zation?		6b	X
	or 6b, describe in Part III.			
	on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
	ines 5 and 6? If "Yes," describe in Part III		7	X
	s reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the	ne		
			8	X
	did the organization also follow the rebuttable presumption procedure described in			
Regulations section	n 53.4958-6(c)?		9	

68-0492065

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

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

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

(A) Name and Title		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	Denents	(D)(!)-(D)	reported as deferred on prior Form 990
(1) ELIZABETH MARINCOLA	(i)	370,844.	114,717.	0.	10,600.	21,217.	517,378.	0.
CEO	(ii)	0.	0.	0.	0.	0.	0.	٥.
(2) RICHARD HEWITT	(i)	264,188.	39,871.	0.	10,600.	19,564.	334,223.	٥.
CFO	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) RAY CAMPBELL	(i)	178,689.	12,165.	0.	7,731.	5,819.	204,404.	0.
GENERAL COUNSEL & SECRETARY	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) CATHERINE RAYHILL	(i)	239,024.	39,155.	0.	10,600.	18,758.	307,537.	0.
CHIEF TECHNOLOGY OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) VERONIQUE KIEMER	(i)	256,601.	18,956.	0.	10,600.	15,002.	301,159.	0.
EXECUTIVE DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) LOUISE PAGE	(i)	259,547.	8,434.	0.	10,600.	0.	278,581.	0.
PUBLISHER	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) HELEN ATKINS	(i)	182,683.	14,737.	0.	7,949.	6,822.	212,191.	0.
DIRECTOR, PUBLISHING SERVICES	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) SUSAN AU	(i)	182,332.	12,434.	0.	7,877.	6,822.	209,465.	0.
DIRECTOR, FINANCING & ACCTG	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) NICHOLAS PETERSON	(i)	186,837.	0.	0.	6,734.	20,215.	213,786.	0.
DIRECTOR SOFTWARE DEVELOPMENT	(ii)	0.	0.	0.	0.	0.	0.	0.
(10) LAURENCE PEIPERL	(i)	170,516.	11,096.	0.	7,005.	14,119.	202,736.	0.
CHIEF EDITOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(11) PAULA CARTER	(i)	162,082.	11,869.	0.	7,087.	7,635.	188,673.	0.
DIRECTOR, PMO	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

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

Schedule J (Form 990) 2016

SCHEDULE O (Form 990 or 990-EZ) Department of the Treasury Internal Revenue Service	Supplemental Information to Form 990 or 990. Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or 990-EZ. Information about Schedule O (Form 990 or 990-EZ) and its instructions is at <u>www.irs.gov/f</u>		OMB No. 1545-0047 2016 Open to Public Inspection					
Name of the organization		Employer	identification number					
FORM 990, PART III	, LINE 4A, DESCRIPTION OF PROGRAM SERVICE:	00-04						
PLOS MEDICINE, WIT	H ARTICLES IN ALL AREAS OF MEDICAL SCIENCE, CLINICAL							
PRACTICE AND HEALT	H POLICY INCLUDING A VARIETY OF STUDY DESIGNS; PLOS							
COMPUTATIONAL BIOL	OGY, PUBLISHING WORK THAT FURTHERS THE UNDERSTANDING							
OF LIVING SYSTEMS	AT ALL SCALES THROUGH THE APPLICATION OF							
COMPUTATIONAL METH	DDS AND PLOS GENETICS, FOCUSED ON ORIGINAL							
CONTRIBUTIONS IN G	ENETICS AND GENOMICS THAT REFLECT THE FULL BREADTH,							
INTERDISCIPLINARY	NATURE AND IMPACT OF THESE FIELDS ON SCIENCE AND							
MEDICINE, IN HUMAN	STUDIES AS WELL AS RESEARCH ON MODEL ORGANISMS. PLOS							
NEGLECTED TROPICAL	DISEASES, THE FIRST JOURNAL SOLELY DEVOTED TO							
CHRONIC AND POVERT	Y-PROMOTING INFECTIOUS DISEASES AFFECTING THE WORLD'S							
POOREST POPULATION	S, PUBLISHES RESEARCH ON ALL SCIENTIFIC, MEDICAL,							
POLITICAL AND PUBL	IC HEALTH ASPECTS OF NTDS. PLOS PATHOGENS IS THE							
FIRST OA JOURNAL F	OR BREAKTHROUGHS IN UNDERSTANDING PATHOGENS AND THEIR							
INTERACTIONS WITH	HOST ORGANISMS. IN THE AREAS OF NATURAL DISASTERS,							
DISEASE OUTBREAKS,	RARE INHERITABLE DISEASES AND PHYLOGENIC STUDIES,							
PLOS CURRENTS PROV	IDES AN EXPEDITED PATH TO PUBLICATION FOR RAPID							
EXCHANGE OF IDEAS	AND RESULTS. SUBMISSION FORMATS ARE FLEXIBLE AND MAY							
INCLUDE SINGLE FIG	URE REPORTS, DATASETS, RESEARCH IN PROGRESS AND							
NEGATIVE RESULTS.								
IN 2016 PLOS HANDL	ED MORE THAN 12 MILLION ARTICLE VIEWS AND 2 MILLION							
ARTICLE DOWNLOADS	ARTICLE DOWNLOADS PER MONTH, WITH OVER 2.1 MILLION UNIQUE VISITORS TO							
THE PLOS BLOGS NET	WORK. IT IS MORE THAN ARTICLE VIEWS AND DOWNLOADS							
THAT DEMONSTRATE T	HE VALUE OF OA. IN SEPTEMBER, THE INTERNATIONAL UNION							
FOR CONSERVATION O	F NATURE (IUCN), PUBLISHERS OF THE IUCN RED LIST OF							

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

Schedule O (Form 990 or 990-EZ) (2016)	Page 2
Name of the organization PUBLIC LIBRARY OF SCIENCE	Employer identification number 68-0492065
THREATENED SPECIES, VOTED TO ADOPT THE ENVIRONMENTAL IMPACT	
CLASSIFICATION FOR ALIEN TAXA (EICAT) FOR CLASSIFYING INVASIVE SPECIES,	
WORK ORIGINALLY PUBLISHED IN PLOS BIOLOGY. BEYOND CONSERVATION EFFORTS,	
HUMAN HEALTH AND DISEASE INITIATIVES BENEFIT FROM OA RESEARCH. THE WHO	
ESTIMATES OF FOODBORNE DISEASE COLLECTION REPORTS THE FIRST ESTIMATES	
BY THE WORLD HEALTH ORGANIZATION FOODBORNE DISEASE BURDEN EPIDEMIOLOGY	
REFERENCE GROUP OF THE INCIDENCE, MORTALITY AND DISEASE BURDEN CAUSED	
BY 31 FOODBORNE HAZARDS. OUTCOMES REPORTED IN THE COLLECTION FROM	
PLOS, WHO AND F1000RESEARCH CAN CONTRIBUTE TO IMPROVEMENTS IN FOOD	
SAFETY WHEN INCORPORATED INTO POLICY DEVELOPMENT AT REGIONAL, NATIONAL	
AND INTERNATIONAL LEVELS.	
FROM EXTERNAL PRESENTATION OF CONTENT TO INTERNAL TECHNOLOGY	
INNOVATIONS, PLOS MILESTONES AND ACHIEVEMENTS HAVE IMPACT. MORE RAPID	
DISSEMINATION OF RESEARCH FOR PLOS PATHOGENS, PLOS GENETICS, PLOS	
NEGLECTED TROPICAL DISEASES AND PLOS COMPUTATIONAL BIOLOGY IS NOW	
PROVIDED THROUGH PUBLICATION OF UNCORRECTED PROOFSEARLY VERSIONS OF	
PEER-REVIEWED WORK, FORMATTED FOR LAYOUT BUT NOT FINAL PUBLICATION.	
PLOS RELEASED TO THE PUBLIC OUR JOURNAL AND COLLECTIONS PUBLISHING	
PLATFORM, AMBRA, UNDER AN OPEN SOURCE LICENSE. IN PROVIDING AMBRA TO	
THE COMMUNITY, WE HONOR OUR COMMITMENT TO MAKE SOFTWARE DEVELOPED AT	
PLOS AVAILABLE AS OPEN SOURCE ONCE WE ARE CONFIDENT OF THE CODE'S	
SCALABILITY. THIS FOLLOWS OUR 2014 MIT LICENSING OF PLOS ALMS AS	
LAGOTTO. ONGOING IMPROVEMENTS TO PLOS.ORG, OUR FRONT-FACING PORTAL,	
PROVIDE A WEB PRESENCE FOR INFORMATION AND RESOURCES INCLUDING OUR	
ANNUAL UPDATE AND FINANCIALS WITH EASY BROWSING THROUGH THE YEAR'S	
ACHIEVEMENTS, MORE LINKS TO QUICKLY ACCESS KEY RESEARCH AND A SELECTION	

OF NEWS INTERVIEWS TO HEAR DIRECTLY FROM PLOS AUTHORS.

Name of the organization PUBLIC LIBRARY OF SCIENCE	Employer identification number 68-0492065
	00 0492005
PLOS CONTINUES TO EXPAND ITS SUCCESSFUL COLLECTIONS PROGRAM TO SHOWCASE	
ARTICLES, BLOGS AND EDITORIALS PRIMARILY FROM PLOS BUT ALSO OA CONTENT	
FROM THE WIDER WEB. CURATED PLOS COLLECTIONS ENHANCE DISCOVERY AND HELP	
READERS FOCUS ON THE WORK MOST RELEVANT TO THEIR OWN INTERESTS. FROM	
RESEARCH ON ELEPHANT WELFARE TO CHARTING THE PATH TO A DRAMATIC	
REDUCTION IN THE GLOBAL BURDEN OF DISEASE, OVER 40 NEW COLLECTIONS WERE	
LAUNCHED IN 2016 AND COUNTLESS OTHERS SUBSTANTIALLY UPDATED WITH THE	
LATEST RESEARCH. THE GROWING CHOICES OF PLOS ONE EDITOR'S PICKS NOW	
INCLUDES CURATED AUTOPHAGY, CELL BIOLOGY, HUMAN GENETICS, MOLECULAR	
BIOLOGY & BIOCHEMISTRY, SINGLE CELL GENOMICS, STEM CELL RESEARCH AND	
MICROBIOLOGY COLLECTIONS WHILE DATA SHARING, DATA PRACTICES AND DATA	
POLICIES ARE THE FOCUS OF THE OPEN DATA COLLECTION.	
OUR NEW SUBMISSION SYSTEM, APERTA, LAUNCHED FOR AUTHORS SUBMITTING TO	
PLOS BIOLOGY AS OF MAY 2016. PLOS CONTINUES TO BUILD AND INVESTS IN ITS	
NEW MANUSCRIPT SUBMISSION SYSTEM, WHICH IS NOT YET FULLY COMPLETED.	
APERTA PROVIDES A MODERN AND STREAMLINED TASK-ORIENTED INTERFACE, WITH	
CLEAR COMPLETION STATUS UPDATES THROUGHOUT THE PUBLISHING PROCESSFROM	
INITIAL SUBMISSION AND REVIEW TO FINAL ACCEPTANCE. THIS DESIGN ALLOWS	
AUTHORS TO PRESERVE MORE OF THEIR TIME FOR RESEARCH, PROVIDES REVIEWERS	
AND EDITORS EASY TO ACCOMPLISH RESPONSIBILITIES AND AN OVERALL FASTER	
PATH TO FIRST DECISION. APERTA'S MODULAR DESIGN WILL FACILITATE	
EXPERIMENTATION AND DISCOVERY IN PUBLISHING WORKFLOWS, INCLUDING	
INCORPORATION OF PREPRINTS, AND WILL FULLY SUPPORT FUTURE INNOVATIONS	
FOR ALL PLOS PUBLICATIONS.	

IN THE PAST YEAR PLOS HAS FOCUSED ON EASING AND MODERNIZING PROCESSES

Schedule O (Form 990 or 990-EZ) (2016) Name of the organization PUBLIC LIBRARY OF SCIENCE	Employer identification number 68-0492065
FOR OUR CONTRIBUTOR COMMUNITY TO MORE QUICKLY BRING WORK TO THE PUBLIC,	00 0492003
· · · · · · · · · · · · · · · · · · ·	
EXPANDING OPPORTUNITIES FOR AUTHORS AND READERS TO PARTICIPATE IN THE	
SCIENTIFIC DISCOURSE, UPDATING POLICIES AND PRACTICES TO IMPROVE	
RECOGNITION, CREDIT AND REPRODUCIBILITY AND INNOVATING FROM ALL ANGLES	
TO ADVANCE OA, OPEN DATA AND OPEN SCIENCE. PLOS RELEASED IN EACH OF THE	
SEVEN JOURNALS' ANNUAL THANK YOU ARTICLES THE NUMBER OF NEWLY SUBMITTED	
AND PUBLISHED RESEARCH ARTICLES BROUGHT TO THE PUBLIC IN 2016, IN	
SUPPORT OF OUR COMMITMENT TO INCREASED TRANSPARENCY SURROUNDING THE	
PUBLISHING PROCESS.	
THE ADOPTION OF MACHINE-READABLE PERSISTENT IDENTIFIERS, SUCH AS ORCID	
IDS FOR RESEARCHERS AND DOIS FOR DATA SETS, IS PART OF THE	
INFRASTRUCTURE FACILITATING OPEN SCIENCE AND A WAY TO ENABLE CREDIT FOR	
A WIDE RANGE OF OUTPUTS IN ADDITION TO PUBLICATIONS. PLOS LIAISED WITH	
OTHER PUBLISHERS AND ORCID TO COMMIT TO A REQUIREMENT IN 2016 FOR	
CORRESPONDING AUTHORS TO HAVE AN ORCID ID WHEN SUBMITTING TO THEIR	
JOURNALS. FORMALLY IMPLEMENTED AS A PLOS POLICY IN OCTOBER 2016, AS OF	
EARLY 2017 THERE WERE MORE THAN 58,000 CONTRIBUTORS WITH ORCID IDS IN	
OUR SYSTEM.	
SPECIFIC AND COMPREHENSIVE ATTRIBUTION MOVES THE NEEDLE FOR	
INSTITUTIONS' AND FUNDERS' ABILITIES TO EVALUATE RESEARCHERS BASED ON	
THE ROLES THEY PLAY IN PUBLISHED WORKS, RATHER THAN ON THE JOURNALS IN	
WHICH THEIR ARTICLES APPEAR. PLOS IMPLEMENTED THE CREDIT TAXONOMY	
PROVIDING MORE FINELY-GRAINED INFORMATION TO HELP MAKE THE ORDERING OF	
AUTHORS LESS IMPORTANT AND FACILITATE A SHIFT IN FOCUS FOR TENURE AND	
PROMOTION COMMITTEES AWAY FROM THIS EVALUATION AND TOWARD THEIR	
SPECIFIC CONTRIBUTIONS TO THE SCHOLARLY RECORD.	
CIFIC CONTRIBUTIONS TO THE SCHOLARLY RECORD.	Sebedule 0 /Eerm 000 er 000 EZ) (2

Schedule O (Form 990 or 990-EZ) (2016) Name of the organization	Page 2 Employer identification number
PUBLIC LIBRARY OF SCIENCE	68-0492065
LISTENERS TUNED IN OVER 9,000 TIMES IN 2016 TO PLOSCAST, THE PODCAST	
WITH KEY THOUGHT LEADERS AND PLOS AUTHORS PUSHING THE BOUNDARIES OF	
SCHOLARLY COMMUNICATION; IN ITS FIRST FULL YEAR OF PROGRAM ACTIVITY,	
PLOS SCIENCE WEDNESDAY ON REDDITSCIENCE ASK ME ANYTHING (AMA) BROUGHT	
MORE THAN 100 AUTHORS TO THE PUBLIC DISCUSSION OF 75+ ARTICLES AND	
THREE COLLECTIONS, RAISING ARTICLE VISIBILITY AN AVERAGE OF 15% BASED	
ON ARTICLE-LEVEL METRICS.	
PLOS ASSERTIVELY MOVED INTO THE PREPRINT SPACE AS A MECHANISM TO BRING	
WORK MORE RAPIDLY INTO THE PUBLIC DOMAIN. A NEW COLLABORATION WITH	
BIORXIV ENABLES AUTHORS TO CONCURRENTLY SUBMIT THEIR WORK DIRECTLY TO	
SELECT PLOS JOURNALS FROM THIS PREPRINT SERVER. AUTHORS CAN MAKE THEIR	
FINDINGS IMMEDIATELY AVAILABLE TO THE SCIENTIFIC COMMUNITY, ESTABLISH A	
STAKE IN THE GROUND FOR THEIR IDEAS, METHODS AND RESULTS, AND RECEIVE	
FEEDBACK ON DRAFT MANUSCRIPTS BEFORE THEY ARE SUBMITTED FOR	
PUBLICATION. PLOS GENETICS ENGAGED PREPRINT EDITORS TO ACTIVELY RECRUIT	
MANUSCRIPTS FROM BIORXIV. ROUND TWO OF THE EARLY CAREER TRAVEL AWARD	
(ECRTA) PROGRAM CONSIDERED ESSAYS ON THE VALUE OF PREPRINT SERVERS AND	
HOW BROAD ADOPTION MIGHT BENEFIT THE SCIENTIFIC COMMUNITY AND SOCIETY.	
PLOS ENCOURAGED SUBMISSIONS AND QUALITY SCIENCE WITH THE SECOND ANNUAL	
PLOS GENETICS RESEARCH PRIZE AND LAUNCH OF A YEAR OF EVENTS (2016-2017)	
FOR THE TEN-YEAR ANNIVERSARY OF PLOS ONE. PLOS MEDICINE INITIATED	
SUBJECT-SPECIFIC SPECIAL ISSUE CALL FOR PAPERS, TWO OF WHICH PUBLISHED	
IN 2016: TRANSLATING THE CANCER GENOME AND PREVENTING DIABETES. PLOS	

ALSO INITIATED EXPERIMENTATION IN OPEN PEER REVIEW WITH THE SYNTHETIC

BIOLOGY IGEM COMMUNITY.

Schedule O (Form 990 or	r 990-EZ) (2016)	
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Name of the organization

PUBLIC LIBRARY OF SCIENCE

INCREASING ADOPTION OF OA POLICIES AND PRACTICES BY FUNDERS,
INSTITUTIONS, PUBLISHERS AND RESEARCHERS FOSTERS AN ETHICAL AND
INTELLECTUAL ENVIRONMENT CONDUCIVE TO RESPONSIBLE OPEN SCIENCE (OS).
PLOS CONTINUED PARTICIPATION IN SEVERAL KEY EUROPEAN MEETINGS AS PART
OF THE EU COMMISSION'S PROGRESSIVE SHIFT TOWARDS OS, INCLUDING THE
DUTCH PRESIDENCY CONFERENCE ON OPEN SCIENCE AND CALL FOR ACTION ON OS,
REQUIRING FULL OA AND OPEN DATA BY 2020. PLOS PUBLICLY RELEASED ITS OWN
OPEN SCIENCE POSITION, TIMED TO COINCIDE WITH OCTOBER'S INTERNATIONAL
OAWEEK, THEMED IN 2016 AS OPEN IN ACTION. THE POSITION STATES:
"INCREASING ADOPTION OF OA POLICIES AND PRACTICES BY FUNDERS,
INSTITUTIONS, PUBLISHERS AND RESEARCHERS FOSTERS AN ETHICAL AND
INTELLECTUAL ENVIRONMENT CONDUCIVE TO RESPONSIBLE OS. AS A LEADING OA
PUBLISHER, PLOS PURSUES A PUBLISHING STRATEGY THAT OPTIMIZES THE
OPENNESS AND INTEGRITY OF THE PUBLICATION PROCESS BY AIMING TO ENSURE
THAT RESEARCH OUTCOMES ARE DISCOVERABLE, ACCESSIBLE AND AVAILABLE FOR
DISCUSSION AND THAT SCIENCE COMMUNICATION IS CONSTRUCTIVE, TRANSPARENT
AND VERIFIABLE. WE STRIVE TO IMPLEMENT POLICIES AND INNOVATIONS THAT
PROMOTE REPRODUCIBILITY, CREDIT AND ACCOUNTABILITY, AS THESE PRIORITIES
SUPPORT ESTABLISHMENT OF AN OS CULTURE, WITH OPEN DATA, EARLY SHARING
OF WORK AND CLEAR CONTRIBUTOR RECOGNITION. WE SEE THE BENEFIT OF OA
CONTENT IN RELATION TO FUTURE ADVANCES IN MACHINE-READABLE FORMATS AND
TEXT AND DATA MINING-AND THE POTENTIAL FOR OA TO PROPEL OS FORWARD INTO
NEW AND EXCITING TERRITORY." PLOS SUPPORTS INSTITUTIONAL LIBRARIANS ALL
OVER THE WORLD BY PROVIDING EDUCATIONAL MATERIALS AS PART OF ITS
ADVOCACY WORK, ANNUALLY DURING OA WEEK AND BY REQUEST THROUGHOUT THE

YEAR.

Schedule O (Form 990 or 990-EZ) (2016) Name of the organization	Page 2 Employer identification number
PUBLIC LIBRARY OF SCIENCE	68-0492065
AS A NONPROFIT PUBLISHER, ONE CORE OBJECTIVE IS TO PROVIDE WAYS TO	
OVERCOME UNNECESSARY BARRIERS TO IMMEDIATE AVAILABILITY, ACCESS AND USE	
OF RESEARCH, WHICH AT TIMES MAY INCLUDE COST. PLOS PROVIDED \$2.1	
MILLION IN THE FORM OF PARTIAL OR FULL WAIVERS TO AUTHORS AS PART OF	
OUR PUBLICATION FEE ASSISTANCE. THOUGH THIS AMOUNT APPEARS AS A	
CONTRA-REVENUE FOR FINANCIAL REPORTING PURPOSES, THIS IS A MAJOR	
PROGRAM EXPENSE FOR PLOS WHICH DEMONSTRATES THE ORGANIZATION'S SUPPORT	
TO SCIENCE AND GLOBAL PUBLIC COMMUNITY. MUCH OF THE HARDSHIP SUPPORT	
GOES TO AUTHORS FROM LOW- AND MIDDLE-INCOME COUNTRIES AND EARLY CAREER	
SCIENTISTS IN UPPER MIDDLE- AND HIGH-INCOME COUNTRIES WHO HAVE BEEN	
UNSUCCESSFUL IN SECURING ADEQUATE FUNDING SUPPORT.	
FORM 990, PART VI, SECTION B, LINE 11B:	
FORM 990 IS PREPARED BY AN OUTSIDE TAX PROFESSIONAL WITH ASSISTANCE FROM	_
THE ORGANIZATION. THE FORM IS THEN REVIEWED BY THE CFO AND MEMBERS FROM THE	
AUDIT COMMITTEE. AFTER REVIEW AND MODIFICATIONS WHERE NECESSARY, THE FINAL	
VERSION OF THE TAX RETURN IS PROVIDED TO THE BOARD OF DIRECTORS. THE CFO	
SIGNS AND FILES ALL REQUIRED TAX FILINGS.	
FORM 990, PART VI, SECTION B, LINE 12C:	
THE GENERAL COUNSEL AND SECRETARY OVERSEES THE ANNUAL CONFLICT OF INTEREST	
DISCLOSURE PROCESS. A COMMITTEE OF THE BOARD OF DIRECTORS REVIEWS ALL	
POTENTIAL CONFLICTS OF INTEREST AT LEAST ANNUALLY. THE CEO AND ALL BOARD	
MEMBERS ARE REQUIRED TO DISCLOSE (IN WRITING) POTENTIAL CONFLICTS AND ANY	
RELATED PARTY AFFILIATIONS. LOANS BETWEEN THE ORGANIZATION AND MEMBERS OF	
MANAGEMENT AND THE BOARD ARE STRICTLY PROHIBITED. THE ORGANIZATION SEEKS	
FULL TRANSPARENCY ON ALL RELATIONSHIPS. ANY POTENTIAL CONFLICTS (IN FACT OR	

APPEARANCE) ARE DISCUSSED OPENLY AND RESOLVED IN ACCORDANCE WITH THE
ORGANIZATION'S POLICIES AND PROCEDURES.
FORM 990, PART VI, SECTION B, LINE 15:
THE COMPENSATION COMMITTEE OF THE BOARD OF DIRECTORS REVIEWS THE
COMPENSATION OF ALL HIGH-LEVEL PERSONNEL ANNUALLY IN ACCORDANCE WITH IRS
RULES AND REGULATIONS. EFFORTS ARE MADE TO SECURE COMPENSATION DATA FROM
INDUSTRY SOURCES IN ORDER TO DETERMINE COMPETITIVENESS AND APPROPRIATENESS
OF SALARIES AND BENEFITS. EVERY EFFORT IS MADE TO ENSURE THAT THE PROCESS
IS THOROUGH AND TRANSPARENT IN ACCORDANCE WITH APPROPRIATE GOVERNANCE AND
REGULATORY COMPLIANCE. THIS IS PERFORMED ANNUALLY AND THE PROCESS IS
MANAGED BY THE HR DIRECTOR. REVIEW ENCOMPASSES CEO, CFO, EXECUTIVES AND KEY
EMPLOYEES.
FORM 990, PART VI, SECTION C, LINE 19:
PLOS MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND
FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC. THESE DOCUMENTS ARE ALSO
POSTED ON OUR WEBSITE.
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:
LOSS ON EXCHANGE RATE -103,149.
FORM 990, PART XII, LINE 2C:
THE PROCESS HAS NOT CHANGED FROM PRIOR YEAR.
632212 08-25-16 Schedule O (Form 990 or 990-EZ) (2016)

PUBLIC LIBRARY OF SCIENCE

Employer identification number

68-0492065

Form	990-T		OMB No. 1545-0687						
			(and proxy tax und					0040	
		For cal			, and ending	·	2016		
	tment of the Treasury al Revenue Service		► Information about Form 990-T and its instruct Do not enter SSN numbers on this form as it may		•		-	Open to Public Inspection for 501(c)(3) Organizations Only	
A []	Check box if address changed		Name of organization (Check box if name c				D Employer identification n (Employees' trust, see instructions.)		
B Ex	kempt under section	Print	PUBLIC LIBRARY OF SCIENCE					68-0492065	
]501(c)(3)	or	Number, street, and room or suite no. If a P.O. bo	x, see in	structions.			ated business activity codes	
	408(e) 220(e)	Туре	1160 BATTERY STREET, NO. 225	,			(3661	nstructions.)	
	408A 530(a)		City or town, state or province, country, and ZIP o	r foreig	n postal code		1		
]529(a)		SAN FRANCISCO, CA 94111				5111	90	
C Boo	ok value of all assets and of year		exemption number (See instructions.)	▶	_				
			corganization type 🕨 🔯 501(c) corporatio		501(c) trust	401(a) trust		Other trust	
			ary unrelated business activity. ADVERTISIN			• •			
		-	oration a subsidiary in an affiliated group or a parent	nt-subsi	diary controlled group?	Þ L	Ye	es X No	
			ifying number of the parent corporation. ► USAN AU, DIRECTOR OF FINANCE AND		Talanha	ne number 🕨 (115)	624-1200	
			le or Business Income		(A) Income	(B) Expenses		(C) Net	
	Gross receipts or sal						,		
	Less returns and allo		c Balance	1c					
2			A, line 7)	2					
3			om line 1c	3					
			h Schedule D)	4a					
			art II, line 17) (attach Form 4797)	4b					
			its	4c					
5			ips and S corporations (attach statement)	5					
6	Rent income (Schedu	ule C)		6					
7	Unrelated debt-finance	ced incon	ne (Schedule E)	7					
8	Interest, annuities, ro	oyalties, a	nd rents from controlled organizations (Sch. F) $_{\dots}$	8					
9	Investment income o	of a sectio	n 501(c)(7), (9), or (17) organization (Schedule G)	9					
10			me (Schedule I)	10	474,914.	367,	,908.	107,006.	
11			J)	11					
12			s; attach schedule)						
	Total. Combine lines	s 3 throu	gh 12 o t Taken Elsewhere (See instructions fo	13	474,914.	367,	,908.	107,006.	
Ta	(Except for	contribu	itions, deductions must be directly connected	d with t	he unrelated business i				
14			rectors, and trustees (Schedule K)				14		
15							15		
16							16		
17							17		
18 19							18 19		
20			e instructions for limitation rules)				20		
21			j62)				20		
22			n Schedule A and elsewhere on return				22b		
23							23		
24			npensation plans				24		
25							25		
26			hedule I)				26	107,006.	
27			nedule J)				27		
28	Other deductions (a	ttach sch	edule)				28		
29	Total deductions. A	Add lines	14 through 28				29	107,006.	
30	Unrelated business	taxable ir	ncome before net operating loss deduction. Subtrac	t line 29) from line 13		30	0.	
31			(limited to the amount on line 30)				31		
32			ncome before specific deduction. Subtract line 31 fr				32	0.	
33			/ \$1,000, but see line 33 instructions for exceptions				33	1,000.	
34			income. Subtract line 33 from line 32. If line 33 is	-			<u>.</u> .	_	
	line 32						34	0.	

Form 990-T	(2016) PUBLIC LIBRARY OF SCIENCE	68-0492	-0492065				
Part I	I Tax Computation						
35	Organizations Taxable as Corporations. See instructions for tax computation.						
	Controlled group members (sections 1561 and 1563) check here See instructions an	nd:					
	Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order						
u	(1) <u>\$</u> (2) <u>\$</u> (3) <u>\$</u>). 					
D	Enter organization's share of: (1) Additional 5% tax (not more than \$11,750)						
	(2) Additional 3% tax (not more than \$100,000) \$				<u> </u>		
	Income tax on the amount on line 34			35c	0.		
36	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount						
	Tax rate schedule or Schedule D (Form 1041)		►	36			
37	Proxy tax. See instructions			37			
38	Alternative minimum tax			38			
39	Tax on Non-Compliant Facility Income. See instructions			39			
	Total. Add lines 37, 38 and 39 to line 35c or 36, whichever applies			40	0.		
Part I							
	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	41a					
				-			
	Other credits (see instructions)			-			
	General business credit. Attach Form 3800			-			
	Credit for prior year minimum tax (attach Form 8801 or 8827)						
	Total credits. Add lines 41a through 41d			41e			
42	Subtract line 41e from line 40			42	0.		
43	Other taxes. Check if from: Form 4255 Form 8611 Form 8697 Form 88	66 🛄 Ot	her (attach schedule)	43			
44	Total tax. Add lines 42 and 43			44	0.		
45 a	Payments: A 2015 overpayment credited to 2016	45a	13,196.				
	2016 estimated tax payments	45b					
	Tax deposited with Form 8868	45c					
	Foreign organizations: Tax paid or withheld at source (see instructions)	45d					
	Backup withholding (see instructions)	45e					
f	Credit for small employer health insurance premiums (Attach Form 8941)	45f					
	Other credits and payments: Form 2439			-			
y		45 -					
40					13,196.		
	Total payments. Add lines 45a through 45g			46	15,190.		
	Estimated tax penalty (see instructions). Check if Form 2220 is attached 🕨 🛄			47			
	Tax due. If line 46 is less than the total of lines 44 and 47, enter amount owed			48			
	Overpayment. If line 46 is larger than the total of lines 44 and 47, enter amount overpaid			49	13,196.		
		.3,196.	Refunded 🕨 🕨	50	0.		
Part V	Statements Regarding Certain Activities and Other Informatio	n (see ins	structions)				
51	At any time during the 2016 calendar year, did the organization have an interest in or a signature	or other auth	nority		Yes No		
	over a financial account (bank, securities, or other) in a foreign country? If YES, the organization	may have to	file				
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If YES, enter the name of the f	foreign count	try				
	here UNITED KINGDOM				X		
52	During the tax year, did the organization receive a distribution from, or was it the grantor of, or tr	ansferor to,	a foreign trust?		X		
	If YES, see instructions for other forms the organization may have to file.						
53	Enter the amount of tax-exempt interest received or accrued during the tax year > \$						
	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and sta			edge and belief, it i	s true,		
Sign	correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer	r has any know	-				
Here	CFO			May the IRS discus			
	Signature of officer Date Title			nstructions)? X	Yes No		
	Print/Type preparer's name Preparer's signature Da	lle		if PTIN			
Paid	W/Athen	10/16/17	self- employed		274		
Prepa		10/10/11	<u> </u>	P00650			
Use C			Firm's EIN 🕨	94-62	14841		
	12657 ALCOSTA BLVD, STE. 500				•		
	Firm's address 🕨 SAN RAMON, CA 94583-4600		Phone no. 9	25-790-260			
				Form	n 990-T (2016)		

Schedule A - Cost of Goods	Sold. Enter	method of inver	ntory v	aluation 🕨 N/A					
1 Inventory at beginning of year	1		6	Inventory at end of yea	ır		6		
2 Purchases				Cost of goods sold. Su					
3 Cost of labor				from line 5. Enter here					
4a Additional section 263A costs				line 2			7		
(attach schedule)	4a		8		263A (\	with respect to		Yes	No
b Other costs (attach schedule)				property produced or a	acquired	for resale) apply to			
5 Total. Add lines 1 through 4b	5			the organization?					
Schedule C - Rent Income ((see instructions)	From Real	Property and	l Per	sonal Property L	.ease	d With Real Prop	erty)	
1. Description of property									
(1)									
(2)									
(3)									
(4)									
	2. Rent receive	ed or accrued							
(a) From personal property (if the perc rent for personal property is more 10% but not more than 50%)	personal	onal property (if the percenta property exceeds 50% or if ed on profit or income)	ge	3(a) Deductions directly columns 2(a) a	/ conne nd 2(b)	cted with the income in (attach schedule)	I		
(2)									
(3)									
(4)									
Total	0.	Total			Ο.				
(c) Total income. Add totals of columns there and on page 1, Part I, line 6, column	(A)	►			٥.	(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B)	. 🕨		0.
Schedule E - Unrelated Deb	t-Financed	Income (see	instru	ctions)					
				. Gross income from		 Deductions directly con to debt-finant 			
1. Description of debt-fin	anced property				(a)	(a) Straight line depreciation (attach schedule)		(b) Other deductions (attach schedule)	
(1)									
(2)									
(3)									
(4)									
 4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule) 5. Average adjusted basis of or allocable to debt-financed property (attach schedule) 			e	Column 4 divided by column 5	7. Gross income reportable (column 2 x column 6)			8. Allocable deducti (column 6 x total of col 3(a) and 3(b))	
(1)				%					
(2)				%					
(3)				%					
(4)				%					
			•			nter here and on page 1, Part I, line 7, column (A).		Enter here and on page Part I, line 7, column (
Totals				▶		C).		0.
Total dividends-received deductions in		. 0							٥.

Form **990-T** (2016)

Form 990-T (2016) PUBLIC LI	BRARY OI	F SCIENC	Е						68-049	2065	Page 4
Schedule F - Interest, A	nnuitie	s, Royal	ties, and	d Rents	From Co	ntrolle	d Organiza	tions	(see ins	structions	
				Exempt 0	Controlled O	rganizati	ons				
1. Name of controlled organizati	on	n 2. Employer 3 identification (interview) number			elated income instructions)		4. Total of specified payments made		5. Part of column 4 that is included in the controlling organization's gross income		6. Deductions directly connected with income in column 5
(1)											
(2)											
(3)											
(4)											
Nonexempt Controlled Organiz	ations					1					
7. Taxable Income		nrelated incom		0 Total	of specified payr	mente	10. Part of colu	mn 0 that	t is included	11 Ded	uctions directly connected
. Takado modine		ee instructions		9. Total	made	nenta	in the controlli		ization's		income in column 10
(1)											
(2)											
(3)											
_(4)							Add colun Enter here and line 8, c		1, Part I,	Enter he	d columns 6 and 11. are and on page 1, Part I, ine 8, column (B).
Totals						►		, solution (۰, ^۰ ٥.		0.
Schedule G - Investmen (see instr		ne of a S	Section	501(c)(7	'), (9), or (17) Org	ganization				
1. Descr	iption of inco	me			2. Amount of	income	 Deductio directly conner (attach sched) 	cted	4. Set- (attach s	asides chedule)	5. Total deductions and set-asides (col. 3 plus col. 4)
(1)											
(2)											
(3)											
(4)											
					Enter here and Part I, line 9, co						Enter here and on page 1, Part I, line 9, column (B).
Totals				►		0.					0.
Schedule I - Exploited I (see instru	-	Activity	Income	, Other	Than Adv	rtisin	ig Income				
1. Description of exploited activity	unrelated incom		3. Exp directly co with pro of unre business STMT	onnected duction elated	 Net incon from unrelated business (cc minus colum gain, compute through 	l trade or lumn 2 n 3). If a e cols. 5	 Gross inco from activity t is not unrelat business inco 	hat ed	6. Exp attribut colur STMT 3	able to mn 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1) ONLINE PUBLICATIONS	4	74,914.		67,908.	10	7,006.	36,772,	796.		71,102.	107,006.
(2) (3)		,				, .					
(4)											1
	Enter her page 1 line 10,		Enter her page 1, line 10,	, Part I,							Enter here and on page 1, Part II, line 26.
Totals ►		74,914.		67,908.							107,006.
Schedule J - Advertisir	ng Incor	ne (see i	nstruction	s)							
Part I Income From F	Periodic	als Repo	orted or	n a Cons	solidated	Basis					
1. Name of periodical		2. Gross advertising income		3. Direct rtising costs	or (loss) (c col. 3). If a g	tising gain ol. 2 minus ain, comput nrough 7.	5. Circulat income		6. Reade cost		7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)											
(2)											
(3)											
(4)											
<u>···</u>											
Totals (carry to Part II, line (5))	►		0.	0							0.

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Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

1. Name of periodical	2. Gross advertising income	dvertising advertising costs (col. 3) If a gain compute income				7. Excess readership costs (column 6 minus column 5, but not more than column 4).				
(1)										
(2)										
(3)										
(4)										
Fotals from Part I	0.		٥.							0.
	Enter here and on page 1, Part I, line 11, col. (A). Enter here and on page 1, Part I, line 11, col. (B).								Enter here and on page 1, Part II, line 27.	
Totals, Part II (lines 1-5)► Schedule K - Compensatior	0.		0.							0.
Schedule K - Compensatior	n of Officers, I	Directo	ors, and	Trustees (see in	nstructio	ns)				
1. Name			2. Title 3. Percent of time devoted to business			 Compensation attributable to unrelated business 				
(1)							%			
(2)							%			
(3)							%			
(4)							%			
Fotal . Enter here and on page 1, Part II, li	ne 14									٥.

Form 990-T (2016)

Page 5

68-0492065

FORM 990-T	NET	OPERATING LOSS	DEDUCTION	STATEMENT 1
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
12/31/14	25,793.	3,498.	22,295.	22,295.
NOL CARRYOV	ER AVAILABLE THIS	YEAR	22,295.	22,295.

	XPENSES DIR OF UNRELATE		-	STATEMENT 2
DESCRIPTION		ACTIVITY NUMBER	AMOUNT	TOTAL
ONLINE PUBLICATIONS	- SUBTOTAL -	· 1	367,908.	367,908
TOTAL OF FORM 990-T, SCHEDULE	I, COLUMN	3		367,908
FORM 990-T SCHEDULE I - E WITH PRODUCTIO				STATEMENT 3
				STATEMENT 3 TOTAL
WITH PRODUCTIO	ON OF UNRELA	ATED BUSINE; ACTIVITY NUMBER	SS INCOME	