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ARMANINO LLP

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

Department of the Treasury Internal Revenue Service

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

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

Inspection

OMB No. 1545-0047

ΑF	or th	e 2021 calendar year, or tax year beginning	and	ending			
B c	heck if pplicab	C Name of organization			D Employer in	dentific	cation number
	Addre	e PUBLIC LIBRARI OF SCIENCE					
	Name	e Doing business as			68-049	2065	
	Initial return Final	Number and street (or P.O. box if mail is not del 1265 BATTERY STREET, STE	ivered to street address)	Room/suite 200	E Telephone (415) 6		
	⊒return termir ated		7IP or foreign postal code		G Gross receipts		42,646,152.
	□Amen	, , , , , , , , , , , , , , , , , , , ,	Zii oi loreigii postai code		H(a) Is this a g		
	return Applio tion		RN MOTONAGA		for subord		
	tion pendi	SAME AS C ABOVE					cluded? Yes No
	-01/ 01/		◀ (insert no.) 4947(a)(1)	or 527	1		
		empt status: X 501(c)(3) 501(c)() te: WWW.PLOS.ORG		01 321	1		list. See instructions
			sociation Other	I Veen	H(c) Group ex		
	orm o	organization: X Corporation Trust As	Sociation Utilei	L Year	of formation: 200	/	1 State of legal domicile: CA
		<u>-</u>	-iigi	CEE CCUI	יחוו ד ט דטס		
Governance	1	Briefly describe the organization's mission or most COMPLETE DESCRIPTION OF THE ORGANIZAT		SEE SCHE	EDOLL O FOR		
rna	2	Check this box if the organization discor	ntinued its operations or dispos	sed of more	than 25% of its	net ass	ets.
Š.	3	Number of voting members of the governing body	(Part VI, line 1a)			3	8
	4	Number of independent voting members of the gov					7
တို	5	Total number of individuals employed in calendar y					156
iŧi	6	Total number of volunteers (estimate if necessary)					11000
Activities &	7 a	Total unrelated business revenue from Part VIII, col					277,534.
⋖		Net unrelated business taxable income from Form					74,271.
					Prior Year		Current Year
•	8	Contributions and grants (Part VIII, line 1h)			60	,366.	2,574,373.
Revenue	9				32,747	,234.	34,399,920.
ě	10	Investment income (Part VIII, column (A), lines 3, 4,			428	897.	1,165,406.
æ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c,			1	318.	0.
	12	Total revenue - add lines 8 through 11 (must equal			33,237	815.	38,139,699.
	13	Grants and similar amounts paid (Part IX, column (,	0.	0.
	14	Benefits paid to or for members (Part IX, column (A				0.	0.
	45	Salaries, other compensation, employee benefits (F			18,774	597.	19,868,916.
ses	16a	Professional fundraising fees (Part IX, column (A), li			, ,	0.	0.
Expenses	h	Total fundraising expenses (Part IX, column (D), line		0.			
Ä	17	Other expenses (Part IX, column (A), lines 11a-11d,	· · · · · · · · · · · · · · · · · · ·		12,320	632.	12,645,627.
		Total expenses. Add lines 13-17 (must equal Part IX			31,095		32,514,543.
	19	Revenue less expenses. Subtract line 18 from line			2,142		5,625,156.
7 8		Tieveride less expenses. Subtract line 10 from line	12	Ra	ginning of Current		End of Year
t Assets or	20	Total assets (Part X, line 16)		<u> </u>	22,062		24,530,446.
ASS	21	Total liabilities (Part X, line 26)			7,229		4,498,245.
Net.	22	Net assets or fund balances. Subtract line 21 from	line 20		14,833		20,032,201.
	rt II	Signature Block	IIII 20			<u>, , , , , , , , , , , , , , , , , , , </u>	
		Ilties of perjury, I declare that I have examined this return,	including accompanying schedule	s and stateme	ents, and to the be	st of my	knowledge and belief it is
		ct, and complete. Declaration of preparer (other than office					momouge and somen, me
,		A sure completes posterior of property (care main care)	.,	mon proparo		<u></u>	
Sigi	n	Signature of officer			Date		
Her		KATHYRN MOTONAGA, CFO					
1101	•	Type or print name and title					
		Print/Type preparer's name	Dranarar's signatura	П	Date	Check	PTIN
Paid		KATY BROWN	Preparer's signature KATY BROWN		1 /11 /00 i	f 🗀	
	arer	Firm's name ARMANINO LLP		<u> </u>	Firm's E	self-employe	94-6214841
	Only		500		FIIIIIST	_111	
036	Jilly	Firm's address 12657 ALCOSTA BLVD, STE. SAN RAMON, CA 94583-4600	-		Dhona	925	-790-2600
Mar	, +b o l	29 discuss this return with the preparer shown above	va? Caa inaturations		I Piloffe I	10.723	X Ves No

Pai	rt III Statement of Program Service Accomplishments	X
_	Check if Schedule O contains a response or note to any line in this Part III	<u>_</u>
1	Briefly describe the organization's mission: PLEASE SEE SCHEDULE O FOR COMPLETE DESCRIPTION OF THE ORGANIZATION'S	
	MISSION.	
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
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes X No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by	expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total experience of the section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total experience of the section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total experience of the section 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total experience of the section 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total experience of the section 501(c)(4) organizations are required to report the amount of grants and allocations to others, the section 501(c)(4) organization for the section 501(c)(4) organization for the section 501(c)(4) organization for the section for the secti	penses, and
	revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$27,640,485. including grants of \$) (Revenue \$	34,122,386.
	SCIENCE AND MEDICAL PUBLISHING ARE THE CORE OF PLOS PROGRAM EXPENSE AT	
	OVER \$28 MILLION. THE ACTIVITIES INVOLVED IN OUR PUBLISHING OPERATION	
	INCLUDE:	
	EDITORIAL AND PRODUCTION WORK - RECEIPT AND TRIAGE OF SUBMISSIONS;	
	PERFORMING/COORDINATING THEIR PEER REVIEW; AND PRODUCTION AND ONLINE PUBLICATION OF ACCEPTED ARTICLES.	
	MARKETING AND OUTREACH - PROMOTING ARTICLES AND INVITING SUBMISSIONS.	
	INCREASING AWARENESS AND UNDERSTANDING OF OPEN SCIENCE BENEFITS AND	
	PRACTICES. PROMOTING INITIATIVES SUCH AS CALLS FOR PAPERS. AND CREATING	
	RESOURCES FOR AUTHORS AND REVIEWERS.	
	PUBLISHING ETHICS - HANDLING ETHICAL AND SCIENTIFIC CONCERNS INVOLVING	
	SUBMISSIONS AND PUBLISHED ARTICLES.	
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$	
	/ (a.pa.i.a.a.) / (a.pa.i.a.a.) / (i.a.pa.i.a.a.)	
4c	(Code:) (Expenses \$) (Revenue \$))
4d	Other program services (Describe on Schedule O.)	
-t u)
4e	(Expenses \$ including grants of \$) (Revenue \$ Total program service expenses ► 27,640,485.	
TÜ	Total program delivide expended P	Form 990 (2021)

Form 990 (2021) PUBLIC LIBRARY OF SCIENCE Part 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? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		х
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			
Ŭ	similar amounts as defined in Rev. Proc. 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	١		
U	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
7	\cdot	-		
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		x
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			x
	Schedule D, Part III	8		
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 donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	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		Х
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		Х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
-	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the constitution maintain on office constitution and the the the the the the Chatego	14a	Х	
b	Did the organization maintain an office, employees, or agents outside of the United States? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	, .u		
D	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	שדו		
13		15		x
16	foreign organization? If "Yes," complete Schedule F, Parts II and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	15		
10		46		x
47	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			x
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		<u> </u>
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		Х
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
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I, Parts I and II	21		Х

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Form 990 (2021) Public Library of Science Part IV Checklist of Required Schedules (continued)

	· (continued)		V	N _a
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		Yes	No
22		22		x
23	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
20	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	,	23	х	
24 a	Schedule J Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
Z-Tu	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
h	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	240		
·		24c		
ч	any tax-exempt bonds? 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	240		
2 04	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	254		
b	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes." complete			1
		25b		x
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	230		
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			1
		26		x
27	controlled entity or family member of any of these persons? <i>If</i> "Yes," <i>complete Schedule L, Part II</i> Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,	20		
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? <i>If</i> "Yes," <i>complete Schedule L, Part III</i>	27		x
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>			
u	"Yes," complete Schedule L, Part IV	28a		x
h	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		х
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If	200		
·	"Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
00	contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes," <i>complete</i>	ļ		
-	Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
-	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	х	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	00		
•	Part V, line 1	34		x
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		х
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	100		
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		l
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	100		
	If "Yes," complete Schedule R, Part V, line 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	55		
٠.	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 on Schedule O for Part VI, lines 11b and 19?	J.		
	Note: All Form 990 filers are required to complete Schedule O	38	х	l
Pa		, 50	1	
	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 75	,		
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b	-		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
_	(gambling) winnings to prize winners?	10	х	

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	1990 (2021) PUBLIC LIBRARY OF SCIENCE 68-0492	065	F	Page 5			
Pai	rt V Statements Regarding Other IRS Filings and Tax Compliance (continued)						
			Yes	No			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,						
	med for the defender year origing with or within the year dovoice by this retain	56					
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?						
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.						
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	. 3a	Х				
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	<u>3b</u>	Х				
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a						
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Х				
b	If "Yes," enter the name of the foreign country ► UNITED KINGDOM	_					
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).						
5а	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	. <u>5a</u>		X			
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			Х			
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	. <u>5c</u>	-				
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		+	X			
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	. <u>7b</u>		-			
С	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			V			
e	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?		+	<u> </u>			
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?) <u>7h</u>					
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.	00					
a	Did the sponsoring organization make any taxable distributions under section 4966?						
10	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	. 96					
10	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 10a						
a	C	\dashv					
11	Section 501(c)(12) organizations. Enter:	\dashv					
''							
b	Gross income from members or shareholders Gross income from other sources. (Do not net amounts due or paid to other sources against	\dashv					
	amounts due or received from them.)						
12a	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	120					
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	\dashv					
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						
С	Enter the amount of reserves on hand 13c						
14a		. 14a		Х			
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O						
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or						
	excess parachute payment(s) during the year?	15		х			
	If "Yes," see the instructions and file Form 4720, Schedule N.						
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	. 16		Х			
	If "Yes," complete Form 4720, Schedule O.						

Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any

activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?

6 Form **990** (2021) 2021.05000 PUBLIC LIBRARY OF SCIENCE 105620_1

If "Yes," complete Form 6069.

PUBLIC LIBRARY OF SCIENCE Form 990 (2021) Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section 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 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. **b** Enter the number of voting members included on line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Х officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 Х of officers, directors, trustees, or key employees to a management company or other person? 3 Х Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? Х 6 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? 8a **b** Each committee with authority to act on behalf of the governing body? Х 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes." provide the names and addresses on Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Nο 10a Did the organization have local chapters, branches, or affiliates? b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe on Schedule O the process, if any, used by the organization to review this Form 990. X 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Х 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe Х 12c on Schedule O how this was done Did the organization have a written whistleblower policy? Х 13 13 14 Х 14 Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official X 15a Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a Х taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed CA

Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

X Own website Another's website X Upon request Upon request Other (explain on Schedule O)

Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial 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 books and records	▶.
	KATHRYN MOTONAGA, CFO - (415) 624-1200	
	1265 BATTERY STREET, STE, 200, SAN FRANCISCO, CA 94111	

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

Check if Schedule O contains a response or note to any line in this Part VII

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the 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, Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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.

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

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

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

(A)	(B)	J			C)	.,0 0		(D)	(E)	(F)
Name and title	Average			Pos	ition			Reportable	Reportable	Estimated
rame and the	hours per					than o s both		compensation	compensation	amount of
	week					r/trus		from	from related	other
	(list any	ector						the	organizations	compensation
	hours for	or dire	a a			ted		organization	(W-2/1099-MISC/	from the
	related	stee	truste		e e	beusa		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	ıal tru	onal		ploye	ee ee		1099-NEC)		and related
	below line)	ndividual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) ALISON MUDDITT	40.00	=	드	0	호	工品	프			
CHIEF EXECUTIVE OFFICER		х		х				433,152.	0.	38,803.
(2) VERONIQUE KIERMER	40.00							,		,
PUBLISHER & EXEC EDITOR					х			299,881.	0.	34,366.
(3) VIKAS THAKKER	40.00									
CHIEF DIGITAL OFFICER (LEFT 11/21)						Х		298,833.	0.	28,828.
(4) REBEKAH DARKSMITH	40.00									
CHIEF MARKETING OFFICER					Х			264,884.	0.	31,264.
(5) KRISTINA MARTIN	40.00									
CHIEF PEOPLE & CULTURE					Х			254,896.	0.	27,954.
(6) AARON DODDS	40.00	1								
DIRECTOR PRODUCT MGMT						Х		218,904.	0.	19,121.
(7) NIAMH O'CONNOR	40.00	4								
CHIEF PUBLISHING OFFICER					Х			198,295.	0.	32,866.
(8) CLARE E. DEAN	40.00	-								
DIR, JOURNAL MKT & OUTREACH						Х		191,601.	0.	38,801.
(9) CHRISTIAN A. HAUMESSER	40.00	-							_	
DIR, PLATFORM & ENGINEERING (LEFT 08						Х		153,671.	0.	12,612.
(10) TODOR I. GRIGOROV	40.00	-							_	
CHIEF FINANCIAL OFFICER				Х				161,237.	0.	4,683.
(11) MIDORI BAER	40.00	-							_	
DIRECTOR OF PUBLISHING SERVICES						Х		119,855.	0.	23,399.
(12) KATHRYN MOTONAGA	40.00	-						104 500		6 743
CHIEF FINANCIAL OFFICER (START 07/21	5.00			Х				124,733.	0.	6,743.
(13) MEREDITH T. NILES	5.00								0	
BOARD MEMBER	F 00	Х						0.	0.	0.
(14) JENNY MACHIDA BOARD MEMBER	5.00	X							0.	0
	5 00	^						0.	0.	0.
(15) ALASTAIR ADAM BOARD MEMBER	5.00	x						0.	0.	0.
(16) SURESH BHAT	5.00								<u> </u>	· · ·
BOARD MEMBER	3.00	х						0.	0.	0.
(17) SIMINE VAZIRE	5.00	 -						•		<u>·</u>
BOARD MEMBER		х						0.	0.	0.
	1									Form 990 (2021)

101111 330 (2021)												<u> 190 - </u>
Part VII Section A. Officers, Directors, Tru	istees, Key Emp	oloy	ees,	and	l Hiç	ghes	t C	ompensated Employee	s (continued)			
(A) Name and title	(B) Average hours per	(do box	not c	Pos heck i	ition more rson i		one n an	(D) Reportable compensation	(E) Reportable compensation	l '	(F) stimate nount o	
	week (list any hours for related organizations below line)	tee or director	Institutional trustee	Officer P		Highest compensated employee		from the organization (W-2/1099-MISC/ 1099-NEC)	from related organizations (W-2/1099-MISC/ 1099-NEC)	fr org an	other pensate om the panizati d relate anization	e ion ed
(18) KEITH YAMAMOTO	5.00											
BOARD MEMBER		Х						0.	0.			0.
(19) FERNAN FEDERICI BOARD MEMBER (START 09/21)	5.00	x						0.	0.			0.
								2 710 042	0.			
1b Subtotal								2,719,942.	0.		299,	0.
c Total from continuation sheets to Part d Total (add lines 1b and 1c)								2,719,942.	0.		299,	
 Total number of individuals (including but compensation from the organization 							o re	ceived more than \$100,	000 of reportable			32
			_		_	_					Yes	No
3 Did the organization list any former office line 1a? <i>If</i> "Yes," <i>complete Schedule J for</i>			•	•	•	-	•		•	3		х
4 For any individual listed on line 1a, is the								er compensation from the				

3	Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on			
	line 1a? If "Yes," complete Schedule J for such individual	3		Х
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization			
	and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	Х	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services			
	rendered to the organization? f "Yes." complete Schedule J for such person	5		Х
0	stion B. Indonesidant Contractors			

Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A)	(B)	(C)
Name and business address	Description of services	Compensation
APEX COVANTAGE, LLC, 4045 SHERIDAN AVENUE,		
SUITE 266, MIAMI, FL 33140	COMPOSITION	1,778,900.
EDITORIAL OFFICE LTD, AVEBURY HOUSE, 6 ST		
PETER ST, WINCHESTER, UNITED KINGDOM SO2	EDITORIAL SERVICES	1,060,077.
CLARIVATE ANALYTICS (US) LLC, 1500 SPRING		
GARDEN STREET, PHILADELPHIA, PA 19130	AUTHOR CONNECT SERVICES	890,374.
ARIES SYSTEMS CORPORATION, 50 HIGH STREET,	MANUSCRIPT SUBMISSION AND	
SUITE 21, NORTH ANDOVER, MA 01845	TRACKING SYSTE	776,090.
SPI TECHNOLOGIES, INC, SPI GLOBAL		
BUILDING, PASCOR DRIVE, PARANAQUE, MANILA,	TECHNOLOGY SERVICES	632,844.
2 Total number of independent contractors (including but not limited to those	listed above) who received more than	
\$100,000 of compensation from the organization \rightarrow 15		
	·	- 000 (2224)

Form 990 (2021) PUBLIC LIBITION PART VIII Statement of Revenue

			Check if Schedule O contains a	a response o	or note to any lin	e in this Part VIII			
					,	(A)	(B)	(C)	(D)
						Total revenue	Related or exempt	Unrelated	Revenue excluded from tax under
							function revenue	business revenue	sections 512 - 514
SS	1	_	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts				1b					
S S			Fundraising events	1c					
fts,			Related organizations	1d					
ij gi					2,573,660.				
ons,			Government grants (contributions)	1e	2,373,000.				
utic		T	All other contributions, gifts, grants, and		713.				
ĕ			similar amounts not included above	1f	713.				
ont		-	Noncash contributions included in lines 1a-1f	1g \$		2 574 272			
O g		n	Total. Add lines 1a-1f			2,574,373.			
			DUDI 141 MION DDD4 NDM		Business Code	20 400 244	20 400 244		
<u>c</u> e			PUBLICATION FEES, NET		519130	32,402,344.	32,402,344.		
erv		~	SUBSCRIPTIONS		519130	1,717,083.	1,717,083.		
ı S.			ADVERTISING		519130	277,534.		277,534.	
ran 3ev		d	REPRINTS		519130	2,959.	2,959.		
Program Service Revenue		е							
۵		f	All other program service revenue						
		g	Total. Add lines 2a-2f			34,399,920.			
	3		Investment income (including divide						
			other similar amounts)			612,076.			612,076.
	4		Income from investment of tax-exer	mpt bond p	roceeds				
	5		Royalties						
				(i) Real	(ii) Personal				
	6	а	Gross rents 6a						
		b	Less: rental expenses 6b						
		С	Rental income or (loss) 6c						
		d	Net rental income or (loss)						
	7	а	Gross amount from sales of (i)	Securities	(ii) Other				
			assets other than inventory 7a 5,	059,583.	200.				
		b	Less: cost or other basis						
ē			and sales expenses	504,729.	1,724.				
en		С		554,854.	-1,524.				
3e			Net gain or (loss)			553,330.			553,330.
her Revenue			Gross income from fundraising events		,				
됩	_		including \$	I					
			contributions reported on line 1c).	_					
			Part IV, line 18	I					
		b	Less: direct expenses						
			Net income or (loss) from fundraisir						
			Gross income from gaming activities						
	Ū	_	Part IV, line 19	I .					
		h	Less: direct expenses						
			Net income or (loss) from gaming a						
			Gross sales of inventory, less return						
	10	u	and allowances	I .					
		h	Less: cost of goods sold						
$\overline{}$			Net income or (loss) from sales of in	iveritory	Business Code				
sn	11	_							
Miscellaneous Revenue	11								
llar		b							
Sce		C	All other revenue						
Ž			All other revenue						
		е	Total Add lines 11a-11d			38 130 600	3/ 122 206	277 524	1 165 406
	12		Total revenue. See instructions			38,139,699.	34,122,386.	277,534.	1,165,406.

132009 12-09-21

	Check if Schedule O contains a respons	e or note to any line in t (A)	his Part IX(B)	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
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,				
	trustees, and key employees	1,966,264.	1,759,188.	207,076.	
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	14,627,706.	12,340,525.	2,287,181.	
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	340,000.	304,193.	35,807.	
9	Other employee benefits	1,597,015.	1,428,827.	168,188.	
10	Payroll taxes	1,337,931.	1,197,028.	140,903.	
11	Fees for services (nonemployees):				
а	Management				
b	Legal	119,825.	67,478.	52,347.	
С	Accounting	86,170.	48,526.	37,644.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	20,921.		20,921.	
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A), amount, list line 11g expenses on Sch O.)	884,269.	497,967.	386,302.	
12	Advertising and promotion	1,163,013.	1,163,013.		
13	Office expenses	1,278,537.	460,736.	817,801.	
14	Information technology	1,576,272.	1,408,991.	167,281.	
15	Royalties				
16	Occupancy	1,167,385.	1,086,000.	81,385.	
17	Travel	127,763.	87,068.	40,695.	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	150,524.	140,030.	10,494.	
23	Insurance	102,084.	94,967.	7,117.	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
а	PRODUCTION COSTS	5,525,683.	5,525,683.		
b	TRAINING & RECRUITMENT	441,805.	30,265.	411,540.	
c	MISCELLANEOUS EXPENSE	1,376.	•	1,376.	
d		·		·	
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	32,514,543.	27,640,485.	4,874,058.	0
26	Joint costs. Complete this line only if the organization				
-	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

Form 990 (2021)
Part X | Balance Sheet

Par	t X	Balance Sheet					
		Check if Schedule O contains a response or	note to any	line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing Savings and temporary cash investments			2,724,775.	1	1,818,982
	2				175,976.	2	175,976
	3	Pledges and grants receivable, net		3			
	4	Accounts receivable, net	4,153,521.	4	5,894,599		
	5	Loans and other receivables from any curren					
		trustee, key employee, creator or founder, su	ıbstantial c	ontributor, or 35%			
		controlled entity or family member of any of t	hese perso	ons		5	
	6	Loans and other receivables from other disqu	ualified per				
		under section 4958(f)(1)), and persons descri	bed in sect	ion 4958(c)(3)(B)		6	
s,	7	Notes and loans receivable, net			64,140.	7	
Assets	8	Inventories for sale or use				8	
₽ B	9	Duran did assessed and defense did a server			1,138,285.	9	852,450
	10a	Land, buildings, and equipment: cost or othe					
		basis. Complete Part VI of Schedule D	10a	4,033,290.			
	b	Less: accumulated depreciation		3,476,625.	93,302.	10c	556,665
	11	Investments - publicly traded securities			13,704,267.	11	15,223,360
	12	Investments - other securities. See Part IV, lir				12	
	13	Investments - program-related. See Part IV, lii				13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			8,402.	15	8,40
	16	Total assets. Add lines 1 through 15 (must e	22,062,668.	16	24,530,44		
	17	Accounts payable and accrued expenses			4,110,669.	17	3,773,16
	18	Grants payable		18			
	19	Deferred revenue			340,956.	19	535,94
	20	Tax-exempt bond liabilities				20	•
	21	Escrow or custodial account liability. Comple		ı		21	
,,	22	Loans and other payables to any current or for					
tie:		trustee, key employee, creator or founder, su					
Liabilities		controlled entity or family member of any of t				22	
<u> </u>	23	Secured mortgages and notes payable to un				23	
	24	Unsecured notes and loans payable to unrela		· · · · · · · · · · · · · · · · · · ·		24	
	25	Other liabilities (including federal income tax,	•				
		parties, and other liabilities not included on li					
		of Schedule D	,	· .	2,777,683.	25	189,141
	26	Takal Bala Biblion Adal Barar 47 Harrards OF			7,229,308.	26	4,498,245
		Organizations that follow FASB ASC 958, o			<u>, , ,</u>		
es		and complete lines 27, 28, 32, and 33.					
Ě	27	Net assets without donor restrictions			14,833,360.	27	20,032,203
33	28	Net assets with donor restrictions				28	
<u>ğ</u>		Organizations that do not follow FASB ASG					
ᆵ		and complete lines 29 through 33.	o 000, 0110				
ŏ	29	Capital stock or trust principal, or current fun	nde			29	
ets	30	Paid-in or capital surplus, or land, building, or				30	
Ass	31	Retained earnings, endowment, accumulated				31	
Net Assets or Fund Balances	32	Total net assets or fund balances			14,833,360.	32	20,032,201
Ž	33	Total liabilities and net assets/fund balances			22,062,668.	33	24,530,446

If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

or audits, explain why on Schedule O and describe any steps taken to undergo such audits

Act and OMB Circular A-133?

Form 990 (2021)

За

Х

SCHEDULE A

(Form 990)

Total

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization **Employer identification number** PUBLIC LIBRARY OF SCIENCE 68-0492065 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 X An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions))

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(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						
Ü	furnished by a governmental unit to						
	the organization without charge						
1	·						
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		T	1	T	T	
	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
7	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	
13	First 5 years. If the Form 990 is for th	e organization's fi	rst, second, third,	fourth, or fifth tax	year as a section 5	601(c)(3)	
	organization, check this box and stop	here					>
Sec	ction C. Computation of Publi						
14	Public support percentage for 2021 (li	ine 6, column (f), d	livided by line 11,	column (f))		14	%
15	Public support percentage from 2020	Schedule A, Part	II, line 14			15	%
16a	33 1/3% support test - 2021. If the o	organization did no	ot check the box o	n line 13, and line	14 is 33 1/3% or m	nore, check this box	x and
	stop here. The organization qualifies	as a publicly supp	orted organization				▶□
b	33 1/3% support test - 2020. If the o	organization did no	ot check a box on				
	and stop here. The organization quali						
17a	10% -facts-and-circumstances test		• •				
	and if the organization meets the facts	-					
	meets the facts-and-circumstances te		•	-	•	vivien and engania	
h	10% -facts-and-circumstances test	_	•		-		
	more, and if the organization meets th	_					. 5, 6 6,
	organization meets the facts-and-circu						
18	Private foundation. If the organizatio						
<u></u>		did flot officer a	207 011 1110 10, 10	a, 100, 11a, 01 111	S, 51100K (1113 DOX 6		(Form 990) 2021

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.)

Sed	etion A. Public Support	now, picase comp	icto i ait ii.j				
Cale	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	4,732.	3,606.	158,006.	60,366.	2,574,373.	2,801,083.
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the		31,689,229.	29,850,566.			163,230,577.
3	organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or bus- iness under section 513	33,002,000.	31,003,223.	23,030,300.	32,403,330.	34,122,300.	103,230,377.
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	35,087,598.	31,692,835.	30,008,572.	32,545,896.	36,696,759.	166,031,660.
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						0.
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0.
c	Add lines 7a and 7b						0.
	Public support. (Subtract line 7c from line 6.)						166,031,660.
	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
		35,087,598.	31,692,835.	30,008,572.	32,545,896.	36,696,759.	166,031,660.
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	564,541.	414,755.	421,974.	415,255.	612,076.	
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on	564,541.	414,755.	421,974.	415,255.	612,076.	2,428,601.
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)	35,652,139.	32,107,590.	30,430,546.	32,961,151.	· · ·	168,460,261.
	check this box and stop here	· ·					·
Sec	ction C. Computation of Public	Support Per	centage				
	Public support percentage for 2021 (li			olumn (f))		15	98.56 %
	Public support percentage from 2020		•			16	98.37 %
	ction D. Computation of Inves	<u>_</u>	•			•	<u>,,</u>
17	Investment income percentage for 20	21 (line 10c, colum	nn (f), divided by lir	ne 13, column (f))		17	1.44 %
	Investment income percentage from 2					18	1.63 %
19a	33 1/3% support tests - 2021. If the	organization did n				3 1/3%, and line 17	
b	more than 33 1/3%, check this box an 33 1/3% support tests - 2020. If the	-	-	•	• •		
	line 18 is not more than 33 1/3%, chec	ck this box and sto	op here. The organ	nization qualifies a	s a publicly suppo	rted organization	
20	Private foundation. If the organization		-	•		•	

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Schedule A (Form 990) 2021

Part IV | Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, 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 lines 3b and 3c 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 box 12a or 12b in Part I, answer lines 4b and 4c 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 lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7?

 If "Yes." complete Part I of Schedule L (Form 990).
- 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 on 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 on 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 line 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

		Yes	No
	1		
	2		
	3a		
	3b		
	SD		
	3с		
	4a		
	4b		
	4c		
	5a		
	5b		
_	5с		
	•		
	6		
	7		
	8		
	9a		
	9b		
	0-		
	9с		
	10a		
-	10b		
.1	/Faum	- 000	2021

Par	rt IV Supporting Organizations (continued)			
	· · · · · · · · · · · · · · · · · · ·		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	ction B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one			l
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's office directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)	rs,		
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one support	ed		l
	organization, describe how the powers to appoint and/or remove officers, 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			l
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			l
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
Sec	supervised, or controlled the supporting organization. Stion C. Type II Supporting Organizations	2		
	Alon of Typo ii oupporting organizations		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		162	NO
•	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			l
	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			l
	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 on line 2, above, did the organization's supported organizations have a			l
	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			
800	supported organizations played in this regard.	3		
	ction 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 instruc	tions).		
a	Somplete Selem			
b		(:tt	-1	
2	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity Activities Test. Answer lines 2a and 2b below.	see instruction	Yes	No
a			163	140
-	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			l
	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			l
	that these activities constituted substantially all of its activities.	2a		
b				
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
b				
	of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.	3b		ı

Pa	Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations				
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.				
	All other Type III non-functionally integrated supporting organizations must	st complete	Sections A through E.		
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)	
1	Net short-term capital gain	1			
2	Recoveries of prior-year distributions	2			
3	Other gross income (see instructions)	3			
4	Add lines 1 through 3.	4			
5	Depreciation and depletion	5			
6	Portion of operating expenses paid or incurred for production or				
	collection of gross income or for management, conservation, or				
	maintenance of property held for production of income (see instructions)	6			
7	Other expenses (see instructions)	7			
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8			
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)	
1	Aggregate fair market value of all non-exempt-use assets (see				
	instructions for short tax year or assets held for part of year):				
а	Average monthly value of securities	1a			
b	Average monthly cash balances	1b			
С	Fair market value of other non-exempt-use assets	1c			
d	Total (add lines 1a, 1b, and 1c)	1d			
е	Discount claimed for blockage or other factors				
	(explain in detail in 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 0.015 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 0.035.	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 0.85 of line 1.	2			
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3			
4	Enter greater of line 2 or line 3.	4			
5	Income tax imposed in prior year	5			
6	Distributable Amount. Subtract line 5 from line 4, unless subject to				
	emergency temporary reduction (see instructions).	6			
7	Check here if the current year is the organization's first as a non-functional	ally integrate	d Type III supporting orga	nization (see	
	instructions).				

Schedule A (Form 990) 2021

Par	Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)					
Secti	on D - Distributions			Current Year		
1	Amounts paid to supported organizations to accomplish exe	1				
2	Amounts paid to perform activity that directly furthers exemp					
	organizations, in excess of income from activity	2				
3	Administrative expenses paid to accomplish exempt purpose	3				
4	Amounts paid to acquire exempt-use assets		4			
_5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)	5			
_6	Other distributions (describe in Part VI). See instructions.		6			
7	Total annual distributions. Add lines 1 through 6.		7			
8	Distributions to attentive supported organizations to which the	ne organization is responsive				
	(provide details in Part VI). See instructions.		8			
9	Distributable amount for 2021 from Section C, line 6		9			
10	Line 8 amount divided by line 9 amount		10			
		(i)	(ii)	(iii)		
Secti	on E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions Pre-2021	Distributable Amount for 2021		
1	Distributable amount for 2021 from Section C, line 6					
2	Underdistributions, if any, for years prior to 2021 (reason-					
	able cause required - explain in Part VI). See instructions.					
3	Excess distributions carryover, if any, to 2021					
a	From 2016					
b	From 2017					
c	From 2018					
d	From 2019					
<u>e</u>	From 2020					
f	Total of lines 3a through 3e					
g	Applied to underdistributions of prior years					
<u>h</u>	Applied to 2021 distributable amount					
<u>i</u>	Carryover from 2016 not applied (see instructions)					
<u>j</u>	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.					
4	Distributions for 2021 from Section D,					
	line 7: \$					
<u>a</u>	Applied to underdistributions of prior years					
<u> </u>	Applied to 2021 distributable amount					
<u> </u>	Remainder. Subtract lines 4a and 4b from line 4.					
5	Remaining underdistributions for years prior to 2021, 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 2021. Subtract lines 3h					
	and 4b from line 1. For result greater than zero, explain in					
	Part VI. See instructions.					
7	Excess distributions carryover to 2022. Add lines 3j					
	and 4c.					
8	Breakdown of line 7:					
	Excess from 2017					
	Excess from 2018					
	Excess from 2019					
<u>a</u>	Excess from 2020 Excess from 2021					

Schedule A (Form 990) 2021

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

Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

► Attach to Form 990 or Form 990-PF.

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

OMB No. 1545-0047

2021

Employer identification number

Pī	68-0492065				
Organization type (check	one):				
Filers of:	Section:				
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization				
	4947(a)(1) nonexempt charitable trust not treated as a private foundation				
	527 political organization				
Form 990-PF	501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treated as a private foundation				
	501(c)(3) taxable private foundation				
	is covered by the General Rule or a Special Rule . c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	le. See instructions.			
-	on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling y one contributor. Complete Parts I and II. See instructions for determining a contributor'	•			
Special Rules					
sections 509(a)(1 contributor, during	on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, an g the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Z, line 1. Complete Parts I and II.	d that received from any one			
For an organization	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from	any one			
literary, or educa	g the year, total contributions of more than \$1,000 exclusively for religious, charitable, so cional purposes, or for the prevention of cruelty to children or animals. Complete Parts I (e (b) instead of the contributor name and address), II, and III.	•			
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year					
answer "No" on Part IV, lin	that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (File 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF and requirements of Schedule B (Form 990).	<i>"</i>			
LHA For Paperwork Reduc	tion Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.	Schedule B (Form 990) (2021)			

Schedule B (Form 990) (2021) Page **2**

Name of organization

Employer identification number

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Part I	Contributors (see instructions). Use duplicate copies of Part I if	additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions \$	Person Payroll Complete Part II for noncash contributions.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
NO.	Name, address, and ZiF + +	\$	Person Payroll Noncash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Tolling addition; till all 1 1	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990) (2021) Page **3**

Name of organization

Employer identification number

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Part II	Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.					
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
		 \$				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
		 \$				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
		\$				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			

Schedule B (Form 990) (2021) Page **4**

Name of organization **Employer identification number** PUBLIC LIBRARY OF SCIENCE 68 - 0492065Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990.

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

OMB No. 1545-0047

Inspection

Name of the organization

PUBLIC LIBRARY OF SCIENCE

Employer identification number 68 - 0492065

Par			or Accounts. Complete if the				
	organization answered "Yes" on Form 990, Part IV, lin	e o. (a) Donor advised funds	(b) Funds and other accounts				
4	Total number at and of year	(a) Bonor advised funds	(b) i unus and other accounts				
1 2	Total number at end of year						
3	Aggregate value of grants from (during year) Aggregate value of grants from (during year)						
4	Aggregate value at end of year						
5	Did the organization inform all donors and donor advisors in v	writing that the assets held in donor advise	d funds				
•	are the organization's property, subject to the organization's	-					
6	Did the organization inform all grantees, donors, and donor a						
_	for charitable purposes and not for the benefit of the donor o						
	impermissible private benefit?		Yes No				
Par	t II Conservation Easements. Complete if the org	ganization answered "Yes" on Form 990, P					
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).					
	Preservation of land for public use (for example, recrea	tion or education) Preservation of a	a historically important land area				
	Protection of natural habitat	Preservation of a	a certified historic structure				
	Preservation of open space						
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribution in the form o					
	day of the tax year.		Held at the End of the Tax Year				
	Total number of conservation easements		2a				
	-						
	Number of conservation easements on a certified historic stru						
d	Number of conservation easements included in (c) acquired a						
	listed in the National Register						
3	Number of conservation easements modified, transferred, rel	eased, extinguished, or terminated by the d	organization during the tax				
	year						
4	Number of states where property subject to conservation eas						
5	Does the organization have a written policy regarding the per		Yes No				
6	violations, and enforcement of the conservation easements it Staff and volunteer hours devoted to monitoring, inspecting,						
U	Starr and volunteer riours devoted to morntoning, inspecting,	manding of violations, and emorcing conse	a valion easements during the year				
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and enforcing conservation	on easements during the year				
•	► \$	ming of violations, and emoroting consolvation	on easements daring the year				
8	Does each conservation easement reported on line 2(d) abov	e satisfy the requirements of section 170(h)(4)(B)(i)				
	and section 170(h)(4)(B)(ii)?						
9	In Part XIII, describe how the organization reports conservation						
	balance sheet, and include, if applicable, the text of the footn	note to the organization's financial statemer	nts that describes the				
	organization's accounting for conservation easements.	-					
Par	Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.						
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.					
1a	If the organization elected, as permitted under FASB ASC 95	8, not to report in its revenue statement an	d balance sheet works				
	of art, historical treasures, or other similar assets held for public	olic exhibition, education, or research in fur	therance of public				
	service, provide in Part XIII the text of the footnote to its financial statements that describes these items.						
b	If the organization elected, as permitted under FASB ASC 95	8, to report in its revenue statement and ba	alance sheet works of				
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in further	erance of public service,				
	provide the following amounts relating to these items:						
	(i) Revenue included on Form 990, Part VIII, line 1		• \$				
2	If the organization received or held works of art, historical treatments	asures, or other similar assets for financial	gain, provide				
	the following amounts required to be reported under FASB A	_					
	Revenue included on Form 990, Part VIII, line 1						
-	Assets included in Form 990, Part X						
LHA	For Paperwork Reduction Act Notice, see the Instructions	s for Form 990.	Schedule D (Form 990) 2021				

Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value			
1a Land							
b Buildings							
c Leasehold improvements		615,885.	357,269.	258,616.			
d Equipment		2,469,587.	2,171,538.	298,049.			
e Other		947,818.	947,818.	0.			
Total, Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)							

Schedule D (Form 990) 2021

Schedule D (Form 990) 2021 PUBLIC LIBRARY OF	SCIENCE	0	8-0492065 Page 3
Part VII Investments - Other Securities.	5 000 B 1 N/ II	441.0.5.000.0.17.17.40	
Complete if the organization answered "Yes" of (a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	d-of-vear market value
(A) E	(b) Book value	(c) Method of Valuation. Cost of en	u-or-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" o			
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or en	d-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
<u>(6)</u>			
(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" of	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 Part X Other Liabilities.	<u>15.)</u>	>	
Complete if the organization answered "Yes" of	on Form 990 Part IV line	11e or 11f See Form 990 Part V line 25	
(a) Description of liability	orr orri 550, r art rv, iinc	THE OF THE GEET OF THE SOO, THE EX, IIII E ZO	(b) Book value
(1) Federal income taxes			(b) Book value
(2) DEFERRED RENT			189,141.
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	25.))	189,141.

organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII Schedule D (Form 990) 2021

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the

Sche	edule D (Form 990) 2021 PUBLIC LIBRARY OF SCIEN				68-04920	65 Page 4
Par	t XI Reconciliation of Revenue per Audited Fi	nancial Statemen	ts With R	evenue per Re	turn.	
	Complete if the organization answered "Yes" on Form	990, Part IV, line 12a.				
1	Total revenue, gains, and other support per audited financial	statements			1	37,691,087.
2	Amounts included on line 1 but not on Form 990, Part VIII, lin	e 12:				
а	Net unrealized gains (losses) on investments		2a	-426,315.		
b	Donated services and use of facilities		2b			
С	Recoveries of prior year grants		2c			
d	Other (Describe in Part XIII.)		2d	-1,376.		
е	Add lines 2a through 2d				2e	-427,691.
3	Subtract line 2e from line 1				3	38,118,778.
4	Amounts included on Form 990, Part VIII, line 12, but not on					
а	Investment expenses not included on Form 990, Part VIII, line		4a	20,921.		
b	Other (Describe in Part XIII.)		4b	•		
	Add lines 4a and 4b		-1.0		4c	20,921.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990				5	38,139,699.
	rt XII Reconciliation of Expenses per Audited F				_	, , ,
	Complete if the organization answered "Yes" on Form			•		
1					1	32,492,246.
2	Amounts included on line 1 but not on Form 990, Part IX, line					7 - 7 - 7 - 7 - 7
	Donated services and use of facilities		2a			
a			2b		-	
b	Prior year adjustments				-	
C	Other losses		2c		-	
d	Other (Describe in Part XIII.)		2d		-	0
e	Add lines 2a through 2d				2e	0.
3	Subtract line 2e from line 1				3	32,492,246.
4	Amounts included on Form 990, Part IX, line 25, but not on lin		1 . 1	20 021		
а	Investment expenses not included on Form 990, Part VIII, line			20,921.	-	
b	Other (Describe in Part XIII.)		4b	1,376.		00.00
С	Add lines 4a and 4b				4c	22,297.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 99	90. Part I. line 18.)			5	32,514,543.
	rt XIII Supplemental Information.					
	ide the descriptions required for Part II, lines 3, 5, and 9; Part II				; Part X, line	2; Part XI,
lines	2d and 4b; and Part XII, lines 2d and 4b. Also complete this pa	art to provide any additi	ional informa	tion.		
PART	X, LINE 2:					
PLOS	S HAS RECEIVED NOTIFICATION FROM THE INTERNAL I	REVENUE SERVICE AI	ND THE			
STAT	TE OF CALIFORNIA THAT IT QUALIFIES FOR TAX-EXEN	MPT STATUS UNDER S	SECTION			
501((C)(3) OF THE INTERNAL REVENUE CODE AND SECTION	1 27301D OF THE				
CALI	FORNIA REVENUE AND TAXATION CODE. THE EXEMPTION	ONS ARE SUBJECT TO)			
PERI	ODIC REVIEW BY THE FEDERAL AND STATE TAXING A	JTHORITIES, AND				
MANA	AGEMENT IS CONFIDENT THAT PLOS CONTINUES TO SA	TISFY ALL FEDERAL	AND			
STAT	E STATUTES IN ORDER TO QUALIFY FOR CONTINUED ?	TAX EXEMPTION STAT	rus.			
PLOS	MAY PERIODICALLY RECEIVE UNRELATED BUSINESS I	INCOME (SUCH AS				
ADVE	ERTISING INCOME, ETC.) REQUIRING PLOS TO FILE	SEPARATE TAX RETUI	RNS			
UNDE	ER FEDERAL AND STATE STATUTES. PLOS ALSO HAS CI	ERTAIN TRANSACTION	NS			
REQU	JIRING THE PAYMENT OF ADDITIONAL EMPLOYER TAXES	S TO HM REVENUE A	ND OIL			
					Calaaduda D	(Farm 000) 0004

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

➤ Attach to Form 990.

Open to Public

OMB No. 1545-0047

Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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

Employer identification number

PUBI	LIC LIBRARY OF SCIE	NCE				68-0492065	
Pa	rt I General Infor	mation on A	ctivities Out	side the United States. Comple	ete if the organ	ization answered "Y	'es" on
	Form 990, Part IV	/, line 14b.					
1	For grantmakers. Does	the organization	maintain record	ds to substantiate the amount of its gra	nts and other a	assistance,	
	the grantees' eligibility for	or the grants or a	ssistance, and t	he selection criteria used to award the	grants or assis	stance?	Yes No
2	For grantmakers. Desc United States.	ribe in Part V the	organization's p	procedures for monitoring the use of its	grants and ot	her assistance outsi	de the
3	Activities per Region. (Th	ne following Part	I, line 3 table ca	n 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 prod 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						
ICEI	LAND & GREENLAND)						
- AI	LBANIA, ANDORRA,				EDITORIAL S	SUPPORT TO	
AUS	TRIA, BELGIUM	2	69	PROGRAM SERVICES	SERVE U.S.	OPERATIONS.	4,492,646.
3 a	Subtotal	2	69				4,492,646.
	Total from continuation sheets to Part I	0	0				0.
С	Totals (add lines 3a	2	69				4 492 646

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

Schedule F (Form 990) 2021

PUBLIC LIBRARY OF SCIENCE

Part II Grants and Other Assistance to Organizations 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.

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)
	inization by the IRS, o	or for which the grantee	recognized as charities by the or counsel has provided a sec			\		

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed. (h) Method of valuation (book, FMV, appraisal, other) (d) Amount of (e) Manner of cash disbursement (c) Number of (f) Amount of (g) Description of (a) Type of grant or assistance (b) Region recipients cash grant noncash noncash assistance assistance

Part	IV	Foreign Forms		
1	the	s the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign poration (see Instructions for Form 926)	Yes	X No
2	be r Rec	the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and seipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X No
3	the	the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to tain Foreign Corporations (see Instructions for Form 5471)	Yes	X No
4	qua Info	s the organization a direct or indirect shareholder of a passive foreign investment company or a difficult lifted electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, ormation Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing and (see Instructions for Form 8621)	Yes	X No
5	the	the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain eign Partnerships (see Instructions for Form 8865)	Yes	X No

Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see

Instructions for Form 5713; don't file with Form 990)

Schedule F (Form 990) 2021

Yes X No

6

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.			

SCHEDULE J (Form 990)

Compensation Information

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

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

➤ Attach to Form 990.

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

2021

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

PUBLIC LIBRARY OF SCIENCE

Employer identification number 68-0492065

Pa	art I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			l
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			l
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
				l
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	X Compensation committee X Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation committee			l
				l
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a	Х	
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		Х
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			l
				l
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			l
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			l
	contingent on the revenues of:			
	The organization?	5a		X
b	Any related organization?	5b		Х
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
а	The organization?	6a		X
b	Any related organization?	6b		Х
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7	Х	
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		Х
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9	- 1	i

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

Schedule J (Form 990) 2021

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

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

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

		(B) Breakdown of W	I-2 and/or 1099-MIS0 compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)	
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990	
(1) ALISON MUDDITT	(i)	397,652.	35,500.	0.	16,189.	22,614.	471,955.	0.	
CHIEF EXECUTIVE OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.	
(2) VERONIQUE KIERMER	(i)	295,490.	3,538.	853.	11,752.	22,614.	334,247.	0.	
PUBLISHER & EXEC EDITOR	(ii)	0.	0.	0.	0.	0.	0.	0.	
(3) VIKAS THAKKER	(i)	202,583.	25,000.	71,250.	7,439.	21,389.	327,661.	0.	
CHIEF DIGITAL OFFICER (LEFT 11/21)	(ii)	0.	0.	0.	0.	0.	0.	0.	
(4) REBEKAH DARKSMITH	(i)	261,346.	3,538.	0.	8,650.	22,614.	296,148.	0.	
CHIEF MARKETING OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.	
(5) KRISTINA MARTIN	(i)	251,358.	3,538.	0.	9,552.	18,402.	282,850.	0,	
CHIEF PEOPLE & CULTURE	(ii)	0.	0.	0.	0.	0.	0.	0.	
(6) AARON DODDS	(i)	216,366.	1,538.	1,000.	8,839.	10,282.	238,025.	0,	
DIRECTOR PRODUCT MGMT	(ii)	0.	0.	0.	0.	0.	0.	0,	
(7) NIAMH O'CONNOR	(i)	194,800.	3,495.	0.	8,946.	23,920.	231,161.	0.	
CHIEF PUBLISHING OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.	
(8) CLARE E. DEAN	(i)	189,063.	1,538.	1,000.	7,265.	31,536.	230,402.	0.	
DIR, JOURNAL MKT & OUTREACH	(ii)	0.	0.	0.	0.	0.	0.	0.	
(9) CHRISTIAN A. HAUMESSER	(i)	152,133.	1,538.	0.	6,186.	6,426.	166,283.	0.	
DIR, PLATFORM & ENGINEERING (LEFT 08	(ii)	0.	0.	0.	0.	0.	0.	0.	
(10) TODOR I. GRIGOROV	(i)	157,699.	3,538.	0.	3,709.	974.	165,920.	0.	
CHIEF FINANCIAL OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.	
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								

Schedule J (Form 990) 2021

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.
PART I, LINE 4A:
IN 2021, VIKAS THAKKER, CHIEF DIGITAL OFFICER RECEIVED A SEVERANCE PAYMENT
OF \$71,250.
PART I, LINE 7:
THE ORGANIZATION'S OFFICERS RECEIVE NON-FIXED BONUS PAYMENTS. THESE AMOUNTS
ARE BASED ON BOARD APPROVAL.

SCHEDULE O (Form 990)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

PUBLIC LIBRARY OF SCIENCE

Employer identification number 68-0492065

PUBLIC LIBRARY OF SCIENCE	68-0492065
PART I, LINE 1	
PLOS (PUBLIC LIBRARY OF SCIENCE) IS A NONPROFIT LEADING A	
TRANSFORMATION IN RESEARCH COMMUNICATION. WE PUBLISH A SUITE OF OPEN	
ACCESS JOURNALS, AND WORK ALONGSIDE RESEARCH COMMUNITIES TO BREAK DOWN	
BARRIERS IN MAKING RESEARCH COMMUNICATION MORE OPEN, EFFECTIVE, AND	
FAIR.	
WE HAVE BEEN BREAKING BOUNDARIES SINCE OUR FOUNDING IN 2001. PLOS	
JOURNALS PROPELLED THE MOVEMENT FOR OA ALTERNATIVES TO SUBSCRIPTION	
JOURNALS. WE ESTABLISHED THE FIRST MULTI-DISCIPLINARY PUBLICATION	
INCLUSIVE OF ALL EXCELLENT RESEARCH REGARDLESS OF NOVELTY OR IMPACT AND	
DEMONSTRATED THE IMPORTANCE OF OPEN DATA AVAILABILITY. WE CONTINUE TO	
ADVOCATE FOR AND PUSH THE BOUNDARIES OF OPEN SCIENCE IN ORDER TO	
STRENGTHEN THE FOUNDATION OF KNOWLEDGE FROM WHICH WE ALL ADVANCE.	
PLOS' OPEN ACCESS JOURNALS COVER ALL AREAS OF SCIENCE, MEDICINE AND	
RELATED SOCIAL SCIENCES. RIGOROUSLY REPORTED, PEER REVIEWED, AND	
IMMEDIATELY AVAILABLE WITHOUT RESTRICTIONS, THE JOURNALS PROMOTE THE	
WIDEST READERSHIP AND IMPACT POSSIBLE. WE STRIVE TO IMPLEMENT POLICIES	
AND INNOVATIONS THAT PROMOTE REPRODUCIBILITY, CREDIT, AND	
ACCOUNTABILITY TO FOSTER A CULTURE OF OPEN SCIENCE.	
OUR WORK IN THESE AREAS IS SUPPORTED BY THE EFFORTS OF A DIVERSE,	
INTERNATIONAL COMMUNITY OF SCIENTIFIC RESEARCHERS FROM HUNDREDS OF	
RESEARCH AREAS WHO PUBLISH AND REVIEW RIGOROUS RESEARCH OF ALL TYPES.	
SINCE 2003, PLOS HAS PUBLISHED MORE THAN 300,000 RESEARCH ARTICLES. IN	
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.	Schedule O (Form 990) 2021

Schedule O (Form 990) 2021 Page **2**

Employer identification number Name of the organization PUBLIC LIBRARY OF SCIENCE 68-0492065 2021 ALONE PLOS PUBLISHED MORE THAN 20,000 RESEARCH ARTICLES DOCUMENTING THE OBSERVATIONS AND DISCOVERIES OF A DIVERSE SCIENTIFIC COMMUNITY. THOUSANDS OF RESEARCHERS ACROSS THE GLOBE DEDICATED THEIR TIME AS ACADEMIC EDITORS AND REVIEWERS TO BRINGING THIS WORK TO THE PUBLIC. FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS: ENGAGEMENT WITH RESEARCH COMMUNITIES (E.G. BY ATTENDING/ORGANIZING CONFERENCES/EVENTS/WORKSHOPS) - TO ENSURE THE JOURNALS AND THEIR POLICIES REFLECT THE RESEARCH INTERESTS AND VALUES OF THESE FIELDS AND COMMUNITIES. MEDIA - COLLABORATING WITH AUTHORS, INSTITUTIONS, SCIENCE MEDIA CENTERS AND JOURNALISTS TO COMMUNICATE RESEARCH TO BOTH SCIENTISTS AND SOCIETY. THE SCOPE OF PLOS JOURNALS PUBLISHING IN 2021 INCLUDES: PLOS ONE, THE FIRST 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. PLOS MEDICINE, WITH ARTICLES IN ALL AREAS OF MEDICAL SCIENCE, CLINICAL PRACTICE AND HEALTH POLICY INCLUDING A VARIETY OF STUDY DESIGNS. PLOS COMPUTATIONAL BIOLOGY, PUBLISHING WORK THAT FURTHERS THE UNDERSTANDING OF LIVING SYSTEMS AT ALL SCALES THROUGH THE APPLICATION OF COMPUTATIONAL METHODS.

<u>Schedule O (Form 990) 2021</u> Page **2**

Name of the organization **Employer identification number** PUBLIC LIBRARY OF SCIENCE 68-0492065 PLOS GENETICS, FOCUSED ON ORIGINAL CONTRIBUTIONS IN GENETICS AND GENOMICS THAT REFLECT THE FULL BREADTH, INTERDISCIPLINARY NATURE AND IMPACT OF THESE FIELDS ON SCIENCE AND MEDICINE. PLOS NEGLECTED TROPICAL DISEASES, THE FIRST JOURNAL SOLELY DEVOTED TO CHRONIC AND POVERTY-PROMOTING INFECTIOUS DISEASES, PUBLISHES RESEARCH ON ALL ASPECTS OF NTDS. PLOS PATHOGENS, FIRST OA JOURNAL FOR BREAKTHROUGHS IN UNDERSTANDING PATHOGENS AND THEIR INTERACTIONS WITH HOST ORGANISMS. PLOS GLOBAL PUBLIC HEALTH, A NEW HOME FOR DIVERSE RESEARCH ADDRESSING GLOBAL PUBLIC HEALTH CHALLENGES AND INEQUITIES (LAUNCHED IN 2021) JOURNALS OPEN FOR SUBMISSION IN 2021: PLOS CLIMATE, PUBLISHING RESEARCH THAT ADDRESSES THE CAUSES AND EFFECTS OF CLIMATE CHANGE AND DYNAMICS. PLOS DIGITAL HEALTH, PUBLISHING RESEARCH THAT ADVANCES HEALTHCARE THROUGH DIGITAL TOOLS, TECHNOLOGIES, AND DATA SCIENCE. PLOS SUSTAINABILITY AND TRANSFORMATION, PUBLISHING LEADING RESEARCH THAT DRIVES PROGRESS TOWARDS SUSTAINABILITY OF OUR RENEWABLE RESOURCES. ECONOMY, AND SOCIETY. PLOS WATER A NEW HOME FOR ALL RESEARCH RELATED TO WATER AS A VITAL RESOURCE FOR PEOPLE AND THE PLANET. IN ADDITION TO MANAGING THE ABOVE PORTFOLIO OF JOURNALS, IN 2021 PLOS CONTINUED ITS FOCUS ON TWO BROAD AREAS: (1) OPEN SCIENCE PRACTICES AND INITIATIVES AROUND TRANSPARENCY, RECOGNITION, EXPANDED OPPORTUNITIES FOR PEER REVIEW, FIGHTING PUBLICATION BIAS, AND REPRODUCIBILITY; AND (2) DEVELOPING MORE EQUITABLE BUSINESS MODELS TO ENABLE A DIVERSE AND SUSTAINABLE PUBLISHING ECOSYSTEM. WE ALSO BEGAN EXPANDING OUR CAPACITY

<u>Schedule O (Form 990) 2021</u>

Name of the organization **Employer identification number** PUBLIC LIBRARY OF SCIENCE 68-0492065 TO LEARN FROM DIVERSE RESEARCH COMMUNITIES ACROSS THE GLOBE TO CO-CREATE SOLUTIONS FOR A MORE OPEN, EFFECTIVE, AND FAIR RESEARCH ECOSYSTEM. THE FOLLOWING ARE KEY HIGHLIGHTS FROM OUR WORK IN 2021: PLOS ESTABLISHED OUR SCIENTIFIC ADVISORY COUNCIL COMPRISED OF ACTIVE RESEARCHERS WITH DIVERSE PERSPECTIVES TO HELP US SHAPE OUR EFFORTS TO PROMOTE OPEN SCIENCE, GLOBALLY. PLOS LAUNCHED FIVE NEW JOURNALS SHAPED BY OPEN SCIENCE AND ADDRESSING CRITICAL GLOBAL HEALTH AND ENVIRONMENTAL CHALLENGES FROM MULTI-DISCIPLINARY, GLOBAL PERSPECTIVES. WE CONTINUED TO GROW OUR PARTNERSHIPS WITH INSTITUTIONS UNDER OUR COMMUNITY ACTION PUBLISHING AND FLAT FEE MODELS TO REDUCE OR ELIMINATE AUTHOR PUBLICATION FEES. OUR COMMUNITY ACTION PUBLISHING MODEL SUPPORTING PLOS BIOLOGY, PLOS MEDICINE, AND PLOS SUSTAINABILITY AND TRANSFORMATION IN EQUITABLY DISTRIBUTING THE COST OF SELECTIVE OPEN ACCESS PUBLISHING, RECEIVED THE APLSP INNOVATION IN PUBLISHING AWARD. IN SUPPORT OF OUR NEW JOURNALS, WE ALSO DEVELOPED AND LAUNCHED A NEW MODEL GLOBAL EQUITY WHICH PROVIDES REGIONALLY EQUITABLE PRICING FOR INSTITUTIONS TO SUPPORT OPEN ACCESS PUBLISHING BASED ON THEIR COUNTRY'S ECONOMY AS DEFINED BY WORLD BANK TIERS. WE CONTINUED OUR WORK TO ADVANCE ADOPTION OF OPEN SCIENCE PRACTICES AS WELL AS REFINE AND DEVELOP NEW SERVICES FOR AUTHORS. WE INTRODUCED TWO NEW OPTIONS FOR PUBLISHED PROTOCOLS AT PLOS ONE THAT ENHANCE REPRODUCIBILITY AND TRANSPARENCY OF RESEARCH METHODS, AND AN ENHANCED CODE POLICY AT PLOS COMPUTATIONAL BIOLOGY REQUIRING CODE UNDERLYING A STUDY'S FINDINGS TO BE MADE OPENLY ACCESSIBLE. WE DEVELOPED A NEW POLICY, INCLUSION IN GLOBAL RESEARCH, ADOPTED ACROSS ALL PLOS JOURNALS TO COMBAT PARACHUTE SCIENCE BY IMPROVING

<u>Schedule O (Form 990) 2021</u>

Name of the organization **Employer identification number** PUBLIC LIBRARY OF SCIENCE 68-0492065 TRANSPARENCY IN THE REPORTING OF RESEARCH THAT IS CONDUCTED IN OTHER COUNTRIES OR COMMUNITIES. WE PARTNERED WITH TRAINING CENTER IN COMMUNICATION (TCC AFRICA) TO ENSURE THAT THE INTERESTS AND VALUES OF AFRICAN RESEARCH COMMUNITIES ARE REPRESENTED IN PLOS PUBLICATIONS, POLICIES, AND SERVICES AND TO ENSURE THAT OPEN SCIENCE PRACTICES ARE CO-CREATED BY LOCAL COMMUNITIES AT A GLOBAL SCALE, HELPING US ALL TO REBUILD THE SYSTEM BETTER. PLOS UNDERTOOK SEVERAL RESEARCH PROJECTS TO FACILITATE DEEPER UNDERSTANDING OF OUR SCHOLARLY PUBLISHING SYSTEM, INCLUDING INVESTIGATIONS INTO HOW RESEARCHERS ASSESS CREDIBILITY AND IMPACT THEIR MOTIVATIONS FOR SHARING OPEN DATA, AND CHALLENGES FUNDERS AND INSTITUTIONS FACE UNDERSTANDING THEIR RESEARCHERS' OPEN SCIENCE PRACTICES. ALL OUR FINDINGS ARE PUBLICLY AVAILABLE. PLOS CONTINUED TO PARTICIPATE IN THE PLAN S PRICE & SERVICE TRANSPARENCY FRAMEWORK, PUBLICLY REPORTING OUR PRICING BREAKDOWN ON OUR BLOG. PLOS CONTINUED OUR PUBLICATION FEE ASSISTANCE PROGRAMS, DESIGNED TO OVERCOME BARRIERS TO IMMEDIATE AVAILABILITY. ACCESS AND USE OF RESEARCH. IN 2021 PLOS PROVIDED \$3.3 MILLION IN PARTIAL OR FULL ARTICLE PROCESSING CHARGE (APC) WAIVERS TO AUTHORS. THIS MAJOR PROGRAM EXPENSE. WHICH APPEARS AS A CONTRA-REVENUE FOR FINANCIAL REPORTING PURPOSES DEMONSTRATES OUR SUPPORT TO SCIENCE AND THE GLOBAL RESEARCH COMMUNITY. 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

<u>Schedule O (Form 990) 2021</u>

Employer identification number Name of the organization PUBLIC LIBRARY OF SCIENCE 68-0492065 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 UPON REQUEST. THESE DOCUMENTS ARE ALSO POSTED ON OUR WEBSITE.

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Name of the organization PUBLIC LIBRARY OF SCIENCE	Employer identification number 68-0492065
PART XII, LINE 2C	_
THE PROCESS HAS NOT CHANGED FROM PRIOR YEAR.	
	_

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

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

Attach to Form 990.

Department of the Treasury Internal Revenue Service Name of the organization

PUBLIC LIBRARY OF SCIENCE

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

68 - 0492065

(a)	(b)	(c)	(d)	(e)		(f)			
Name, address, and EIN (if applicable) of disregarded entity	Primary activity	Legal domicile (state o foreign country)		I	assets Di	•			
PLOS GMBH									
EDISONSTRABE 63, HAUS A, 1 ETAGE					PUBLIC :	LIBRARY OF			
BERLIN, GERMANY 12459	RESEARCH	GERMANY	-73	,169. 33	3,593. SCIENCE				
Part II Identification of Related Tax-Exempt Organizations during the tax year.	anizations. Complete if the organization	on answered "Yes" on Form 990), Part IV, line 34, I	pecause it had one	or more related ta	k-exempt			
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlli entity	ng _{cor}	(g) 1512(b)(13) ntrolled ntity?		
				501(c)(3))		Yes	No		
For Paperwork Reduction Act Notice, see the Instruc	etions for Form 000				Cabadi	lle R (Form 9	000) 2021		

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

	organizations treated as a partnership during the tax year.												
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j)	(k)		
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under	Share of total income	Share of end-of-year assets	1	ortionate tions?	Code V-UBI amount in box 20 of Schedule	Genera manag partne	or Percentage ownership		
		country)		sections 512-514)		400010	Yes	No	K-1 (Form 1065)	Yes I	lo		
										 	+		
-													
-													
										\vdash			
		·											
				l .			<u> </u>						

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Type of entity (C corp, S corp,	(f) Share of total income	end-of-year	(h) Percentage ownership	Sect 512(b contro enti	tion b)(13) olled tv?
		country)		or trust)		assets		Yes	

Page 2

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a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity

Yes No

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

b Giπ, grant, or capital contribution to related organization(s)				מו						
c Gift, grant, or capital contribution from related organization(s)										
d Loans or loan guarantees to or for related organization(s)				1d						
e Loans or loan guarantees by related organization(s)				1e						
f Dividends from related organization(s)				1f						
g Sale of assets to related organization(s)				1g						
				1h						
i Exchange of assets with related organization(s)				1i						
j Lease of facilities, equipment, or other assets to related organization(s)				1j						
k Lease of facilities, equipment, or other assets from related organization(s)				1k						
I Performance of services or membership or fundraising solicitations for related orga				11						
m Performance of services or membership or fundraising solicitations by related organization(s)										
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)										
Sharing of paid employees with related organization(s)										
p Reimbursement paid to related organization(s) for expenses										
q Reimbursement paid by related organization(s) for expenses				1q						
r Other transfer of cash or property to related organization(s)				1r						
s Other transfer of cash or property from related organization(s)				1s						
2 If the answer to any of the above is "Yes," see the instructions for information on v	vho must complete th T	iis line, including covered rela I	tionships and transaction thresholds.							
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount in	volved						
1)										
2)										
3)										
4)										
5)	-									
5)				D /F 21	20) 200 1					
32163 11-17-21			Schedule	R (Form 99	90) 2021					

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are all partners sec. 501(c)(3) orgs.? Yes No	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproptionat allocatio	Code V-UBI amount in box 2 of Schedule K-	General of managing partner? Yes No	(k) Percentage ownership

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