# 990 **990**

# **Return of Organization Exempt From Income Tax**

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

OMB No. 1545-0047

Open to Public Inspection

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.

Α	For the 2	021 calend	dar year, or tax year beginning 07/01/2021 and ending	06/	30/2022	-	
В	Check if ap	oplicable:	C Name of organization PROSPECT PARK ALLIANCE INC		D Empl	loyer identification n	umber
	Address ch	nange	Doing business as			11-2843763	
$\Box$	Name char	-	Number and street (or P.O. box if mail is not delivered to street address)	loom/suite	<b>E</b> Telep	hone number	
П	Initial retur		95 Prospect Park West			718-965-8951	
$\Box$		/terminated	City or town, state or province, country, and ZIP or foreign postal code				
$\exists$	Amended r		Brooklyn, NY 11215-3709		<b>G</b> Gross	s receipts \$ 21.6	602,917
$\exists$	Application	1	F Name and address of principal officer: MORGAN MONACO	H(a) Is this	_		s V No
_	пррпосног	r porioring	95 PROSPECT PARK W, BROOKLYN, NY 11215		• .	tes included? Yes	_
	Tax-exemp	ot status:	✓ 501(c)(3)			See instructions.	
J			rospectpark.org		p exemption		
			Corporation ☐ Trust ☐ Association ☐ Other ► L Year of forma			e of legal domicile:	NY
	art I	Summa		1001	ııı otato	5 01 10ga: a0111101101	
			cribe the organization's mission or most significant activities: In parti	norchin with	the City o	f New York and th	
Ð			the Prospect Park Alliance restores, develops, and operates Prospect I				
ng E			environment, preserving historic design, and serving the public through				01
Ĕ			box ► ☐ if the organization discontinued its operations or disposed				
ŏ			voting members of the governing body (Part VI, line 1a)		1		27
S S			independent voting members of the governing body (Part VI, line 1b)				37
Se			per of individuals employed in calendar year 2021 (Part V, line 2a)	,	. 5		37
ŧ					. 6		195
Activities & Governance			per of volunteers (estimate if necessary)				2,845
Q			ated business revenue from Part VIII, column (C), line 12		. 7a		0
	b N	iet unreiai	ted business taxable income from Form 990-T, Part I, line 11		. 7b	0	0
			una aud avanta (Dart VIII. lina 4h)	Prior `		Current Yea	
ne			ons and grants (Part VIII, line 1h)		9,154,654		030,891
Revenue		_	ervice revenue (Part VIII, line 2g)		4,539,393	· · · · · · · · · · · · · · · · · · ·	596,092
æ			income (Part VIII, column (A), lines 3, 4, and 7d)		884,084		771,577
			nue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		41,438		486,581
	<del>                                     </del>		ue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)		4,619,569	20,9	911,979
			I similar amounts paid (Part IX, column (A), lines 1–3)		0		0
			aid to or for members (Part IX, column (A), line 4)		0		0
Expenses			her compensation, employee benefits (Part IX, column (A), lines 5–10)		6,041,398		302,108
ens			al fundraising fees (Part IX, column (A), line 11e)		111,860	;	354,400
Ϋ́			aising expenses (Part IX, column (D), line 25) 1,546,518				
_		-	enses (Part IX, column (A), lines 11a-11d, 11f-24e)		3,507,655		496,263
			nses. Add lines 13–17 (must equal Part IX, column (A), line 25)		9,660,913	·	652,771
. 10		Revenue le	ess expenses. Subtract line 18 from line 12		4,958,656		259,208
Net Assets or Fund Balances				Beginning of (		End of Year	r
sset 3ala	<b>20</b> T		s (Part X, line 16)		34,463,999		316,245
멸	21 T		ties (Part X, line 26)		2,891,964	· · · · · · · · · · · · · · · · · · ·	062,541
			or fund balances. Subtract line 21 from line 20		31,572,035	37,2	253,704
Pa	art II	Signatu	re Block				
			, I declare that I have examined this return, including accompanying schedules and state. Declaration of preparer (other than officer) is based on all information of which prepare			my knowledge and b	pelief, it is
uu	e, correct, a	The complete	e. Declaration of preparer (other than officer) is based on an information of which prepare	Tilas arry Krio	wiedge.		
o:.							
Się	-	Signati	ure of officer		Date		
He	re		an Monaco, President				
		Type o	r print name and title				
Pa	id	Print/Type	preparer's name Preparer's signature D	ate	Check		
	eparer				self-em	ployed	
	e Only	Firm's nar	ne <b>&gt;</b>	Fi	rm's EIN ▶		
<u>_</u>		Firm's add	lress ▶	PI	none no.		
Ма	y the IRS	discuss	this return with the preparer shown above? See instructions			🗌 Yes	☐ No

Form 990 (2021) Page **2** 

Part	Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
•	In partnership with the City of New York and the community, the Prospect Park Alliance restores, develops, and operates Prospect
	Park for the enjoyment of all by caring for the natural environment, preserving historic design, and serving the public through
	facilities and programs.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
3	If "Yes," describe these new services on Schedule O.  Did the organization cease conducting, or make significant changes in how it conducts, any program
3	services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others,
	the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 4,164,466 including grants of \$) (Revenue \$ 5,842,763)
	Visitor Services and Events: Prospect Park receives more than 10 million visits each year and the Alliance serves visitors to the
	Park by offering a variety of fee-based recreational activities, public and private events, and food service operations. Recreational activities include a year-round tennis center and carousel rides in the summer. Food and beverage services are available for
	refreshment, private events may be held at a number of different locations, and public events are coordinated throughout the year.
	The Alliance sublicenses the LeFrak Center and works closely with the operator to provide a variety of year round recreational
	activities.
41-	(Code) \(\sum_{\text{Cure proced}}\)
4b	(Code: ) (Expenses \$ 1,602,795 including grants of \$ ) (Revenue \$ 711,179 )  Design and Construction: Prospect Park Alliance restores the landscape and buildings within the Park while preserving the historic
	design. Projects are taken through a design and approval process, in partnership with the City of New York Department of Parks
	and Recreation, and are supervised during construction by Prospect Park Alliance. Projects designed by Prospect Park Alliance
	have won a number of prestigious awards.
4c	(Code:) (Expenses \$2,076,362 including grants of \$) (Revenue \$\$
	Field Operations: Prospect Park Alliance partners with the City of New York Department of Parks and Recreation (NYC Parks) in
	caring for the Park's natural environment. The Landscape Management Team monitors, restores and maintains 250 acres of
	natural areas, coordinating volunteers and the Alliance's Woodlands Youth Crew in this work. The Alliance also provides
	maintenance staff, supplementing the staff of NYC Parks in cleaning the Park as well as providing a crew to make repairs.
4d	Other program services (Describe on Schedule O.) See Schedule O, Statement 1
	(Expenses \$ 900,312 including grants of \$ 0 ) (Revenue \$ 0 )
40	Total program service expenses > 8.743.035

21

orm 99	00 (2021)		F	Page
Part	V Checklist of Required Schedules			
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		Yes	No
•	complete Schedule A	1	1	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	~	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If</i> "Yes," <i>complete Schedule C, Part I</i>	3		,
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4	,	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5	,	_
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		,
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If</i> "Yes," <i>complete Schedule D, Part II</i>	7		,
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete 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? <i>If</i> "Yes," <i>complete Schedule D, Part IV</i>	9		,
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V </i>	10	,	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, 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	,	
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		,
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? <i>If "Yes," complete Schedule D, Part VIII </i>	11c		,
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? <i>If "Yes," complete Schedule D, Part IX</i>	11d		,
e f	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> 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)? <i>If "Yes," complete Schedule D, Part X</i>	11e		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	_	
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		,
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		~
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		~
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	4.45		
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>	14b 15		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		,
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I.</i> See instructions	17	,	
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	,	
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		,
20a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a		-

If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

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 . . . . .

20b

Part	V Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		-
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	V	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		,
c b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	24d 25a		V
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		v
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	26		,
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		,
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> "Yes," <i>complete Schedule L, Part IV</i>	28a		,
c	A family member of any individual described in line 28a? <i>If</i> "Yes," <i>complete Schedule L, Part IV</i>	28b 28c		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
29 30	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	29 30	V	<i>'</i>
31 32	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	31		ν ν
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		,
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		~
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a 35b		V
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		_
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		,
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? <b>Note:</b> All Form 990 filers are required to complete Schedule O	38	,	
Part	V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V		Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable   1a   98			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	~	1

Part '	V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 195			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	>	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.			
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		~
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O .	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		,
b	If "Yes," enter the name of the foreign country ▶			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		~
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		~
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		~
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?	7a	~	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	/	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		~
	If "Yes," indicate the number of Forms 8282 filed during the year	_		
_	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		V
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		~
_	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		~
h 8	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? <b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the	7h		
J	sponsoring organizations maintaining donor advised runds. Did a donor advised rund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	0		
	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources. (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	4-		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
b	<b>Note:</b> See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which			
Ŋ	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		~
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O.	14b		+
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		1
	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		~
	If "Yes," complete Form 4720, Schedule O.			
17	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?	17		
	If "Yes," complete Form 6069.			

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. 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 . . . 1a 37 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. Enter the number of voting members included on line 1a, above, who are independent . 1b 37 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 V Did the organization delegate control over management duties customarily performed by or under the direct 3 supervision of officers, directors, trustees, or key employees to a management company or other person? . 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? . 5 6 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a 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 No **10a** Did the organization have local chapters, branches, or affiliates? 10a 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? 10b 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. **12a** Did the organization have a written conflict of interest policy? *If "No," go to line 13* 12a Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c 13 13 Did the organization have a written document retention and destruction policy? 14 14 15 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 . . . . . . . . 15a 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 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 Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ NY 17 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c) 18 (3)s only) available for public inspection. Indicate how you made these available. Check all that apply. ✓ Own website Other (explain on Schedule O) ✓ Another's website ✓ Upon request Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, 19 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 ▶ Prospect Park Alliance Inc, James Snow Chief Operating Officer & CFO, (718)965-8980

Part VI

Form 990 (2021) Page **7** 

# 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.
- 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.

**Board Member** 

☐ Check this box if neither the organization not				atic	n c	ompe	nsa	ted any current	officer, director,	or trustee.
				((	C)					
(A) Name and title	(B) Average hours per week	box,	Position check more than one ess person is both an and a director/trustee)				(D)  Reportable compensation	(E)  Reportable compensation from related	(F) Estimated amount of other	
	(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/ 1099-MISC/ 1099-NEC)	organizations (W-2/ 1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
Susan Donoghue	40.00									
President/Ex-officio Board Member ending 2/2022	0.00	~		~				297,250	0	7,220
James Snow	40.00									
Chief Operating Officer / Chief Financial Officer	0.00	~		~				244,352	0	5,177
Christian Zimmerman	40.00									
VP for Capital and Landscape Mgmt	0.00				~			171,581	0	32,849
Susan Sharer	40.00									
VP for Development	0.00				~			155,425	0	40,580
Adina Cole	40.00									
VP for People + Culture	0.00					~		135,249	0	17,213
Susan Donoghue	2.00									
Ex-officio - Commissioner, NYC Parks & Recreatio	0.00	~						0	0	0
Shawn Austin	2.00									
Board Member	0.00	~						0	0	0
Andrew Birsh	2.00									
Board Member	0.00	~						0	0	0
Luciana Francese DeCrosta	2.00									
Board Member	0.00	~						0	0	0
Dr Nanette Thomas	2.00									
Board Member	0.00	~						0	0	0
Allison Dunn	2.00									
Board Member	0.00	1						0	0	0
Jill Eisenstadt	2.00									
Board Member	0.00	<b>'</b>						0	0	0
Sarah Gerstenzang	2.00									
Board Member	0.00	~						0	0	0
Liza Gilbert	2.00									
Doord Mombou	0.00	./				1				1

0.00

0

Form 990 (2021) Page **7 - 2** 

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

				- (	C)					
(A)	(B)				o, sition			(D)	<u>(E)</u>	(F)
Name and title	Average					e than o		Reportable	Reportable	Estimated amount
. va.ne and unit	hours	office	er an			or/trus		compensation	compensation	of other
	per week (list any	Individual trustee or director	Ins	읓	6	em Hig	Fo	from the organization (W-2/	from related organizations (W-2/	compensation from the
	hours for	livid	Institutional trustee	Officer	Key employee	ploy	Former	1099-MISC/	1099-MISC/	organization and
	related organizations	ual t	iona		old	ee t cor	,	<u>1099-NEC)</u>	<u>1099-NEC)</u>	related organizations
	below	rust	ŧ		yee	npe				
	dotted line)	ee	stee			Highest compensated employee				
Sharon Greenberger	2.00					ă				
Board Member	0.00	·						0	0	0
Shahana Hanif	2.00							•	•	•
Ex-Officio/NYC Council Member	0.00	1						0	0	0
Winthrop Hoyt	2.00									
Board Member	0.00	1						0	0	0
Rev Dr Emma Jordan-Simpson	2.00									
Board Member/Mayoral appointment	0.00	1						0	0	0
Jorge Juantorena	2.00									
Board Member	0.00	1						0	0	0
Michael Kalt	2.00									
Board Member	0.00	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \						0	0	0
Susan Kath	2.00									
Board Member	0.00	<b>'</b>						0	0	0
Tom Keany	2.00									
Board Member	0.00	~						0	0	0
Kyle Kimball	2.00									
Board Member	0.00	~						0	0	0
Sabrina Leblanc	2.00	1								
Board Member	0.00	~						0	0	0
Rebecca Messner Leckie	2.00									
Board Member	0.00	~						0	0	0
Raquel Malmberg	2.00									
Board Member	0.00	~						0	0	0
Jeff Mandel	2.00									
Board Member	0.00	~						0	0	0
David M Marcinek	2.00									
Board Member	0.00	~						0	0	0

Form 990 (2021) Page **7 - 3** 

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

(A) Name and title	(B) Average hours per week (list any hours for related	box, office Individua	unles	Pos neck ss pe	rson	e than of is both or/trust employee	n an	Reportable compensation from the organization (W-2/ 1099-MISC/ 1099-NEC)	(E)  Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
	organizations below dotted line)	trustee	al trustee		oyee	Highest compensated employee				
Lark-Marie Menchini	2.00									
Board Member	0.00	~						0	0	0
James Patchett	2.00									
Board Member / Mayoral Appointment	0.00	~						0	0	0
Bahia Ramos	2.00									
Board Member	0.00	~						0	0	0
Antonio Reynoso	2.00									
Ex-officio - Brooklyn Borough President	0.00	~						0	0	0
Robert Rosenberg	2.00									
Board Member	0.00	~						0	0	0
Elizabeth Ryan	2.00									
Board Member	0.00	~						0	0	0
Page Sargisson	2.00									
Board Member	0.00	~						0	0	0
Phillip Summers	2.00									
Board Member	0.00	~						0	0	0
Saundra Thomas	2.00									
Board Member	0.00	~						0	0	0
Jonathan Winer	2.00									
Board Member	0.00	~						0	0	0
Iris Weinshall	2.00									
Chair / Board Member	0.00	~						0	0	0
Charles R Jacob III	2.00									
Vice Chairman / Board Member	0.00	~						0	0	0
Mark A and Catherine Varous	2.00									
Treasurer/Board Member	0.00	~						0	0	0
Sharon Myrie	2.00									
Secretary / Board Member	0.00	~						0	0	0

Part	Section A. Officers, Directors, 7	rustees,	Key I	Em	plo	yee	s, an	d F	lighest Compe	nsated Er	nploy	ees (d	contir	nued)
	(A) Name and title	(B) Average hours	box,	unles	Pos neck ss pe	rson	e than o is both or/trust	n an	(D) Reportable compensation	(E)  Reportable compensation		(F) Estimated amount of other compensation		
		per week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/ 1099-MISC/ 1099-NEC)	from relat organizations 1099-MIS 1099-NE	(W-2/	fro	om the zation	and
			-											
			-											
			-											
			-											
1b	Subtotal		<u>.</u>	L.				<b></b>	1,003,857		0		10	3,039
c d	Total from continuation sheets to Part Total (add lines 1b and 1c)							<b>&gt;</b>	1,003,857		0		10	3,039
2	Total number of individuals (including but reportable compensation from the organi		d to th	ose	list	ted	above	e) w	ho received more	e than \$100	0,000	of		
3	Did the organization list any <b>former</b> of employee on line 1a? <i>If "Yes," complete S</i>							-	loyee, or highes	-	sated		Yes	No
4	For any individual listed on line 1a, is the organization and related organizations individual	sum of re	portal	ble	con	пре	nsatic	n a	ınd other comper	nsation fror		3		<i>&gt;</i>
5	Did any person listed on line 1a receive of for services rendered to the organization'									ion or indiv		5	<i>-</i>	V
Secti 1	Complete this table for your five high compensation from the organization. Report					•							,	
	(A) Name and business add	ress							<b>(B)</b> Description of serv	rices	C	( <b>C</b> ) Compens	ation	
	roup Inc, 3000 K Street NW, Suite E280, Wash		20007	7					ndraising consult	ing servic				0,000
	Contracting Corp, 476 Lake St, Brooklyn, NY Program For The Homeless, 30-30 Northern B		2100 1	One	ı lel	and	City		eneral contracting eaning services					8,785 0,879
	s Enterprise USA Inc, PO Box 539, Closter, N		, 100, L	-011(	, 131	ariu	Oity,	_	eneral contracting					0,679 2,889

Gardiner and Theobald Inc, 535 Fifth Ave, 3rd Floor, New York, NY 10017

received more than \$100,000 of compensation from the organization ▶

Total number of independent contractors (including but not limited to those listed above) who

101,000

**General contracting** 

5

# Part VIII Statement of Revenue

		Check if Schedule O co	ontains a resp	ons	se or note to an	y line in this Pa	rt VIII		$\square$
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
Š, Š	1a	Federated campaigns .	1	а	0				
Contributions, Gifts, Grants, and Other Similar Amounts	b	Membership dues	1	b	716,441				
عَ ق	С	Fundraising events	1	С	1,002,747				
fts	d	Related organizations .	1	d	0				
ຼອ ເ⊵	е	Government grants (cor		е	353,713				
Sin	f	All other contributions, g							
ig je		and similar amounts not inc	<u></u>	f	11,957,990				
들 돌	g	Noncash contributions i							
nd n		lines 1a–1f	<u> </u>	g	\$ 649,712				
ပဏ	h	Total. Add lines 1a-1f.				14,030,891			
a)	_			-	Business Code				
Program Service Revenue	2a	Visitor Services and Eve			713990	5,842,763	5,842,763	0	0
le le	b	Design and Construction	1 		541320	711,179	711,179	0	0
π /en	C	Field Operations			712190	42,150	42,150	0	0
gram Ser Revenue	d	Education and Public Pro	ograms		712190	0	0	0	0
§ _	e	All other program service						•	
- ∣	f g	<b>Total.</b> Add lines 2a–2f.		_	•	6,596,092	0	0	0
	3	Investment income (inc				0,390,092			
		other similar amounts) .	•			771,577	0	0	771,577
	4	Income from investment	of tax-exempt	bor	nd proceeds ►	0	0	0	0
	5					0	0	0	0
			(i) Real		(ii) Personal				
	6a	Gross rents 6a							
	b	Less: rental expenses 6b							
	С	Rental income or (loss) 6c	:	0	0				
	d	Net rental income or (los							
	7a	Gross amount from	(i) Securities		(ii) Other				
		sales of assets		0	0				
_	L	other than inventory Less: cost or other basis							
Revenue	D								
Ş.	_	and sales expenses . 7b Gain or (loss) 7c	_	0	0				
	c d					0	0	0	0
Other	8a	Gross income from f		Ť				•	
ਰ	Ou		1,002,747						
		of contributions reporte							
		1c). See Part IV, line 18	8	a	97,850				
	b	Less: direct expenses .	8	b	636,635				
	С	Net income or (loss) from		ver	nts <b>&gt;</b>	-538,785		0	-538,785
	9a	Gross income from	7.						
		activities. See Part IV, lin	<u> </u>	a					
		Less: direct expenses .		b					
		Net income or (loss) from		/ities	s <b>&gt;</b>				
	iva	Gross sales of inven returns and allowances	-		105.014				
	h	Less: cost of goods sold	<u> </u>	0a 0b	105,814 54,303				
	C	Net income or (loss) from		_		51,511	51,511	0	0
<u>"</u>		1.50 1.1001110 01 (1033) 1101	calco of life		Business Code	31,311	31,311	0	0
Miscellaneous Revenue	11a			<u> </u>					
scellaneo Revenue	b								
	C								
lsc P	d			.		693	693	0	0
2	е	Total. Add lines 11a-11	d		•	693			
	12	Total revenue. See inst	ructions .		•	20.911.979	6.648.296	0	232,792

# Part IX Statement of Functional Expenses

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

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

	Check if Schedule O contains a response	or note to any line	in this Part IX .		<b>v</b>
Do no	t include amounts reported on lines 6b, 7b,	(A)	(B)	(C)	(D)
8b, 9k	, 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 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	725,950	363,379	349,142	13,429
6	Compensation not included above to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$ .	0	0	0	0
7	Other salaries and wages	4,833,349	3,899,296	318,491	615,562
8	Pension plan accruals and contributions (include				<u> </u>
	section 401(k) and 403(b) employer contributions)	80,387	60,039	10,692	9,656
9	Other employee benefits	743,151	541,851	116,054	85,246
10	Payroll taxes	419,271	323,174	48,977	47,120
11	Fees for services (nonemployees):				
а	Management	0	0	0	0
b	Legal	0	0	0	0
С	Accounting	47,087		47,087	
d	Lobbying	21,150		21,150	
e	Professional fundraising services. See Part IV, line 17	354,400			354,400
f g	Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column				
9	(A), amount, list line 11g expenses on Schedule O.)	1,768,467	1,501,198	170,575	96,694
12	Advertising and promotion	17,996	17,996	0	90,094
13	Office expenses	136,624	39,955	57,248	39,421
14	Information technology	169.615	40,663	79.268	49,684
15	Royalties	100,010	40,000	70,200	40,004
16	Occupancy	773,120	773,090	0	30
17	Travel	2,270	2,096	42	132
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	, -	7		
19	Conferences, conventions, and meetings .	15,904	1,744	14,085	75
20	Interest	-45	-45	0	0
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .	43,729	37,644	5,888	197
23	Insurance	320,728	229,800	90,677	251
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.)				
_		EEE GEC	400.070		60 600
a b	License, credit card & permit fees Other program materials	555,656 268,178	492,976 192,012	0	62,680 76,166
C	Equipment including rental repairs	169,596	166,285	0	3,311
d	=quipinont moleculing fortal topuling	100,090	100,203		0,011
e	All other expenses	186,188	60,782	32,942	92,464
25	Total functional expenses. Add lines 1 through 24e	11,652,771	8,743,935	1,362,318	1,546,518
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 <b>990</b> (2021)

Part X Balance Sheet

Pledges and grants receivable, net   2,828,514   2   6,528,314   3   Pledges and grants receivable, net   2,828,624   3   5,680,105   4   Accounts receivable, net   1,177,578   4   1,159,524   5   Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons   0   5   6   Loans and other receivables from on their disqualified persons (as defined under section 4958(n)(1)), and persons described in section 4958(c)3(B)   0   6   0   0   7   1   1   1   1   1   1   1   1   1			Check if Schedule O contains a response or	note	to any line in this Par	tX				
Pledges and grants receivable, net										
3   Pledges and grants receivable, net   2,828,624   3   5,650,105		1	Cash—non-interest-bearing			2,456,733	1	6,801,915		
4 Accounts receivable, net 5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 7 Notes and loans receivables, net 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 5,488,464  b Less: accumulated depreciation 11 Investments—publicly traded securities 12 Investments—program-related. See Part IV, line 11 13 Investments—program-related. See Part IV, line 11 14 Intergible assets 15 Other assets. See Part IV, line 11 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 33) 17 Accounts payable and accrued expenses 19 Deferred revenue 10 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 10 22 (mainly appeals) 10 23 Secured mortgages and notes payable to unrelated third parties 10 Organizations that follow FASB ASC 998, check here 20 2 2 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3		2	Savings and temporary cash investments			4,798,315	2	6,528,315		
Section   Sec		3	Pledges and grants receivable, net		[	2,828,624	3	5,650,105		
trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		4				1,077,578	4	1,159,824		
1		5	trustee, key employee, creator or founder, subst	antial	contributor, or 35%					
under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 0 6  7 Notes and loans receivable, net						0	5			
7 Notes and loans receivable, net		6	·		•	0	6			
8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	"	7			` ` ` ` ` ` _					
10a	ets				<b>F</b>			15 650		
10a	Ass				<b>⊢</b>					
b Less: accumulated depreciation 10b 5,169,350 175,927 10c 319,114 Investments—publicly traded securities	•		Land, buildings, and equipment: cost or other			141,386	9	244,679		
11 Investments — publicly traded securities 22,868,385 11 19,468,125 12 Investments — other securities. See Part IV, line 11 0 12 13 Investments — program-related. See Part IV, line 11 0 13 14 Intangible assets 0 14 15 Other assets. See Part IV, line 11 108,614 15 128,505 15 Other assets. See Part IV, line 11 108,614 15 128,505 16 16 Total assets. Add lines 1 through 15 (must equal line 33) 34,463,999 16 40,316,245 17 Accounts payable and accrued expenses 1,774,408 17 2,031,771 18 Grants payable and accrued expenses 1,774,408 17 2,031,771 18 Grants payable . 0 18 0 19 Deferred revenue . 1,117,556 19 1,030,777 19 Deferred revenue . 1,217,256 1					-,, -		10-			
12   Investments – other securities. See Part IV, line 11				•						
13   Investments—program-related. See Part IV, line 11			•			,,		19,468,125		
14 Intangible assets			•		<b>⊢</b>					
15 Other assets. See Part IV, line 11   108,614   15   128,505   16   Total assets. Add lines 1 through 15 (must equal line 33)   34,463,999   16   40,316,245   17   Accounts payable and accrued expenses   1,774,408   17   2,031,771   18   Grants payable   0   18   0   0   18   0   0   18   0   0   19   Deferred revenue   1,117,555   19   1,030,777   19   1,			, ,		<b>⊢</b>					
16 Total assets. Add lines 1 through 15 (must equal line 33)			•					100 500		
17										
18    Grants payable										
Deferred revenue			· ·							
Tax-exempt bond liabilities			• •	-						
Escrow or custodial account liability. Complete Part IV of Schedule D				<b>.</b>						
Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons								0		
trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons						U	21	U		
Unsecured notes and loans payable to unrelated third parties	ties	22								
Unsecured notes and loans payable to unrelated third parties	bilit					0	22	•		
Unsecured notes and loans payable to unrelated third parties	Lial	23		-						
Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X of Schedule D	_				· -					
parties, and other liabilities not included on lines 17–24). Complete Part X of Schedule D						U	27	U		
of Schedule D										
Total liabilities. Add lines 17 through 25			·				25			
Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.  Net assets without donor restrictions		26	Total liabilities. Add lines 17 through 25		+	2 801 964		3 062 541		
and complete lines 27, 28, 32, and 33.  27 Net assets without donor restrictions	S			ck he	ere 🕨 🔽	2,001,004		0,002,041		
Net assets without donor restrictions   23,586,814   27   23,098,292   28   Net assets with donor restrictions   7,985,221   28   14,155,412   28   14,155,412   28   14,155,412   28   14,155,412   28   14,155,412   28   14,155,412   29   29   29   29   29   29   29	nce		and complete lines 27, 28, 32, and 33.							
Net assets with donor restrictions	ala	27	Net assets without donor restrictions			23,586,814	27	23,098,292		
Organizations that do not follow FASB ASC 958, check here □ and complete lines 29 through 33.  Capital stock or trust principal, or current funds	J B	28				7,985,221	28	14,155,412		
29 Capital stock or trust principal, or current funds	Func			58, cl	neck here ► □					
30 Paid-in or capital surplus, or land, building, or equipment fund	o	29					29			
31   Retained earnings, endowment, accumulated income, or other funds	ets									
4 to 2         32         Total net assets or fund balances	SS									
<b>2</b> 33 Total liabilities and net assets/fund balances	t A		<u> </u>			31.572.035		37.253.704		
	ž	33						40,316,245		

Form 990 (2021) Page **12** 

Total expenses (must equal Part IX, column (A), line 25)	Part	XI Reconciliation of Net Assets			
Total expenses (must equal Part IX, column (A), line 25)  Revenue less expenses. Subtract line 2 from line 1  Revenue less expenses. Subtract line 2 from line 1  Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))  Net unrealized gains (losses) on investments  Donated services and use of facilities  Investment expenses  Tonated services and use of facilities  Investment expenses  Prior period adjustments  Prior period adjustments  Net assets or fund balances (explain on Schedule O)  Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))  Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))  Teart XII  Financial Statements and Reporting  Check if Schedule O contains a response or note to any line in this Part XII  Accounting method used to prepare the Form 990: Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.  Were the organization's financial statements compiled or reviewed by an independent accountant?  If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:  Separate basis Consolidated basis Both consolidated and separate basis  Were the organization's financial statements audited by an independent accountant?  If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:  Separate basis Consolidated basis Both consolidated and separate basis  Were the organization's financial statements and selection of an independent accountant?  If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.  As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB C		Check if Schedule O contains a response or note to any line in this Part XI			
A Revenue less expenses. Subtract line 2 from line 1	1	Total revenue (must equal Part VIII, column (A), line 12)		20,91	1,979
Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	2			11,65	2,771
Solution to the properties of the organization is financial statements audited by an independent accountant?  If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:  □ Separate basis □ Consolidated basis □ Both consolidated and separate basis  □ Were the organization changed either its oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?  If "Yes," to fack a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis □ Both consolidated and separate basis  □ Consolidated basis □ Both consolidated and separate basis  If "Yes," to fine 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?  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 Act and OMB Circular A-133?  b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	3			9,25	9,208
6 Donated services and use of facilities	4	1101 access of faire scalariose at seguining of year (macroquar arriv, mic o_, colariii ( 1,1) i		31,57	2,035
7 Investment expenses 7	5	Net unrealized gains (losses) on investments		-3,57	7,539
9 Other changes in net assets or fund balances (explain on Schedule O). Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)).  Part XIII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII.  Accounting method used to prepare the Form 990: Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.  Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis  Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: Separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis  If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? 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 Act and OMB Circular A-133?  b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	6				0
9 Other changes in net assets or fund balances (explain on Schedule O)	7				0
Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))		- 1			0
Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII					0
Check if Schedule O contains a response or note to any line in this Part XII	10				
Check if Schedule O contains a response or note to any line in this Part XII				37,25	3,704
1 Accounting method used to prepare the Form 990:  Accrual  Other  If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.  2a Were the organization's financial statements compiled or reviewed by an independent accountant?	Part	·			
Accounting method used to prepare the Form 990:		Check if Schedule O contains a response or note to any line in this Part XII	<u> </u>		
If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.  2a Were the organization's financial statements compiled or reviewed by an independent accountant?				Yes	No
<ul> <li>Were the organization's financial statements compiled or reviewed by an independent accountant?</li></ul>	1	If the organization changed its method of accounting from a prior year or checked "Other," explain on			
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:  Separate basis Consolidated basis Both consolidated and separate basis  b Were the organization's financial statements audited by an independent accountant?  If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:  Separate basis Consolidated basis Both consolidated and separate basis  If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?  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 Act and OMB Circular A-133?  b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the					
reviewed on a separate basis, consolidated basis, or both:  Separate basis Consolidated basis Both consolidated and separate basis  b Were the organization's financial statements audited by an independent accountant?  If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:  Separate basis Consolidated basis Both consolidated and separate basis  If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?  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 Act and OMB Circular A-133?  b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	2a	· · · · · · · · · · · · · · · · · · ·	2a		~
<ul> <li>Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis</li> <li>Were the organization's financial statements audited by an independent accountant?</li></ul>		· · · · · · · · · · · · · · · · · · ·			
b Were the organization's financial statements audited by an independent accountant?					
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:  Separate basis Consolidated basis Both consolidated and separate basis  If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?  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 Act and OMB Circular A-133?  b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		_ '	-	4	
separate basis, consolidated basis, or both:  Separate basis Consolidated basis Both consolidated and separate basis  If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?  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 Act and OMB Circular A-133?  b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	р	, , ,	20	~	
<ul> <li>☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis</li> <li>c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? .</li> <li>If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.</li> <li>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 Act and OMB Circular A-133?</li></ul>					
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?  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 Act and OMB Circular A-133?					
the audit, review, or compilation of its financial statements and selection of an independent accountant? .  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 Act and OMB Circular A-133?	•				
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 Act and OMB Circular A-133?	C	, , , , , , , , , , , , , , , , , , , ,	00	/	
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 Act and OMB Circular A-133?		•	20		
Single Audit Act and OMB Circular A-133?		Schedule O.			
<b>b</b> If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	3a				
			3a		>
, , , , , , , , , , , , , , , , , , , ,	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.	3b		

Form **990** (2021)

#### SCHEDULE A (Form 990 or 990-EZ)

# **Public Charity Status and Public Support**

OMB No. 1545-0047

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.

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service

Name of the organization

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

PRO	PROSPECT PARK ALLIANCE INC 11-2843763									
Par	Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.									
The o	organ	nizati	ion is not a	private founda	ation because it i	s: (For lines 1 through	12, ched	ck only or	ne box.)	
1	1 A church, convention of churches, or association of churches described in <b>section 170(b)(1)(A)(i).</b>									
2						(Attach Schedule E (F				
3						ganization described i				···· –
4				•	•	onjunction with a hosp	oital desc	ribed in s	section 170(b)(1)(A)	(III). Enter the
_		-		, city, and state		college or university	ad a		d by a gayaramant	al unit described in
5			•	1)(A)(iv). (Comp		college or university	owned o	г орегате	ed by a government	ai unii described in
6 7	V	An o	rganization	that normally		mental unit described tantial part of its sup te Part II.)				n the general public
8		A cor	mmunity tru	ust described i	n <b>section 170(b</b> )	(1)(A)(vi). (Complete	Part II.)			
9	o u	or un unive	niversity or a ersity:	a non-land-gra	nt college of agr	d in <b>section 170(b)(1)</b> iculture (see instruction	ons). Ente	r the nan	ne, city, and state of	the college or
10	s a	supp acqu	ort from gr iired by the	oss investment organization a	t income and un fter June 30, 197	e than 33 <sup>1</sup> /3% of its su nctions, subject to ce related business taxal 75. See <b>section 509(</b> a	ble incom a <b>)(2).</b> (Cor	ne (less se mplete Pa	ection 511 tax) from art III.)	fees, and gross 33 <sup>1</sup> / <sub>3</sub> % of its businesses
11		An or	rganization	organized and	l operated exclus	sively to test for public	c safety.	See <b>sect</b> i	ion 509(a)(4).	
12						vely for the benefit of,				
						escribed in section 5				
	ti			•		the type of supporting			•	. •
а	L					l, supervised, or contr				
						regularly appoint or e ete Part IV, Sections			ne directors or trust	ees of the
b	Г		•	•	-	sed or controlled in co			cupported organizati	on(e) by baying
	_	C	ontrol or m	anagement of	the supporting o	rganization vested in V, Sections A and C	the same			
С						ting organization oper ns). <b>You must comp</b>				ally integrated with,
d		th	nat is not fu	inctionally integ	grated. The orga	pporting organization nization generally musomplete Part IV, Sec	st satisfy	a distribu	ution requirement an	
•	_	_	•	•	•	•		-		. II <b>T</b> III
е						a written determinationally integrated sup				e II, Type III
f	Fn									_
g					•	oorted organization(s).				•
			of supported o		(ii) EIN	(iii) Type of organization		rganization	(v) Amount of monetary	(vi) Amount of
						(described on lines 1–10 above (see instructions))	,	ur governing ment?	support (see instructions)	other support (see
						above (see instructions))	4004	mont.	instructions)	instructions)
							Yes	No		
(A)										
-										
(B)										
(C)										
(D)										
(E)										

18

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) ▶ (a) 2017 **(b)** 2018 (c) 2019 (d) 2020 (e) 2021 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . . 5,085,222 4,881,479 7,542,183 5,466,616 14,226,594 37,202,094 Tax revenues levied for the 2 organization's benefit and either paid to or expended on its behalf . . . . 0 0 0 0 0 0 The value of services or facilities furnished by a governmental unit to the organization without charge . . . . 470,420 515,458 445,367 451,022 419,187 2,301,454 Total. Add lines 1 through 3. . . . 4 5,555,642 5,396,937 5,911,983 7,993,205 14,645,781 39,503,548 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) . . . . 3,294,160 Public support. Subtract line 5 from line 4 36,209,388 Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (a) 2017 **(b)** 2018 (c) 2019 (d) 2020 (e) 2021 (f) Total 7 Amounts from line 4 . . . . . . 5,555,642 5,396,937 5,911,983 7,993,205 14.645.781 39,503,548 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources . . . . . . . . 356,634 398,919 446,793 593,112 771,577 2,567,035 Net income from unrelated business 9 activities, whether or not the business is regularly carried on . . . . . . 0 0 0 0 0 0 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . . . . . . . 0 0 0 0 0 0 **Total support.** Add lines 7 through 10 11 42,070,583 Gross receipts from related activities, etc. (see instructions) . . . . . . . . . . . . . . . . . . 12 13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) Section C. Computation of Public Support Percentage 14 Public support percentage for 2021 (line 6, column (f), divided by line 11, column (f)) . . . . . 86.07 % Public support percentage from 2020 Schedule A, Part II, line 14 . . . . . . . . . . . . . . . 15 331/3% support test - 2021. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . . . . . . . . . . . . . . . 331/3% support test - 2020. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check 17a 10%-facts-and-circumstances test - 2021. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported 10%-facts-and-circumstances test - 2020. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported

# 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 falls to quality	under the te	ists listed bei	ow, please co	implete Fart	11.)	
	on A. Public Support			1	1	1	
Calen	dar year (or fiscal year beginning in) ▶	<b>(a)</b> 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	<b>(e)</b> 2021	(f) Total
1	Gifts, grants, contributions, and membership fees						
_	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons .		<u> </u>				
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						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
	line 6.)						
Secti	on B. Total Support			,		,	
Calen	dar year (or fiscal year beginning in)	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
	royalties, and income from similar sources .						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included on line 10b, whether						
	or not the business is regularly carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
14	First 5 years. If the Form 990 is for the	organization'	s first, second	, third, fourth.	or fifth tax ve	ear as a section	n 501(c)(3)
	organization, check this box and stop her	•			-		1 / 1
Secti	on C. Computation of Public Suppor						
15	Public support percentage for 2021 (line 8			13. column (f))		15	%
16	Public support percentage from 2020 Sch		•			16	%
	on D. Computation of Investment Inc						
17	Investment income percentage for 2021 (I			ov line 13. colu	ımn (f))	17	%
18	Investment income percentage from 2020			-		18	<u>%</u>
19a	331/3% support tests—2021. If the organi						
	17 is not more than 33 <sup>1</sup> / <sub>3</sub> %, check this box						
b	331/3% support tests—2020. If the organization	_	_	-		_	_
~	line 18 is not more than 331/3%, check this b						
20	Private foundation If the organization did	_	=	•			_

## 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

CU	on A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
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 <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).	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.	3a		
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 <b>Part VI</b> when and how the organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.	3c		
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.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	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 <b>Part VI</b> 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.	4c		
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 <b>Part VI</b> , 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>L</b>		5a		
b	<b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
C	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
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 <b>Part VI.</b>	6		
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).	7		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more	8		
Ja	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 <b>Part VI.</b>	9a		
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 <b>Part VI.</b>	9b		
С	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 <b>Part VI.</b>	9c		
10a	4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated			
	supporting organizations)? If "Yes," answer line 10b below.	10a		
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.)	10b		

Schedule A (Form 990 or 990-EZ) 2021

Part	Type III Non-Functionally Integrated 509(a)(3) Supporting Org	jani	zations				
1	1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in <b>Part VI</b> ). <b>See</b> instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.						
Sect	on 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	on 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	<b>Discount</b> claimed for blockage or other factors (explain in detail in <b>Part VI</b> ):						
2	Acquisition indebtedness applicable to non-exempt-use assets	2					
3	Subtract line 2 from line 1d.	3					
4	Cash deemed held for exempt use. Enter 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	on 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	<b>Distributable Amount.</b> 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		ntegrated Type III suppo	rting organization			
•	(see instructions).	ally I	integrated Type III Suppo	Tung Organization			

Secti		<b>Current Year</b>					
1	1 Amounts paid to supported organizations to accomplish exempt purposes 1						
2	Amounts paid to perform activity that directly furthers exe		rted				
	organizations, in excess of income from activity			2			
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations	3			
4	Amounts paid to acquire exempt-use assets	11 0		4			
5	Qualified set-aside amounts (prior IRS approval required-	provide details in <b>Part</b>	VI)	5			
6	Other distributions (describe in Part VI). See instructions.	,	,	6			
7	<b>Total annual distributions.</b> Add lines 1 through 6.			7			
8	Distributions to attentive supported organizations to whic	h the organization is res	ponsive				
	(provide details in <b>Part VI</b> ). See instructions.			8			
9	Distributable amount for 2021 from Section C, line 6			9			
10	Line 8 amount divided by line 9 amount			10			
Secti	on E—Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributior Pre-2021	าร	(iii) Distributable Amount for 2021		
1	Distributable amount for 2021 from Section C, line 6						
2	Underdistributions, if any, for years prior to 2021 (reasonable cause required—explain in <b>Part VI</b> ). See instructions.						
3	Excess distributions carryover, if any, to 2021						
а	From 2016						
b	From 2017						
С	From 2018						
d	From 2019						
е	From 2020						
f	Total of lines 3a through 3e						
g	Applied to underdistributions of prior years						
h	Applied to 2021 distributable amount						
i	Carryover from 2016 not applied (see instructions)						
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.						
4	Distributions for 2021 from Section D, line 7: \$						
а	Applied to underdistributions of prior years						
b	Applied to 2021 distributable amount						
С	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, <i>explain in Part VI</i> . See instructions.						
6	Remaining underdistributions for 2021. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.						
7	Excess distributions carryover to 2022. Add lines 3j and 4c.						
8	Breakdown of line 7:						
а	Excess from 2017						
b	Excess from 2018						
С	Excess from 2019						
d	Excess from 2020						
_	Excess from 2021						

Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Part VI	<b>Supplemental Information.</b> 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 C (Form 990 or 990-EZ)

# **Political Campaign and Lobbying Activities**

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service For Organizations Exempt From Income Tax Under section 501(c) and section 527

Complete if the organization is described below.
 ► Attach to Form 990 or Form 990-EZ.
 ► Go to www.irs.gov/Form990 for instructions and the latest information.

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (See separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (See separate instructions), then

• Section 501(c)(4), (5), or (6) organizations: Complete Part III. Name of organization **Employer identification number** PROSPECT PARK ALLIANCE INC 11-2843763 Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV. See instructions for 1 definition of "political campaign activities." Volunteer hours for political campaign activities. See instructions Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 \$ Enter the amount of any excise tax incurred by organization managers under section 4955 . 2 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? . Yes No Yes No If "Yes," describe in Part IV. Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function 2 Enter the amount of the filing organization's funds contributed to other organizations for section Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, 3 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV. (c) EIN (a) Name (b) Address (d) Amount paid from (e) Amount of political filing organization's contributions received and funds. If none, enter -0-. promptly and directly delivered to a separate political organization. If none, enter -0-. (1) (2)(3)(4)(5) (6)

f Grassroots lobbying expenditures

Scheo	ule C (Form 990 or 990-EZ) 2021					Page ∠
Par	II-A Complete if the organization section 501(h)).	n is exempt u	nder section 50	01(c)(3) and filed	d Form 5768 (ele	ection under
	heck ► ☐ if the filing organization belor address, EIN, expenses, and heck ► ☐ if the filing organization check	share of excess	lobbying expendi	tures).	liated group memb	er's name,
<b>B</b> C			<u>.</u>	ovisions apply.		
	(The term "expenditures" m		paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals
1a	, , ,	•		•	0	
b	Total lobbying expenditures to influence	a legislative bo	dy (direct lobbying	g)	21,150	
С	Total lobbying expenditures (add lines 1	a and 1b) .			21,150	
d	Other exempt purpose expenditures .				8,670,736	
е	Total exempt purpose expenditures (ad-	d lines 1c and 1d	d)		8,691,886	
f	Lobbying nontaxable amount. Enter	the amount from	om the following	table in both		
	columns.				584,594	
	If the amount on line 1e, column (a) or (b) is	: The lobbying	nontaxable amount	is:		
	Not over \$500,000	20% of the am	ount on line 1e.			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus	15% of the excess of	over \$500,000.		
	Over \$1,000,000 but not over \$1,500,000		10% of the excess of			
	Over \$1,500,000 but not over \$17,000,000		5% of the excess ov			
	Over \$17,000,000	\$1,000,000.				
g		5% of line 1f)			146,149	
h		•			0	
i	Subtract line 1f from line 1c. If zero or le				0	
i	If there is an amount other than zero		1h or line 1i. did	the organization	file Form 4720	
	reporting section 4911 tax for this year	_		•		Yes No
	(Some organizations that made a se	ction 501(h) ele	Period Under Sec oction do not have uctions for lines	e to complete all	of the five columr	ns below.
	Lobbying	Expenditures	During 4-Year Av	eraging Period		
	Calendar year (or fiscal year beginning in)	<b>(a)</b> 2018	<b>(b)</b> 2019	(c) 2020	<b>(d)</b> 2021	(e) Total
2a	Lobbying nontaxable amount	601,429	577,171	514,706	584,594	2,277,900
b	Lobbying ceiling amount (150% of line 2a, column (e))					3,416,850
С	Total lobbying expenditures	37,582	73,200	73,200	21,150	205,132
d		150,357	144,293	128,677	146,149	569,476
е	Grassroots ceiling amount (150% of line 2d, column (e))					854,214

0

Schedule C (Form 990 or 990-EZ) 2021

0

Part	II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed (election under section 501(h)).	F	orm	า 57	68		
For	each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed	(a)	)			(b)	
desc	ription of the lobbying activity.	\$	No		Ar	nount	t
1	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:						
а	Volunteers?	Т					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	T					
С	Media advertisements?	T					
d	Mailings to members, legislators, or the public?	$\Box$					
е	Publications, or published or broadcast statements?	╧					
f	Grants to other organizations for lobbying purposes?	┵					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	$\perp$					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	4					
i	Other activities?	_					
j	Total. Add lines 1c through 1i						
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	4					
b	If "Yes," enter the amount of any tax incurred under section 4912						
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .						
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	ㅗ		- 4			
Paru	III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), 501(c)(6).	_	r se	CUC	on —		
						Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			_	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?				2		
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior	_			3		
rart	Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) answered "Yes."					ine 3	, is
1	Dues, assessments and similar amounts from members	L	1				
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).						
а	Current year	F	2a				
b	Carryover from last year	Ļ	2b				
С	Total	F	2c				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	H	3				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?						
5	Taxable amount of lobbying and political expenditures. See instructions	+	5				
Par			3				
Provi	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group lies instructions); and Part II-B, line 1. Also, complete this part for any additional information.	 st)	; Par	rt II-,	A, li	nes 1	and

# SCHEDULE D (Form 990)

**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.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

varrie 0	i tile organization		Employer identification number
PROS	PECT PARK ALLIANCE INC		11-2843763
Par	t I Organizations Maintaining Donor Advi	sed Funds or Other Similar Fund	ds or Accounts.
	Complete if the organization answered "	Yes" on Form 990, Part IV, line 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	.,	
2	Aggregate value of contributions to (during year) .		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year	dvicers is writing that the accets be	ld in denot advised
5	funds are the organization's property, subject to the		
6			
6	Did the organization inform all grantees, donors, are only for charitable purposes and not for the benefit		
	conferring impermissible private benefit?		· · ·
			· · · · · · U Yes U No
Par			
	Complete if the organization answered "	Yes" on Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the o	rganization (check all that apply).	
	☐ Preservation of land for public use (for example, recreation)	ation or education) $\square$ Preservation o	f a historically important land area
	☐ Protection of natural habitat	☐ Preservation o	of a certified historic structure
	☐ Preservation of open space		
2	Complete lines 2a through 2d if the organization hel	d a qualified conservation contribution	n in the form of a conservation
	easement on the last day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		. 2a
b	Total acreage restricted by conservation easements		
c	Number of conservation easements on a certified hi		
d	Number of conservation easements included in (		
-	· · · · · · · · · · · · · · · · · · ·		
2	Number of conservation easements modified, trans		
3		refred, released, extinguished, or terr	minated by the organization during the
_	tax year ►		
4	Number of states where property subject to conserv	/ation easement is located ►	section bandling of
5	Does the organization have a written policy regulation and organization an		
	violations, and enforcement of the conservation eas		
6	Staff and volunteer hours devoted to monitoring, inspec	ting, handling of violations, and enforcing	g conservation easements during the year
	<b>-</b>		
7	Amount of expenses incurred in monitoring, inspecting	g, handling of violations, and enforcing	conservation easements during the year
	<b>▶</b> \$		
8	Does each conservation easement reported on line 2		section 170(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		· · · · · Tes . No
9	In Part XIII, describe how the organization reports co	onservation easements in its revenue	
	balance sheet, and include, if applicable, the text of	-	ancial statements that describes the
	organization's accounting for conservation easemer	nts.	
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 FAS		ue statement and balance sheet works
	of art, historical treasures, or other similar assets		
	service, provide in Part XIII the text of the footnote t		
b	If the organization elected, as permitted under FAS		
~	art, historical treasures, or other similar assets held	· · · · · · · · · · · · · · · · · · ·	
	provide the following amounts relating to these item		, по
			▶ ¢
	(i) Revenue included on Form 990, Part VIII, line 1		· · · · •
^	(ii) Assets included in Form 990, Part X	historical transfers on the control	P D
2	If the organization received or held works of art,		assets for financial gain, provide the
	following amounts required to be reported under FA	<del>-</del>	
а	Revenue included on Form 990, Part VIII, line 1 .		
b	Assets included in Form 990, Part X		▶ \$

Schedu	e D (Form 990) 2021								Page 2
Part	Organizations Maintaining (	Collections of	Art. Historical	Treasures.	or Ot	ther Similar A	Asse	ets (conti	
3	Using the organization's acquisition, accollection items (check all that apply):								
а	Public exhibition		d □ Loar	n or exchang	e progr	ram			
b	✓ Scholarly research		e Othe	_					
c	✓ Preservation for future generations		0 🗀 0	··					
4	Provide a description of the organization	on's collections a	nd explain how	they further	the ord	nanization's ex	emn	t nurnose	in Par
-	XIII.		,,,			ja:a	۵ه	- papaaa	
5	During the year, did the organization s	olicit or receive	donations of art	. historical tr	easure	s. or other sim	nilar		
	assets to be sold to raise funds rather t							☐ Yes	✓ No
Part			•						
	Complete if the organization a 990, Part X, line 21.	_	on Form 990,	Part IV, line	e 9, or	reported an a	amo	unt on Fo	orm
1a	Is the organization an agent, trustee, included on Form 990, Part X?				ions or	other assets	not	☐ Yes	☐ No
b	If "Yes," explain the arrangement in Par	t XIII and comple	te the following	table:					
							Amo	ount	
С	Beginning balance				10	;			
d	Additions during the year				10	i			
е	Distributions during the year				16	•			
f	Ending balance				11	•			
2a	Did the organization include an amount	on Form 990, Pa	rt X, line 21, for	escrow or cu	ustodia	l account liabil	ity?	☐ Yes	☐ No
b	If "Yes," explain the arrangement in Par	t XIII. Check here	if the explanati	on has been	provide	ed on Part XIII			
Par	V Endowment Funds.		-						
	Complete if the organization a	answered "Yes'	on Form 990,	Part IV, line	e 10.				
		(a) Current year	(b) Prior year	(c) Two year	s back	(d) Three years ba	ack	(e) Four year	ars back
1a	Beginning of year balance	26,582,471	20,015,37	1 18,9	78,765	17,504,5	524	16,	406,291
b	Contributions	30,272	155,27		32,500	5,7	741		164,461
С	Net investment earnings, gains, and	ĺ	•			,			
	losses	-2,798,156	4,628,61	9 1,4	56,451	1,492,6	614	1,3	377,959
d	Grants or scholarships	0		D	0	, ,	0	· ·	0
е	Other expenditures for facilities and								
	programs	-972,160	-1,783,21	1 4	52,345	24,1	114		444,186
f	Administrative expenses	0		D	0	·	0		0
g	End of year balance	24,786,747	26,582,47	1 20.0	15,371	18,978,7	765	17.	504,525
2	Provide the estimated percentage of the								
а	Board designated or quasi-endowment	-			,,				
b		4 %	-						
С	Term endowment ► 2.06 %	` ` `							
_	The percentages on lines 2a, 2b, and 2	c should equal 10	00%.						
3a	Are there endowment funds not in the organization by:			nat are held	and ad	lministered for	the	Ye	s No
	(i) Unrelated organizations							3a(i)	V
	···							3a(ii)	V
h	If "Yes" on line 3a(ii), are the related organization						•	3b	-
4	Describe in Part XIII the intended uses		•				•		
Part			o ondownion	1411461					
	Complete if the organization a		on Form 990,	Part IV, line	e 11a.	See Form 99	0, P	art X, line	e 10.
	Description of property	(a) Cost or oth (investme	1	or other basis (other)		Accumulated epreciation		(d) Book va	alue
1a	Land		0	0					0
b	Buildings	3	,728,892	0		3,728,892			0
С	Leasehold improvements		0	0		0			0

1,516,572

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) .

243,000

0

0

**d** Equipment

76,114

243,000

1,440,458

0

Part VII	Investments – Other Securities.  Complete if the organization answered "Yes" on Form 990, Part I	V line 11h See F	orm 990 Part V line 12
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial	derivatives		
	eld equity interests		
(3) Other			
(A)			
(B)			
(C)			
(D) (E)			
(F)			
(G)			
(H)			
	mn (b) must equal Form 990, Part X, col. (B) line 12.) . ▶		
Part VIII	Investments – Program Related.  Complete if the organization answered "Yes" on Form 990, Part I	V, line 11c. See F	orm 990, Part X, line 13.
	(a) Description of investment	(b) Book value	(c) Method of valuation:
	<b>(7)</b>	(1,	Cost or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)	was the same to same the was the same to t		
Part IX	mn (b) must equal Form 990, Part X, col. (B) line 13.) .  Other Assets.		
raitix	Complete if the organization answered "Yes" on Form 990, Part I	V. line 11d. See F	orm 990. Part X. line 15.
	(a) Description	.,	(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)	(I)		
	mn (b) must equal Form 990, Part X, col. (B) line 15.)	<u> </u>	<b>P</b>
Part X	Complete if the organization answered "Yes" on Form 990, Part I	V, line 11e or 11f.	See Form 990, Part X,
1.	line 25.  (a) Description of liability		/IN De alcontina
	., .		(b) Book value
(1) Federal in	come taxes		
(2)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
	mn (b) must equal Form 990, Part X, col. (B) line 25.)		<b>&gt;</b>
2. Liability for	uncertain tax positions. In Part XIII, provide the text of the footnote to the organ	ization's financial stat	
organization's	s liability for uncertain tax positions under FASB ASC 740. Check here if the text	of the footnote has b	een provided in Part XIII .

Schedule D (Form 990) 2021 Page 4 Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Part XI Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total revenue, gains, and other support per audited financial statements . . . . . . . 17,817,743 Amounts included on line 1 but not on Form 990. Part VIII. line 12: 2 -3.577.539 Donated services and use of facilities . . . . . . . . . 448,589 Recoveries of prior year grants . . . . 0 54,304 Add lines **2a** through **2d** . . . . . . . . . . . . . . . . . . -3.074.646 Subtract line **2e** from line **1** . . . . . . . . . . . . . . 3 3 20,892,389 Amounts included on Form 990, Part VIII, line 12, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b . 4a 0 4b 19.590 Add lines 4a and 4b 4c 19,590 Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.) 20,911,979 Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Part XII Complete if the organization answered "Yes" on Form 990. Part IV. line 12a. Total expenses and losses per audited financial statements . . . . . . . . 12,136,074 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: 2a 448.589 Prior year adjustments . . . . . . . 2h 0 0 54,304 Add lines 2a through 2d . . . . . . 2e 502.893 Subtract line 2e from line 1 . . . . . 3 3 11,633,181 Amounts included on Form 990. Part IX. line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b 4a 0 19.590 Add lines **4a** and **4b** . . . . . . . . . . . . 4c 19.590 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) . 5 11,652,771 Part XIII Supplemental Information. Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2: Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information. Schedule D, Part III, Line 1 - The Alliance maintains collections of historic reference materials and 18th and 19th century objects. Consistent with practices of many other not-for-profit organizations, the value of the Alliance's collection is not reflected in the statement of financial position. Purchases are expensed in the year they are acquired. Schedule D, Part III, Line 4 - The Alliance maintains a reference collection which includes historic images, contemporary prints and slides, digital images, drawings, plans, postcards and other institutional records. The collection is used to facilitate the preservation of Prospect Park. The Prospect Park Alliance also owns a collection of 18th century items including paintings, furniture, silverware, ceramics and books which are used in various educational programs. Schedule D, Part V, Line 4 - The Prospect Park Alliance endowment funds are used to support the mission of the organization by providing a secure and dependable investment return for appropriation to the operating budget. Schedule D, Part XI, Line 2d - Cost of goods sold subtracted from merchandise income. Schedule D, Part XI, Line 4b - Indirect cost of Fundraising Event: The Fundraising Events net income presentation in the financials is net of indirect costs but restated in Form 990 as contributions and net event revenue with indirect cost added to expenses. Schedule D, Part XII, Line 2d - Cost of goods sold is reported as an expense in the audited financials but reported as a deduction from sales income on Form 990. Schedule D, Part XII, Line 4b - Indirect cost of Fundraising Event: The Fundraising Events net income presentation in the financials is net of indirect costs but restated in Form 990 as contributions and net event revenue with indirect cost added to expenses.

#### SCHEDULE G (Form 990 or 990-EZ)

#### **Supplemental Information Regarding Fundraising or Gaming Activities**

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

► 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

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

PROS	PECT PARK ALLIANCE INC					11-2	843763	
Par	Fundraising Activities. ( Form 990-EZ filers are no	Complete if that required to	ne organiza complete	ation ansv this part.	vered "Yes" on F	Form 990, Part IV, I	ine 17.	
1	Indicate whether the organization	n raised funds	through any	of the follo	owing activities. C	heck all that apply.		
а	Mail solicitations		e	✓ Solicitati	on of non-govern	ment grants		
b	Internet and email solicitation	S	f		on of government			
С	Phone solicitations		g		fundraising events	•		
d	✓ In-person solicitations		9 _	_ <b>op</b> co.a	and along or one			
2a	or key employees listed in Form							
b	If "Yes," list the 10 highest paid compensated at least \$5,000 by	individuals or e	entities (fund		•	•		
	(i) Name and address of individual or entity (fundraiser)	(ii) Activity	custody c	draiser have or control of outions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization	
			Yes	No				
1 1	ee Schedule G, Part IV, Statement		100					
2								
3								
4								
5								
6								
7								
8								
9								
10								
Total				▶	8,950,023	344,400	8,605,623	
3	List all states in which the organ registration or licensing.	ization is regis	stered or lic	ensed to s	olicit contribution	s or has been notifie	d it is exempt from	
NY								

Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		3				
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
			Prospect Park Gala	Party For The Park	3	(add col. <b>(a)</b> through col. <b>(c)</b> )
4			(event type)	(event type)	(total number)	00i. ( <b>0</b> ))
Revenue	_	Overe vereinte			400 700	4 0== ===
eve	1	Gross receipts	707,206	204,625	163,766	1,075,597
Œ	2	Less: Contributions	619,956	194,025	163,766	977,747
	3	Gross income (line 1 minus line 2)	87,250	10,600	0	97,850
	4	Cash prizes	0	0	0	0
	5	Noncash prizes	5,000	23,312	0	28,312
sesu	6	Rent/facility costs	99,926	20,690	0	120,616
Direct Expenses	7	Food and beverages	97,260	32,812	112,448	242,520
Direc	8	Entertainment	84,908	14,190	0	99,098
	9	Other direct expenses .	19,985	4,203	121,902	146,090
	10 11	Direct expense summary. Ac				636,636
Dο	rt III	Net income summary. Subtra Gaming. Complete if the	act line to from line 3, c	ered "Vee" on Form (	000 Dort IV line 10	-538,786
Га	rt III	\$15,000 on Form 990-E	e organization answe	ered tes on Forms	990, Part IV, line 19,	or reported more than
		ψ10,000 0111 01111 000 E	_,	#ND #11 # # 1		(D.T.)
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
e ve						
æ	1	Gross revenue				
sesu	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs				
	5	Other direct expenses .				
	6	Volunteer labor	☐ Yes % ☐ No	☐ Yes % ☐ No	☐ Yes % ☐ No	
	7	Direct expense summary. Ac	dd lines 2 through 5 in c	olumn (d)		
	8	Net gaming income summar	y. Subtract line 7 from I	ine 1, column (d)		
_	_					
9		nter the state(s) in which the or				Yes No
	<b>b</b> If	·				
10	a	/ere any of the organization's g	aming licenses revoker	d. suspended, or termina	ated during the tax vear	? .   Yes   No
		// " I I I	-	·		
	- ••	, - · · - · · · · · · · · · · · · ·				

Jileuu	ile a (i offi 990 of 990-L2) 2021		rage <b>u</b>
11	Does the organization conduct gaming activities with nonmembers?	☐ Yes	☐ No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity		
	formed to administer charitable gaming?	☐ Yes	☐ No
13	Indicate the percentage of gaming activity conducted in:		
а	The organization's facility		<u>%</u>
b	An outside facility		%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:		
	Name ►		
	Address►		
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	☐ Yes	□No
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$		
	Name ►		
	Address ►		
16	Gaming manager information:		
	Name ►		
	Gaming manager compensation ► \$		
	Description of services provided ▶		
	□ Director/officer □ Employee □ Independent contractor		
17 a b	Mandatory distributions:  Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$	☐ Yes	□No
Part			

Schedule G, Part IV, Statement 1

PROSPECT PARK ALLIANCE INC

Form: **Schedule G (2021)** EIN: **11-2843763** 

Page: **1** 

Part I, Line 2b

#### **Fundraiser Activity Information**

Name and Address	Activity	C1	Gross Receipts	C2	C3
Orr Group Inc 3000 K Street NW Suite E280 Washington, DC 20007	Orr Group's scope of work focused on the management of a major fundraising campaign, tracking timeline and funding map, supporting volunteer campaign leadership, and partnering with staff to form solicitation strategies and identify prospects.	No	8,233,582	300,000	7,933,582
LKA Fundraising & Communications Inc 4800 SW Macadam Ave Ste 240 Portland, OR 97239	LKA was engaged to implement the Alliance's Communication Plan to increase efficiency while deepening donor relationships and increasing annual giving. The scope of work included acquisition and annual membership as well as monthly giving management, direct mail creative development and appeal campaign management.	No	716,441	44,400	672,041
Total:	-		8,950,023	344,400	8,605,623

C1 = Fundraiser control of funds?

C2 = Amount paid to (or retained by) fundraiser

C3 = Amount paid to (or retained by) organization

### **SCHEDULE J** (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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.

OMB No. 1545-0047

Open to Public Inspection

PROSPECT PARK ALLIANCE INC

Employer identification number 11-2843763

Part	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			
	☐ Tax indemnification and gross-up payments ☐ Health or social club dues or initiation fees			
	☐ Discretionary spending account ☐ Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment			
	or reimbursement or provision of all of the expenses described above? If "No," complete Part III to			
	explain	1b		
2	Did the 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		
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.			
	✓ Compensation committee			
	☐ Independent compensation consultant ☐ Compensation survey or study			
	✓ Form 990 of other organizations ✓ Approval by the board or compensation committee			
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		1
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		~
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		~
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only continue 501/a)/2) 501/a)/4) and 501/a)/00) averaginations must complete lines 5.0			
5	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5–9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
3	compensation contingent on the revenues of:			
а	The organization?	5a		1
b	Any related organization?	5b		~
	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		~
b	Any related organization?	6b		~
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For paragraphic listed on Form 000 Part VIII Costian A line to did the expenientian provide any marriage			
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		~
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		~
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9		

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.

(A) Name and Title (Base Compensation (B) Borne schoenther compensation (m) Other reportable (m) Other reportabl	Note: The sum of columns (b)(i)–(iii) ic	, 000	(B) Breakdown of W-2 ar			(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
- Officio Board Member ending   Fahrman 28-902   Fahrma					reportable	other deferred			in column (B) reported as deferred on prior
- Office   Color   C	Susan Donoghue, President / Ex	(i)	297,250	0	0	5,970	1,250	304,470	0
2 Officer / Chief Financial Officer Christian Zimmerman, Pto or Capital and Landscape Mgmt (ii) 0 0 0 0 3,689 29,160 204,430 0 0 Susan Sharer, VP for completed (ii) 0 0 0 0 0 0 0 0 0 0 0 0 A Development (ii) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 Adina Cole, VP for People + (ii) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 Susun Sharer, VP for cole + (iii) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	-officio Board Member ending	(ii)		0	0			0	0
2 Unice / Chee Financial Unice / Christian Zimmerman, Pro for Gapital and Landscape Mgmt (ii) 0 0 0 0 3,689 29,160 204,300 0 0 0 3,689 29,160 204,300 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	James Snow, Chief Operating	(i)	244,352	0	0	4,892	285	249,529	0
Christian Zimmerman, VP for Capital and Landscape Might   (ii)	Officer / Chief Financial Officer 2	(ii)	_	0	0	_	0		0
Susan Sharer, VP for   0	Christian Zimmerman, VP for	(i)	171,581	0	0	3,689	29,160	204,430	0
Susan Sharer, VP for   0   155,425   0   0   3,463   37,117   196,005   0   0   4   0   0   0   0   0   0   0	3 Capital and Landscape Mgmt	(ii)		0	0		0		0
A Development	Sugan Sharor VD for	(i)	155,425	0	0	3,463	37,117	196,005	0
Adina Cole, VP for People + (i) 135,249 0 0 0 0 17,213 152,462 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Development 4	(ii)		0	0				0
Culture         (i)         0	Adina Cole, VP for People +	(i)	135,249	0	0	0	17,213	152,462	0
6	5 Culture	(ii)		0	0	0			T
7 (i) (ii) (iii) (		(i)							
7 (i) (i) (ii) (ii) (iii) (iii	6	(ii)							
8 (i) (ii) (iii) (iii) (iiii) (iiiiiiiiii		(i)							
8 (i) (i) (ii) (iii) (ii	7	(ii)							
10		(i)							
9	8	(ii)							
10		(i)							
10 (i) (i) (ii) (iii) (i	9	(ii)							
(i) (ii) (iii) (iiii) (iiii) (iiii) (iiiii) (iiiiii) (iiiiiiii		(i)							
11 (ii) (ii) (iii) (iiii) (iiii) (iiii) (iiiiii) (iiiiiiii	10	(ii)							
(i) (ii) (iii) (iiii) (iiii) (iiii) (iiiii) (iiiiii) (iiiiiiii		(i)							
12     (i)        13     (ii)        14     (ii)        15     (ii)	11	(ii)							
13 (i) (ii) (ii) (iii) (iiii) (iiii) (iiii) (iiiii) (iiiiii) (iiiiiiii		(i)							
13 (ii) (ii) (iii) (iiii) (iiii) (iiii) (iiiii) (iiiiiii) (iiiiiiii	12	(ii)							
14 (i) (ii) (ii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iiii) (iii)		(i)							
14 (i) (ii) (ii) (iii) (iii) (iii) (iii) (iii) (iii) (iii) (iiii) (iii)	13	(ii)							
15 (i) (ii) (iii) (iii) (iii) (iiii) (iiii) (iiiiiii) (iiiiiiii		(i)							
15 (ii)	14	(ii)							
		(i)							
	15	(ii)							
16 (ii)									
	16	(ii)						+	+

Chedule J (Form 990) 2021	Page
Part III Supplemental Information	
rovide 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 compor any additional information.	lete this pa

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

# **Noncash Contributions**

OMB No. 1545-0047

Open to Public Inspection

11-2843763

Department of the Treasury Internal Revenue Service Name of the organization

PROSPECT PARK ALLIANCE INC

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

► Attach to Form 990.

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

Employer identification number

Part	Types of Property						
		(a) Check if applicable	<b>(b)</b> Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method o	(d) of determini tribution an	
1	Art—Works of art						
2	Art—Historical treasures						
3	Art—Fractional interests						
4	Books and publications						
5	Clothing and household goods						
6	Cars and other vehicles						
7	Boats and planes						
8	Intellectual property						
9	Securities—Publicly traded	~	31	649,712	FMV on date	of contrib	ution
10	Securities—Closely held stock .			,			
11	Securities—Partnership, LLC, or trust interests						
12	Securities-Miscellaneous						
13	Qualified conservation contribution—Historic						
	structures						
14	Qualified conservation contribution—Other						
15	Real estate - Residential						
16	Real estate - Commercial						
17	Real estate—Other						
18	Collectibles						
19	Food inventory						
20	Drugs and medical supplies						
21	Taxidermy						
22	Historical artifacts						
23	Scientific specimens						
24	Archeological artifacts						
25	Other ► ()						
26	Other ► ()						
27	Other ► (						
28	Other ► (						
29	Number of Forms 8283 received						
	which the organization completed	Form 8283	3, Part V, Donee Acknowled	dgement	29		
						Yes	No
30a	During the year, did the organizat	tion receive	by contribution any prope	erty reported in Part I, lines	1 through		
	28, that it must hold for at least the						
	to be used for exempt purposes to	for the entir	e holding period?			30a	~
b	If "Yes," describe the arrangemen						
31	Does the organization have a	gift accep	otance policy that require	es the review of any no	onstandard		
	contributions?					31	~
32a	Does the organization hire or use	e third part	ies or related organization	s to solicit, process, or se	ll noncash		
	contributions?					32a	~
b	If "Yes," describe in Part II.						
33	If the organization didn't report an describe in Part II.	amount in	column (c) for a type of pro	perty for which column (a) i	s checked,		

Schedule M (Form 990) 2021 Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

#### **SCHEDULE O** (Form 990 or 990-EZ)

Department of the Treasury

#### Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

**Open to Public** Inspection

Internal Revenue Service Name of the organization **Employer identification number** PROSPECT PARK ALLIANCE INC 11-2843763 Form 990, Part VI, Section A, Line 2 - Board members Mark and Catherine Varous are married to each other and together they serve as one voting member. Form 990, Part VI, Section A, Line 7a - The Mayor of the City of New York and the Brooklyn Borough President may each appoint up to two Board members. Form 990, Part VI, Section B, Line 11b - Form 990 was prepared by the Chief Operating Officer/Chief Financial Officer and was provided to the full board before filing. Form 990, Part VI, Section B, Line 12c - The Alliance has a long standing practice of requiring all officers and Board members to disclose interests that may give rise to conflicts by responding to a detailed questionnaire. Form 990, Part VI, Section B, Line 15 - The Chair of the Board and the Executive Committee review and approve the salary of the President taking into account the salaries of comparable positions at similar organizations provided in a report compiled by the VP for People + Culture. The Chair, President and Executive Committee review and approve salaries of key employees other than the President, taking into consideration the salaries of comparable positions at similar organizations in a report compiled by the VP for People + Culture. These reviews are conducted annually. Form 990, Part VI, Section C, Line 19 - The Prospect Park Alliance makes available its audited financial statements, Form 990, New York State CHAR500 and Conflict of Interest Policy on its website at www.prospectpark.org. Printed copies of the documents required to be made available for public inspection are also provided upon request. Form 990, Part IX, Line 11g - The category "other fees for services" includes fees paid to tennis pros, architectural and engineering consultants and construction contractors.

Schedule O, Statement 1

PROSPECT PARK ALLIANCE INC

Form: **Form 990 (2021)** EIN: **11-2843763** 

Page: **2** 

Part III, Line 4d

#### **Other Program Services Accomplishments**

Activity Code	Description	Expense	Grants	Revenue
	Prospect Park Alliance offers educational programs teaching visitors about the natural world and its stewardship, helping to support the Alliance's mission to maintain the Park as a resource for New York City, especially those New Yorkers from underserved and low to mid-income neighborhoods. The Park's Audubon Center and Lefferts Historic House Museum provide important educational and cultural programming. Prospect Park also has a very active Volunteer Corps that is made up of community members who donate their time and energy and are critical to the ongoing maintenance and restoration of the Park.	900,312		0
Total:		900,312	0	0