N/A

Zip:

CHAR500	Δηριι	al Filing for Char	itable Organ	izatione		
Online	Annual Filing for Charitable Organizations New York State Office of the Attorney General Charities Bureau - Registration Section 28 Liberty Street Open to Public Inspection					
For new annual filings, and amendments	28 Liberty Street New York, NY 10005 <u>charitiesnys.com</u>				inspection	
Filing Type: • New Fili	ng OAm	endment	Filing Year: 202	22	-	
General Information						
Current Organization Name:	me: Prospect Park Alliance, Inc.		Updated Name:		N/A	
NY Registration Number:	04-12-41		Registration Category:		DUAL	
Organization Type:	Corporation	I	EIN:		112843763	
Current Fiscal Year End:	06/30		Updated Fisca	l Year End:	<u>N/A</u>	
Organization Email:	INFO@PROSPECTPARK.ORG		Organization's	S Phone:	718 965 8951	
Tax Exempt Status:	501(c)(3)		Website:		www.prospectpark.org	
Organization Address						
Mailing Address	S	Principal Ac	ldress		NY State Address	
95 Prospect Park Wes Brooklyn NY 11215-3709 UNITED STATES	st	95 Prospect Park Brooklyn NY 11215-3709 UNITED STATES		NA		
Primary Contact Informatio	n					
First Name: James		Last Name: <u>Sno</u>	w		hief Operating Officer & Chief Financial Officer	
Phone: 7189658980			w@prospectparl			
Organization Type		20000	· ··	Public		
Type of IRS document filed v	Miti 11(3)		nization Type: <u>F</u>	UDIIC		
Third Party Preparer I	nformatio	n				
First Name: N/A		Last Name: <u>N/A</u>		Title: _	N/A	
Firm Name: <u>N/A</u>		Phone: <u>N/A</u>		Email: _	N/A	
Third Party Address						
Street: <u>N/A</u>						
City: <u>N/A</u>		State:	N/A			

Country: N/A

Registration Category

- Does the organization conduct activity in New York State other than soliciting? This may include, but is not limited to, maintaining an office, having employees or staff, or running a program.
 Yes
- Does the organization have assets in New York State?
 Yes
 No
- 3. Is the organization incorporated or formed in New York State?
 Yes No
- 4. Has the organization received more than \$25,000 in total contributions from New York State residents, foundations, corporations or government agencies or other entities in the period covered by this filing?
 Yes O No
- 5. Does the organization plan to receive more than \$25,000 annually in total contributions from New York State residents,

foundations, corporations, government agencies or other entities?

⊙Yes ONo

6. Does the organization use a professional fundraiser or fundraising counsel?

●Yes ONo

Based on your responses to the above questions, this organization's registration category remains as DUAL

Contribution Information

1. Did the organization solicit or receive contributions during the fiscal year in New York State?

• Yes O No

3. Choose the total contributions in New York State this fiscal year: \$5,000,000-\$9,999,999

Annual Exemptions

1. Were the total contributions from New York State, including residents, foundations, government agencies, etc. under \$25,000 during the fiscal year?

O^{Yes} O^{No} N/A

- 2. Did the organization use a professional fundraiser or fundraising counsel during the fiscal year? O Yes O No N/A
- 3. Were the organization's gross receipts under \$25,000 and the market value of its assets under \$25,000 during the fiscal year?

OYes
No

Based on your responses to annual exemption questions, this organization is required to file under <u>DUAL</u> during this fiscal year.

Financial Information			
Type of IRS document filed with IRS	IRS990	Organization's total revenue:	14,051,056
Organization's total contributions:	6,348,270	Organization's total assets:	N/A
Organization's net assets:	38,072,735	Organization's total revenue	N/A
Organization's total liabilities:	N/A	 and contributions: Organization's total assets/ 	N/A
Organization's total income:	N/A	worth:	
For this filing year, does your organi	zation plan to complete	any of the following with the New	York State Charities Bureau?
Closing Withdrawing	Dissolving	None	
Is this your final filing with New Yor	k State? OYes	ON0 N/A	

Filing Information

Did your organization use a professional fundraiser or fundraising counsel for fundraising activity in New York State?

●_{Yes} O_{No}

General Information	Description of Services	Description of Compensation	
Name of Firm: LKA Fundraising & Communications Inc.	LKA Fundraising provided ongoing	LKA Fundraising compensation	
Type: <u>Fund Raiser Counsel</u> Reg Number: <u>32-71-05</u>	strategic consulting on direct response	arrangement provides for a fixed annual fee	
Contract Start: <u>07/01/2022</u> Contract End: <u>06/30/2023</u>	fundraising efforts including all direct	for services, paid on a monthly basis in the	
Amount Paid: <u>\$49,066.85</u> Phone : <u>503-236-4840</u>	mail and online giving, as well as	amount of \$4,179. In addition to the fixed	
Mailing Address: 4800 SW Macadam Ave null Portland NY-97239 United States	supporting membership renewal efforts and program a	fee, LKA Fundraising charged an hourly	
Name of Firm: ORR GROUP, INC.	Orr Group's scope of work focused on the	ORR Group Inc., compensation	
Type: <u>Fund Raiser Counsel</u> Registration ID: <u>32-67-74</u>	management of a major fundraising campaign,	arrangement provides for a specified fixed	
Contract Start: 07/01/2022 Contract End: 06/30/2023	ensuring tracking to timeline and funding	rate established for each of the twelve	
Amount Paid: <u>\$325,071.88</u> Phone : <u>202-759-8154</u> 3000 K STREET NW SUITE E280	<pre>map. Services included supporting volunteer</pre>	2022 through to June	
Mailing Address: WASHINGTON DC-20007 United States	campaign leadership and the c	30, 2023. Note, the fixed monthly rate in t	
Name of Firm: <u>N/A</u>	N/A	N/A	
Type: <u>N/A</u> Registration ID: <u>N/A</u>			
Contract Start: <u>N/A</u> Contract End: <u>N/A</u>			
Amount Paid: <u>N/A</u> Phone : <u>N/A</u>			
Mailing Address: N/A			
	1		

Did the organization receive government grants during this fiscal year?

• Yes O No

Government Grant Agency	Grant Amount
NYC Department of Parks & Recreation	\$79,000.00
NYS OFFICE OF PARKS - ZBGA GRANT	\$49,359.00
OFFICE OF THE BROOKLYN BOROUGH PRESIDENT	\$20,000.00
N/A	N/A
N/A	N/A

Documents

Attached organization's required documents:

- ☑ IRS document
- Certified Public Accountant's Audit Report
- □ Certified Public Accountant's Review Report
- Complete Certificate of Amendment or other document amending the name
- □ Other documents

Signatures

We certify under penalties of perjury that we reviewed this report, including all attachments, and to the best of our knowledge and belief, they are true, correct and complete in accordance with the laws of the State of New York applicable to this report.

Role	First Name	Last Name	Email		
President	Morgan	Monaco	mmonaco@prospectpark.org		
Chief Financial Officer	James	Snow	jsnow@prospectpark.org		
Signature of President	DocuSigned by:		Date:	5/2/2024	
Signature of Chief Financial Officer	—DocuSigned by: James Show C8286764D5344C2		Date:	5/2/2024	