	000
Form	JJU

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

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

Department of the Treasury

▶ 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

201 7 Open to Public nspectio

OMB No. 1545-0047

<u>A</u>	For the	e 2017 cale	ndar year, or tax year beginning 07/01 , 2017, and ending	06	6/30	, <b>20</b> 18
В	Check if	f applicable:	C Name of organization PROSPECT PARK ALLIANCE INC		D Employ	er identification number
	Address	s change	Doing business as			11-2843763
	Name c	hange	Number and street (or P.O. box if mail is not delivered to street address) Room/suit	e	E Telepho	ne number
	Initial re	eturn	95 Prospect Park West			718-965-8951
	Final retu	urn/terminated	City or town, state or province, country, and ZIP or foreign postal code			
	Amende	ed return	Brooklyn, NY, 11215-3709		<b>G</b> Gross re	
	Applicat	tion pending	F Name and address of principal officer: Susan Donoghue	H(a) Is this a g	roup return for	subordinates? 🗌 Yes 🗹 No
			95 PROSPECT PARK W, BROOKLYN, NY 11215	H(b) Are all	subordinate	s included? 🗌 Yes 🗌 No
<u> </u>	Tax-exe	empt status:	✓ 501(c)(3) 501(c) () ◄ (insert no.) 4947(a)(1) or 527	If "No," atta	ach a list. (s	ee instructions)
J	Website	e: 🕨 🛛 ww	w.prospectpark.org	H(c) Group	exemption	number 🕨
Κ	Form of	organization:	✓ Corporation Trust Association Other ► L Year of formation	on: <b>1987</b>	M State	of legal domicile: NY
Ρ	art I	Summ	ary			
	1	Briefly de	escribe the organization's mission or most significant activities: In parti	nership with	the City	of New York and the
e		commun	ity, the Prospect Park Alliance restores, develops, and operates Prospect Park	rk for the e	njoyment	of all by caring for
Jan		the natur	al environment, preserving historic design, and serving the public through 1	acilities and	l program	۱S.
/err	2		is box $\blacktriangleright$ if the organization discontinued its operations or disposed o			
20	3	Number	of voting members of the governing body (Part VI, line 1a) .		3	41
Activities & Governance	4		of independent voting members of the governing body (Part VI, line 1b)		4	40
ies	5	Total nur	nber of individuals employed in calendar year 2017 (Part V, line 2a)		5	257
tivit	6		nber of volunteers (estimate if necessary)		6	2,718
Aci	7a		elated business revenue from Part VIII, column (C), line 12		7a	0
	b		ated business taxable income from Form 990-T, line 34		7b	0
				Prior Ye	ear	Current Year
đ	8	Contribu	tions and grants (Part VIII, line 1h) $\ldots$ $\ldots$ $\ldots$ $\ldots$ $\ldots$ $\ldots$ $\ldots$	4	,716,734	5,085,222
Revenue	9	Program	service revenue (Part VIII, line 2g)	5	5,798,228	5,480,995
eve	10	Investme	nt income (Part VIII, column (A), lines 3, 4, and 7d) $\ldots$ $\ldots$		334,878	437,444
œ	11	Other rev	renue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) $\ldots$ .		-405,169	-452,776
	12	Total reve	enue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	10	,444,671	10,550,885
	13		nd similar amounts paid (Part IX, column (A), lines 1–3)		0	0
	14	Benefits	paid to or for members (Part IX, column (A), line 4)		0	0
s	15		other compensation, employee benefits (Part IX, column (A), lines 5–10)	6	,211,151	6,473,229
Expenses	16a	Professio	nal fundraising fees (Part IX, column (A), line 11e)		149,242	113,168
ę	b	Total fun	draising expenses (Part IX, column (D), line 25) ►1,082,434			
ш	17		penses (Part IX, column (A), lines 11a–11d, 11f–24e)	3	,530,009	3,753,608
	18		enses. Add lines 13–17 (must equal Part IX, column (A), line 25)		,890,402	10,340,005
	19	Revenue	less expenses. Subtract line 18 from line 12		554,269	210,880
es Sec				eginning of Cu	Irrent Year	End of Year
Net Assets or Fund Balances	20	Total ass	ets (Part X, line 16)	21	,225,885	22,273,363
t As: d Bá	21	Total liab	ilities (Part X, line 26)	1	,898,602	1,793,987
Pupe	22		ts or fund balances. Subtract line 21 from line 20		,327,283	20,479,376
	art II	Signat	ture Block			

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer Susan Donoghue, President Type or print name and title			Date	9	
Paid Preparer	Print/Type preparer's name	Preparer's signature	Date		Check if self-employed	PTIN
Use Only	Firm's name			Firm'	s EIN ►	
	Firm's address ►			Phon	e no.	
May the IRS	discuss this return with the pre	eparer shown above? (see instruction	ons)			. 🗌 Yes 🗌 No
Fee Demonstr	when Developed in the Alexa Marking and the	a concrete in atmostic na				Farm 000 (0017

For Paperwork Reduction Act Notice, see the separate instructions.

orm 99	90 (2017) Page 2
Part	
	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?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
4	If "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest program services, as measured b
-	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 \$3,722,216 including grants of \$0) (Revenue \$4,643,109 )
	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 foodservice operations. Recreational
	activities include a year-round tennis center and carousel rides in the summer. Food and beverage services are available for
	refreshment in the Park. Private events may be held at a number of different locations within the Park and public events in the
	Park 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.
4b	(Code:) (Expenses \$ 1,444,077 including grants of \$ 0 ) (Revenue \$ 778,700 )
	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 \$ 2,035,919 including grants of \$) (Revenue \$46,050 )
	Field Operations: Prospect Park Alliance partners with the City of New York Department of Parks and Recreation in caring for the
	natural environment within the Park. The Arboriculture crew helps to care for the roughly 40,000 trees of Prospect Park which
	include 150 species and make up Brooklyn's only forest. Prospect Park provides priceless natural habitat for wildlife and park visitors as well as a much needed migration stop for thousands of birds and the Park has been designated an Important Bird Area
	by the National Audubon Society. The Park's 250 acres of natural areas are maintained and monitored year-round by the
	Alliance's Natural Resources Crew, which works with volunteers and the Woodlands Youth Crew to restore sections in the Park
	designated as natural areas. The Natural Resources Crew also engages youth through its work with the Woodlands Youth Crew.
	The Alliance provides maintenance staff at the Parade Ground, which was renovated and restored with public funds, as well as
	supplementing other areas of operations in the Park.
4d	Other program services (Describe in Schedule O.) See Schedule O, Statement 2
	(Expenses \$ 1,168,402 including grants of \$ 0) (Revenue \$ 13,136)
4e	Total program service expenses ► 8,370,614
	Form <b>990</b> (2012

	0 (2017)		I	Page <b>3</b>
Part	V Checklist of Required Schedules		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
-	complete Schedule A	1	~	
2 3	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	2	~	~
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	~	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	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? <i>If "Yes," complete Schedule D, Part I</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 "Yes," complete Schedule D, Part II</i>	7		~
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	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 "Yes," complete Schedule D, Part IV</i> .	9		~
0	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V $\therefore$	10	~	
1	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	~	
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? <i>If "Yes," complete Schedule D, Part VII</i>	11b		~
C	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		~ ~
2 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	11f 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		~
4 a		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? <i>If "Yes," complete Schedule F, Parts I and IV.</i>	14b		~
5	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>	15		~
6	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? <i>If "Yes," complete Schedule F, Parts III and IV.</i>	16		~
7	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	~	
8	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i> .	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		~

Form **990** (2017)

	0 (2017)		I	Page <b>4</b>
Part	V Checklist of Required Schedules (continued)		Y	
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	Yes	No V
	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	20b		
22	domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i> Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	21		~
23	Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22		~
20	organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J.	23	~	
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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	24a		~
	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? <b>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	24d 25a		~
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? <i>If "Yes," complete Schedule L, Part I</i> .	25b		~
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>	26		~
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		~
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a b	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a 28b		~ ~
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	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	~	~
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		~
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		~
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? <i>If "Yes," complete Schedule R, Part I</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		~
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? <i>If "Yes," complete Schedule R, Part VI</i>	37		~
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O.	37	~	
			n <b>990</b>	(2017)

Form 99	0 (2017)		F	Page 5
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 60			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	~	
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 257			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	~	
0-	<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions) .			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	~	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in 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			
		40		~
b	If "Yes," enter the name of the foreign country:	4a		•
b	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		~
С	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			
7	gifts were not tax deductible?	6b		
7 a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
u	and services provided to the payor?	7a	V	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	~	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was		-	
	required to file Form 8282?	7c		~
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		~
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		~
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		~
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
a h	Initiation fees and capital contributions included on Part VIII, line 12       10a         Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities       10b			
ь 11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . <b>10b Section 501(c)(12) organizations.</b> Enter:			
a	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.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	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.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		~
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O .	14b		

Form 99	90 (2017)		F	Page <b>6</b>
Part	VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below,	and	for a	"No"
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S			ions.
	Check if Schedule O contains a response or note to any line in this Part VI			. 🗸
Secti	on 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 <b>1a</b> 41	{		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar			
	committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent . <b>1b</b> 40			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	1		
	any other officer, director, trustee, or key employee?	2	~	
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		~
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		~
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		~
6	Did the organization have members or stockholders?	6		~
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7a	~	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		~
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	~	
b	Each committee with authority to act on behalf of the governing body?	8b	~	
9	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 in Schedule O	9		~
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Rever	ue C	<u> </u>	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		~
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	104		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a	~	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	Tiu	•	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	~	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	~	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	10		
40	describe in Schedule O how this was done	12c	<b>v</b>	
13 14	Did the organization have a written whistleblower policy?       . <td>13 14</td> <td>レ レ</td> <td></td>	13 14	レ レ	
15	Did the process for determining compensation of the following persons include a review and approval by	17		
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	~	
b	Other officers or key employees of the organization	15b	~	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		~
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	Tua		
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		
Secti	on C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed NY			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section	n 501(	c)(3)s	only)
	available for public inspection. Indicate how you made these available. Check all that apply.			
19	✓ Own website ✓ Another's website ✓ Upon request			ار ممط
1.51	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of int	araat		

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 95 Prospect Park West, Brooklyn, NY 11215-3709

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

• List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

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

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

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

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

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

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

		5		(0	C)					
(A)	(B)	(do n	ot ch		ition	e than c	no	(D)	(E)	(F)
Name and Title	Average					is both		Reportable	Reportable	Estimated
	hours per week (list any	office	er and		lirect	or/trust	,	compensation from	compensation from related	amount of other
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	(W-2/1099-MISC)	compensation from the organization and related organizations
Eric Adams	2.00									
Ex-officio - Brooklyn Borough President	0.00	~						0	0	0
Shawn Austin	2.00									
Board Member	0.00	~						0	0	0
Jason Beverage	2.00									
Board Member	0.00	~						0	0	0
Andrew Birsh	2.00									
Board Member	0.00	~						0	0	0
Jane Cohan	2.00									
Board Member	0.00	~						0	0	0
Rudy Crew	2.00									
Board Member - Borough President appointment	0.00	~						0	0	0
Allison Dunn	2.00									
Board Member	0.00	~						0	0	0
Jill Eisenstadt	2.00									
Board Member	0.00	~						0	0	0
Sarah Gerstenzang	2.00									
Board Member	0.00	~						0	0	0
David Gmach	2.00									
Board Member	0.00	~						0	0	0
Sharon Greenberger	2.00									
Board Member	0.00	~						0	0	0
Richard T Greene Jr	2.00									
Board Member	0.00	~						0	0	0
Nick Guarna	2.00									
Board Member	0.00	~						0	0	0
Stephen K Hindy	2.00									
Board Member	0.00	~						0	0	0

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 organizations below dotted line)	box,	unles	Pos neck ss pe	erson	e than o is both or/trust employee	n an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
						ted				
Winthrop Hoyt Board Member	2.00	r						0	0	0
Rev Dr Emma Jordan-Simpson Board Member/Mayoral appointment	2.00	~						0	0	0
Jorge Juantorena	2.00	•						0	0	0
Board Member	0.00	~						0	0	0
Susan Kath	2.00							-		
Board Member	0.00	~						0	0	0
Tom Keany	2.00									
Board Member	0.00	~						0	0	0
Andrew Kimball	2.00									
Board Member	0.00	~						0	0	0
Brad Lander	2.00									
Ex-Officio/NYC Council Member	0.00	~						0	0	0
Rebecca Messner Leckie	2.00									
Board Member	0.00	~						0	0	0
Grace Lyu-Volckhausen	2.00									
Board Member/Borough President appointment	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
Lark-Marie Menchini	2.00									
Board Member	0.00	~						0	0	0
Sharon Myrie	2.00									
Board Member	0.00	~						0	0	0

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	box, office	ot ch unles er anc	Pos ieck is pe d a d	erson lirect	e than o is both or/trust	an ee)	<b>(D)</b> Reportable compensation from	<b>(E)</b> Reportable compensation from related	<b>(F)</b> Estimated amount of other
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
Tina Novogratz	2.00									
Board Member	0.00	~						0	0	0
James Patchett	2.00									
Board Member / Mayoral Appointment	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
Mitchell Silver	2.00									
Ex-Officio - Commissioner NYC Parks & Receation	0.00	~						0	0	0
Phillip Summers	2.00									
Board Member	0.00	~						0	0	0
Claude Trahan	2.00									
Board Member	0.00	~						0	0	0
Michael Kalt	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
Susan Donoghue	40.00									
President / Ex-officio Board Member	0.00	~		~				220,548	0	4,411
Mark A and Catherine Varous	2.00									
Treasurer/Board Member	0.00	~		~				0	0	0
Joseph Fishman	2.00									
Secretary / Board Member	0.00	~		~				0	0	0
James Snow	40.00									
Chief Operating Officer / Chief Financial Officer	0.00			~				176,568	0	8,894

	(A)	(B)			(C Pos	ition			(D)	(E)		(F)	
	Name and title	Average	•				e than o is both		Reportable	Reportable	Est	imated	
		hours per week (list any hours for related	office	er and		irecto Key	or/trust		compensation from the organization	compensation from related organizations (W-2/1099-MISC)	c comp	amount of other compensation from the	
		organizations below dotted line)	Individual trustee or director	Institutional trustee	9r	employee	Highest compensated employee	er	(W-2/1099-MISC)		and	nizatior related nization	I
Jessica C	Green Wilson	40.00											
Vice Pres	ident for Development and Marketing	0.00					~		115,276	0		6	4,15
	Zimmerman	40.00											
/ice Pres	ident for Capital and Landscape Mgmt	0.00					~		130,442	0		3	4,64
1b Su	ub-total								(42.024	0			2.10
c To	otal from continuation sheets to Part otal (add lines 1b and 1c)	VII, Sectio							642,834 642,834	0			2,10
<b>2</b> To	otal number of individuals (including bu portable compensation from the organ	t not limited						e) w		_	) of		2,10
	· · · · · · · · · · · · · · · · · · ·						_					Yes	No
er	d the organization list any <b>former</b> of nployee on line 1a? If "Yes," complete	Schedule J	for su	ich i	indi	vidu	ıal				3		~
or	or any individual listed on line 1a, is the ganization and related organizations dividual											~	
<b>5</b> Di	d any person listed on line 1a receive or r services rendered to the organization									ation or individua		•	~
	B. Independent Contractors											1	<u> </u>
1 Co	omplete this table for your five highest ompensation from the organization. Repear.												ax
	(A) Name and business add	iress							<b>(B)</b> Description of s	ervices	(C) Compens		
Vone													

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶ 0

Form 990 (2017)

# Part VIII Statement of Revenue

		Check if Schedule C	) contains a res	nonse or note to	any line in this	Part VIII		
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts	1a	Federated campaigns	з <b>1а</b>	0				
arai our	b	Membership dues .	1b	446,724				
Am C	С	Fundraising events .	<b>1c</b>	1,130,524				
Gift lar	d	Related organizations		0				
imi,	е	Government grants (con		627,339				
er S	f	All other contributions, g						
J. Pr		and similar amounts not inc		2,880,635				
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contributions inclue		121,480				
	h	Total. Add lines 1a-1	f	<b>&gt;</b>	5,085,222			
Program Service Revenue				Business Code			-	-
eve	2a	Visitor Service and Ev		713990	4,643,109	4,643,109	0	0
е В	b	Design and Construct	ion	541320	778,700	778,700	0	0
izi	C	Field Operations	5	712190	46,050	46,050	0	0
Š	d	Education and Public	Programs	712190	13,136	13,136	0	0
jran	e f	All other program ser			0	0	0	
ŏč	g	Total. Add lines 2a–2		•	5,480,995	U	0	0
	3	Investment income	(including divid	ends, interest.	5,400,775			
		and other similar amo			356,634	0	0	356,634
	4	Income from investmen	t of tax-exempt bo	ond proceeds ►	0	0	0	0
	5	<b>B</b>			0	0	0	0
			(i) Real	(ii) Personal				
	6a	Gross rents	0	0				
	b	Less: rental expenses	0	0				
	С	Rental income or (loss)	0	0				
	d	Net rental income or (	, ,		0	0	0	0
	7a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory Less: cost or other basis	645,862	0				
	b	and sales expenses .	F/F 0F0					
	c	Gain or (loss)	565,052 80,810	0				
	d	Net gain or (loss)	80,810	► 0	80,810	80,810	0	0
	<b>–</b>				00,010	00,010		
an	8a	Gross income from fu	undraising					
Other Revenue		events (not including \$	1,130,524					
Be		of contributions reported						
ler		See Part IV, line 18 .	· · · · a	183,775				
ŧ		Less: direct expenses						
		Net income or (loss) f		events . 🕨	-491,443		0	-491,443
	9a	Gross income from ga						
	.	See Part IV, line 19 .						
		Less: direct expenses Net income or (loss) f						
		Gross sales of in	• •					
	IVa	returns and allowance		93,593				
	h	Less: cost of goods s		, 0,0,0				
		Net income or (loss) f			38,667	38,667	0	0
	-	Miscellaneous R		Business Code				-
	11a							
	b							
	c							
	d	All other revenue .			0	0	0	0
	е	Total. Add lines 11a-		•	0			
	12	Total revenue. See in	nstructions	🕨	10,550,885	5,600,472	0	-134,809 Form <b>990</b> (2017)

# 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).

Dono	t include amounts reported on lines 6b, 7b,			(C)	<u>/</u> (D)
8b, 9b	o, and 10b of Part VIII.	<b>(A)</b> Total expenses	<b>(B)</b> Program service expenses	Management and general expenses	رط) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	0	0		
2	Grants and other assistance to domestic individuals. See Part IV, line 22	0	0		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	0	0		
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	0 431,121	0 192,254	180,602	58,265
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		
7		0		0	0
7 8	Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	4,753,241 71,010	3,902,651 53,672	353,312 8,072	497,278
9	Other employee benefits	778,053	624,923	82,126	71,004
10	Payroll taxes	439,804	355,185	39,451	45,168
11	Fees for services (non-employees):				
а	Management	0	0	0	0
b	Legal	0	0	0	0
с	Accounting	35,300	0	35,300	0
d		0	0	0	0
е	Professional fundraising services. See Part IV, line 17	113,168			113,168
f	Investment management fees	0	0	0	0
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	1,309,473	1,189,571	71,241	48,661
12	Advertising and promotion	27,347	22,730	2,265	2,352
13	Office expenses	138,101	49,705	6,212	82,184
14	Information technology	125,189	39,469	39,051	46,669
15	Royalties	0	0	0	0
16	Occupancy	403,447	403,426	0	21
17	Travel	7,829	6,469	815	545
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	0	0	0	0
19	Conferences, conventions, and meetings .	11,703	6,972	1,966	2,765
20	Interest	8,181	8,181	0	0
21	Payments to affiliates	0	0	0	0
22	Depreciation, depletion, and amortization .	413,167	411,026	1,933	208
23	Insurance	272,338	227,188	45,150	0
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
а	License and permit fees	345,348	345,348	0	0
b	Other program materials	318,721	303,507	639	14,575
c	Credit card processing fees and account adjustn	131,550	90,127	0	41,423
d	Equipment including rental and repairs	77,845	69,636	2,558	5,651
e	All other expenses	128,069	68,574	16,264	43,231
25	Total functional expenses. Add lines 1 through 24e	10,340,005	8,370,614	886,957	1,082,434
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 ▶		-15.010.1		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,

Form 990 (2017)

Form 990 Part )	x /			Page <b>11</b>
	Check if Schedule O contains a response or note to any line in this Pa	rt X		. 🗌
		<b>(A)</b> Beginning of year		<b>(B)</b> End of year
1	Cash—non-interest-bearing	316,554	1	752,049
2	Savings and temporary cash investments	4,018,616	2	1,698,309
3	Pledges and grants receivable, net	931,450	3	828,098
4	Accounts receivable, net	975,713	4	1,357,129
5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	0	5	0
6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6	0
- liet	Notes and loans receivable, net	0	7	0
Assets				0
	Inventories for sale or use	12,916	8	10,959
9 10a	Prepaid expenses and deferred charges	187,096	9	182,570
b		590,732	10c	281,531
11	Investments—publicly traded securities	14,156,291	11	17,124,525
12	Investments—other securities. See Part IV, line 11	14,150,291	12	
13	Investments—program-related. See Part IV, line 11	13	0	
14	Intangible assets	0	14	0
15	Other assets. See Part IV, line 11	36,517	15	
16	Total assets. Add lines 1 through 15 (must equal line 34)		16	38,193
17	Accounts payable and accrued expenses	21,225,885	17	22,273,363
18		953,169	18	1,047,539
19		0	19	0
20		525,563		685,366
20	Tax-exempt bond liabilities	0	20 21	0
	Escrow or custodial account liability. Complete Part IV of Schedule D.	0	21	0
	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		00	
		0	22	0
0	Secured mortgages and notes payable to unrelated third parties	419,870	23	61,082
24	Unsecured notes and loans payable to unrelated third parties	0	24	0
25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D			
			25	
26	Total liabilities. Add lines 17 through 25	1,898,602	26	1,793,987
Lund Balances 52 Balances 65 Balances 65 Balances	complete lines 27 through 29, and lines 33 and 34.			
8 27	Unrestricted net assets	14,022,586	27	15,017,614
<b>m</b> 28	Temporarily restricted net assets	3,563,579	28	3,620,644
29	Permanently restricted net assets	1,741,118	29	1,841,118
	Organizations that do not follow SFAS 117 (ASC 958), check here $\blacktriangleright$ and complete lines 30 through 34.			
ຍ 2 30	Capital stock or trust principal, or current funds		30	
31	Paid-in or capital surplus, or land, building, or equipment fund		31	
x 32	Retained earnings, endowment, accumulated income, or other funds .		32	
30           31           32           32           33	Total net assets or fund balances	19,327,283	33	20,479,376
2 34				22,273,363
34	Total liabilities and net assets/fund balances	21,225,885	34	22,2

Form **990** (2017)

	00 (2017)			Pa	ige <b>12</b>
Part	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI	•			
1	Total revenue (must equal Part VIII, column (A), line 12)	1		10,55	0,885
2	Total expenses (must equal Part IX, column (A), line 25)	2		10,34	0,005
3	Revenue less expenses. Subtract line 2 from line 1	3		21	0,880
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		19,32	7,283
5	Net unrealized gains (losses) on investments	5		94	1,213
6	Donated services and use of facilities	6			0
7	Investment expenses	7			0
8	Prior period adjustments	8			0
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10		20,47	9,376
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," exp Schedule O.	plain in			
2a	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 comp		2a		~
	reviewed on a separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	~	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited separate basis, consolidated basis, or both:	d on a			
	Separate basis Consolidated basis Both consolidated and separate basis				
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for over				
	of the audit, review, or compilation of its financial statements and selection of an independent accourt	ntant?	2c	~	
	If the organization changed either its oversight process or selection process during the tax year, exp Schedule O.	olain in			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set f the Single Audit Act and OMB Circular A-133?		3a		~
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under required audit or audits, explain why in Schedule O and describe any steps taken to undergo such au		3b		
				. 990	

Form **990** (2017)

SCHEDULE A (Form 990 or 990-EZ)

# **Public Charity Status and Public Support**

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Inspection

Name of the organization
Department of the Treasury Internal Revenue Service

PROSPECT PARK ALLIANCE INC

Ι	Employer	identification	number
---	----------	----------------	--------

	1	1-2843	3763

Part I	<b>Beason for Public Charity Status</b> (All organizations must complete this p	art.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

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

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	listed in you	organization ur governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)	
			Yes	No			
(A)							
(B)							
(C)							
(D)							
(E)							
Total							

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

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

 Section A. Public Support

	on A. Public Support	(-) 0010	(1-) 0014	(-) 0015	(4) 0010	(-)	0017	(6) Tatal
	dar year (or fiscal year beginning in)	(a) 2013	<b>(b)</b> 2014	(c) 2015	<b>(d)</b> 2016	(e)	2017	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not							
	include any "unusual grants.")	254442	5 047 040	4 004 454	4 74 / 704	-	005 000	00.077.070
0		3,566,442	5,217,218	4,281,456	4,716,734	5,	085,222	22,867,072
2	Tax revenues levied for the organization's benefit and either paid							
	to or expended on its behalf	0	0	0	0		o	0
3	The value of services or facilities	0	0	0	0			0
U	furnished by a governmental unit to the							
	organization without charge	438,630	484,657	490,224	488,893		470,420	2,372,824
4	Total. Add lines 1 through 3	4,005,072	5,701,875	4,771,680	5,205,627		555,642	25,239,896
	•	1,000,012	0,101,010	1/1/1/000	0,200,027		000/012	20,20,70,0
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)							1,168,671
6	Public support. Subtract line 5 from line 4							24,071,225
Secti	on B. Total Support							
Calen	dar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2013	<b>(b)</b> 2014	(c) 2015	<b>(d)</b> 2016	(e)	2017	<b>(f)</b> Total
7	Amounts from line 4	4,005,072	5,701,875	4,771,680	5,205,627	5,	555,642	25,239,896
8	Gross income from interest, dividends,							
	payments received on securities loans,							
	rents, royalties, and income from							
	similar sources	120,658	180,181	234,132	286,629		356,634	1,178,234
9	Net income from unrelated business							
	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
11 12	<b>Total support.</b> Add lines 7 through 10 Gross receipts from related activities, etc.					10		26,418,130
12	<b>First five years.</b> If the Form 990 is for the					12	a section	5,519,662 2,501(c)(3)
15	organization, check this box and stop he							
Secti	on C. Computation of Public Suppor	t Percentag	••••					
14	Public support percentage for 2017 (line	-		1 column (f))		14		91.12 %
15	Public support percentage from 2016 Sci					15		92.34 %
16a	<b>33</b> <sup>1</sup> / <sub>3</sub> % <b>support test</b> -2017. If the organ						or more.	
	box and stop here. The organization qua							
b	331/3% support test-2016. If the organi							
	this box and stop here. The organization	qualifies as a p	oublicly suppo	rted organizati	on			🕨 🗌
17a	10%-facts-and-circumstances test-2	017. If the orga	anization did n	ot check a bo	x on line 13, 1	6a, or	16b, and	l line 14 is
	10% or more, and if the organization me							
	Part VI how the organization meets the '	facts-and-circ	umstances" te	est. The organiz	zation qualifies	s as a	publicly	supported
	organization							🕨 🗌
b	10%-facts-and-circumstances test-2	016. If the orga	anization did n	ot check a bo	x on line 13, 1	6a, 16	6b, or 17a	a, and line
	15 is 10% or more, and if the organization	ation meets the	e "facts-and-o	circumstances"	' test, check	this be	ox and <b>s</b>	top here.
	Explain in Part VI how the organization r							
	supported organization							
18	Private foundation. If the organization di							
	instructions							🕨 🗌
					Sch	nedule A	A (Form 990	) or 990-EZ) 2017

Schedule A (Form 990 or 990-EZ) 2017

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

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

Secti	on A. Public Support						
Calen	dar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2013	<b>(b)</b> 2014	(c) 2015	(d) 2016	(e) 2017	(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						
5	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						
74	received from disqualified persons .						
b	Amounts included on lines 2 and 3 received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
-	Add lines 7a and 7b						
с 8	Public support. (Subtract line 7c from						
0	line 6.)						
Sacti	on B. Total Support	Ĺ					
	dar year (or fiscal year beginning in)	(a) 2013	<b>(b)</b> 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9	Amounts from line 6	(a) 2013	<b>(b)</b> 2014	(0) 2013	(u) 2010	(e) 2017	(1) 101ai
10a	Gross income from interest, dividends, payments received on securities loans, rents,						
	royalties, and income from similar sources.						
<b>b</b>	-						
b	Unrelated business taxable income (less section 511 taxes) from businesses						
	acquired after June 30, 1975						
-	· · ·	i					
	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is regularly carried on						
40	ξ,						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
40	(Explain in Part VI.)						
13	<b>Total support.</b> (Add lines 9, 10c, 11, and 12.)						
44	<b>First five years.</b> If the Form 990 is for the		a'a firat aaaan	d third fourth			= 501(a)(2)
14	organization, check this box and <b>stop he</b>	0	•				( )( )
Socti	on C. Computation of Public Suppor						
15	Public support percentage for 2017 (line 8	-		3 column (fl)		15	%
16	Public support percentage for 2017 (inter Public support percentage from 2016 Sch						%
	on D. Computation of Investment In					10	70
<u>3ecu</u> 17	-			v line 13 colu	mn (f))	17	%
17							
18 19a	33 <sup>1</sup> / <sub>3</sub> % support tests – 2017. If the organ						
198	17 is not more than $33^{1}/_{3}$ %, check this box						
b	33 <sup>1</sup> / <sub>3</sub> % support tests – 2016. If the organiz	-	-	-		-	
u	line 18 is not more than 33 <sup>1</sup> / <sub>3</sub> %, check this l						
20		_	-	-			
20	Private foundation. If the organization di	и пот спеск а	box on line 14	, 198, OF 190, 0	SHECK THIS DOX	and see instr	uctions 🕨 🗋

Schedule A (Form 990 or 990-EZ) 2017

# Part IV Supporting Organizations

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

# Section A. All Supporting Organizations

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

Yes No

1

2

3a

3b

3c

4a

4b

4c

5a

5b 5c

6

7

8

9a

9b

9c

10a

10b

# Part IV Supporting Organizations (continued) 11 Has the organization accepted a gift or contribution from any of the following persons? Yes No a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization? 11a 11a b A family member of a person described in (a) above? 11b 11c c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI. 11c Yes Yes Yes

- 1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in **Part VI** how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.
- Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.

# Section C. Type II Supporting Organizations

1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in **Part VI** how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).

# Section D. All Type III Supporting Organizations

- Yes No
   Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?
   Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how
- the organization maintained a close and continuous working relationship with the supported organization(s).
  By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in **Part VI** the role the organization's

supported organizations played in this regard.

# Section E. Type III Functionally Integrated Supporting Organizations

- 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).
- a The organization satisfied the Activities Test. Complete line 2 below.
- **b** The organization is the parent of each of its supported organizations. *Complete line 3 below.*
- c 🗌 The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).
- 2 Activities Test. Answer (a) and (b) below.
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in **Part VI identify those supported organizations and explain** how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- **b** Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.*
- 3 Parent of Supported Organizations. Answer (a) and (b) below.
- **a** Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *Provide details in Part VI.*
- **b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in Part VI the role played by the organization in this regard.*

1

2

2

3

2a

2b

3a

3b

Yes No

Page 5

# Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

tegrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust	t on Nov. 20, 1970 (explai	n in Part VI). <b>See</b>				
instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.						
		(B) Current Year				

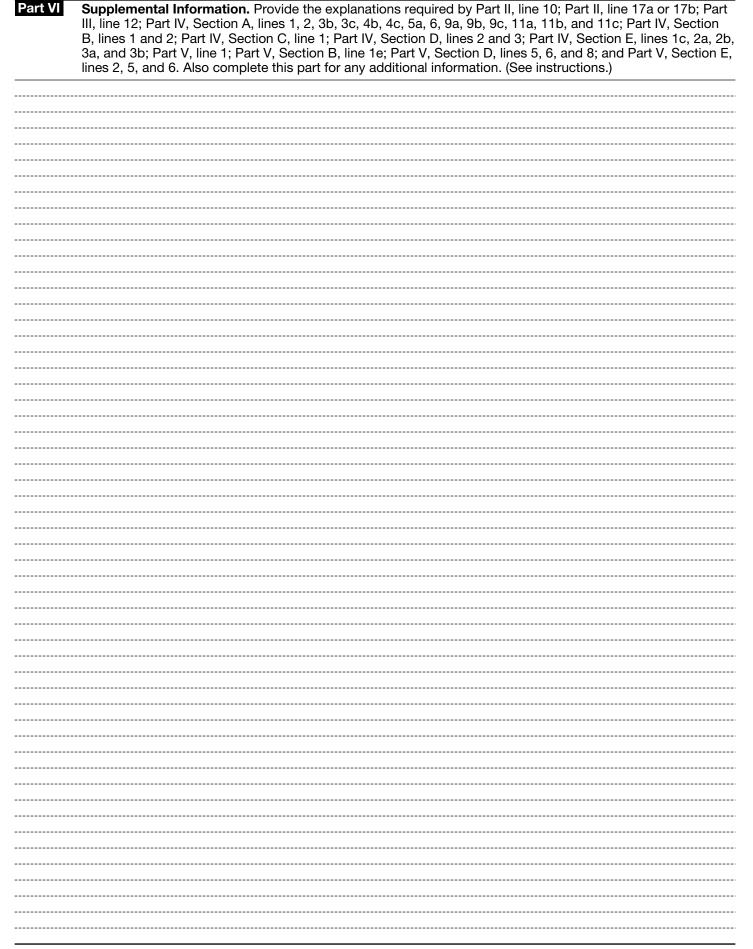
Section A - Adjusted Net Income	(A) Prior Year	(B) Current Year (optional)		
1 Net short-term capital gain	1			
2 Recoveries of prior-year distributions	2			
3 Other gross income (see instructions)	3			
4 Add lines 1 through 3.	4			
5 Depreciation and depletion	5			
6 Portion of operating expenses paid 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			
Section 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):				
a Average monthly value of securities	1a			
<b>b</b> Average monthly cash balances	1b			
c Fair market value of other non-exempt-use assets	1c			
d Total (add lines 1a, 1b, and 1c)	1d			
e Discount claimed for blockage or other factors (explain in detail in Part VI):				
2 Acquisition indebtedness applicable to non-exempt-use assets	2			
3 Subtract line 2 from line 1d.	3			
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,				
see instructions).	4			
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5			
6 Multiply line 5 by .035.	6			
7 Recoveries of prior-year distributions	7			
8 Minimum Asset Amount (add line 7 to line 6)	8			
Section C - Distributable Amount			Current Year	
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1			
2 Enter 85% of line 1.	2			
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3			
4 Enter greater of line 2 or line 3.	4			
5 Income tax imposed in prior year	5			
<b>6 Distributable Amount</b> . Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6			
7 Check have if the summer user is the summination's first as a new functional	- المعالية		las superinsting (	

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

Schedule A (Form 990 or 990-EZ) 2017

	le A (Form 990 or 990-E2) 2017			Page			
Part		b) Supporting Organi	zations (continued)	Current Veer			
	ion D - Distributions			Current Year			
1	Amounts paid to supported organizations to accomplish e						
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity							
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations				
4	Amounts paid to acquire exempt-use assets						
5	Qualified set-aside amounts (prior IRS approval required)						
6	Other distributions (describe in Part VI). See instructions.						
7	Total annual distributions. Add lines 1 through 6.						
8	Distributions to attentive supported organizations to whic (provide details in <b>Part VI</b> ). See instructions.	h the organization is res	sponsive				
9	Distributable amount for 2017 from Section C, line 6						
10	Line 8 amount divided by line 9 amount						
			(ii)	(iii)			
S	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	Underdistributions Pre-2017	Distributable Amount for 2017			
1	Distributable amount for 2017 from Section C, line 6						
2	Underdistributions, if any, for years prior to 2017 (reasonable cause required—explain in <b>Part VI</b> ). See instructions.						
3	Excess distributions carryover, if any, to 2017						
а							
b	From 2013						
C	From 2014						
d	From 2015						
e	From 2016						
f	Total of lines 3a through e						
g	Applied to underdistributions of prior years						
 h	Applied to 2017 distributable amount						
i	Carryover from 2012 not applied (see instructions)						
÷	Remainder. Subtract lines 3g, 3h, and 3i from 3f.						
4	Distributions for 2017 from						
4	Section D, line 7: \$						
а	Applied to underdistributions of prior years						
-	Applied to 2017 distributions of phot years						
c	Remainder. Subtract lines 4a and 4b from 4.						
	Remaining underdistributions for years prior to 2017, if						
5	any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in <b>Part VI.</b> See instructions.						
6	Remaining underdistributions for 2017. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in <b>Part VI.</b> See instructions.						
7	<b>Excess distributions carryover to 2018</b> . Add lines 3j and 4c.						
8	Breakdown of line 7:						
a	Excess from 2013						
b	Excess from 2014						
<u>с</u>	Excess from 2015						
	Excess from 2016						
~	Excess from 2017						

Schedule A (Form 990 or 990-EZ) 2017



SCHEDULE C	Political Campaign and Lobbying Activities
(Form 990 or 990-EZ)	rondour oumpuigh and Eoboying Activitios

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Department of the Treasury Internal Revenue Service 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 id	dentification numbe	ər
PROS	PECT PARK ALLIANCE INC		11-2843763	
Part	I-A Complete if the organization is exempt under section 501(c) or is a section 501(c) or i	ection 527	7 organization.	
1	Provide a description of the organization's direct and indirect political campaign activities definition of "political campaign activities")		·	
2	Political campaign activity expenditures (see instructions)	<b>&gt;</b>	\$	
3	Volunteer hours for political campaign activities (see instructions)			
Part	I-B Complete if the organization is exempt under section 501(c)(3).			
1	Enter the amount of any excise tax incurred by the organization under section 4955	🕨	\$	
2	Enter the amount of any excise tax incurred by organization managers under section 495	5	\$	
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?		🗌 Yes	No
4a	Was a correction made?		🗌 Yes	🗌 No
b	If "Yes," describe in Part IV.			
Part	I-C Complete if the organization is exempt under section 501(c), except	section 50	01(c)(3).	
1	Enter the amount directly expended by the filing organization for section 527 exemp activities		\$	
2	Enter the amount of the filing organization's funds contributed to other organizations for 527 exempt function activities		\$	
3	Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1 line 17b		\$	
4	Did the filing organization file Form 1120-POL for this year?		🗌 Yes	No
5	Enter the names, addresses and employer identification number (EIN) of all section 527 p	olitical orga	anizations to whic	h the filing

5 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.

<b>(a)</b> Name	<b>(b)</b> Address	<b>(c)</b> EIN	<b>(d)</b> Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

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

Schedule C (Form 990 or 990-EZ) 2017

OMB No. 1545-0047

2017

**Open to Public** 

Inspection

Pa	art	II-A	Complete if the organization section 501(h)).	is exempt under section 501(c)(3) and filed	d Form 5768 (ele	ction under
A	Cł	neck 🕨	_ 0 0	s to an affiliated group (and list in Part IV each affil hare of excess lobbying expenditures).	iated group membe	er's name,
В	Ch	neck 🕨	if the filing organization checke	ed box A and "limited control" provisions apply.		
			(a) Filing organization's totals	<b>(b)</b> Affiliated group totals		
•	la	Total lo	bbying expenditures to influence p	oublic opinion (grass roots lobbying)	0	
	b	Total lo	bbying expenditures to influence a	a legislative body (direct lobbying)	39,680	
	С	Total lo	bbying expenditures (add lines 1a	and 1b)	39,680	
	d	Other e	exempt purpose expenditures		8,330,934	
	е	Total e	xempt purpose expenditures (add	lines 1c and 1d)	8,370,614	
	f	-	5	ne amount from the following table in both		
	-	columr	IS.		568,531	
		If the an	nount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
		Not ove	r \$500,000	20% of the amount on line 1e.		
		Over \$5	00,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.		
		Over \$1	,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.		
		Over \$1	,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.		
		Over \$1	7,000,000	\$1,000,000.		
	g	Grassr	oots nontaxable amount (enter 259	% of line 1f)	142,133	
	h	Subtra	ct line 1g from line 1a. If zero or les	ss, enter -0	0	
	i	Subtra	ct line 1f from line 1c. If zero or les	s, enter -0	0	
	j		e is an amount other than zero on ng section 4911 tax for this year?	on either line 1h or line 1i, did the organization		Yes No

4-Year Averaging Period Under section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

	Lobbying Expenditures During 4-Year Averaging Period									
	Calendar year (or fiscal year beginning in)	<b>(a)</b> 2014	<b>(b)</b> 2015	<b>(c)</b> 2016	<b>(d)</b> 2017	<b>(e)</b> Total				
2a	Lobbying nontaxable amount	521,444	525,584	544,253	568,531	2,159,812				
b	Lobbying ceiling amount (150% of line 2a, column (e))					3,239,718				
c	Total lobbying expenditures	39,770	39,907	39,692	39,680	159,049				
d	Grassroots nontaxable amount	130,361	131,396	136,063	142,133	539,953				
e	Grassroots ceiling amount (150% of line 2d, column (e))					809,930				
f	Grassroots lobbying expenditures	0	0	0	0	0				

Schedule C (Form 990 or 990-EZ) 2017

# Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For e	each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed	(a)		(b)	
	iption of the lobbying activity.	Yes	No	Amount	
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?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
С	Media advertisements?				
d	Mailings to members, legislators, or the public?				
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?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
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)?				
b	If "Yes," enter the amount of any tax incurred under section 4912				
с	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?				
Part	III-A Complete if the organization is exempt under section 501(c)(4), section 501(c 501(c)(6).	)(5), c	or se	ction	

			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 year?	3		

Part III-B	Complete 501(c)(6) a answered	nd if eith					line 3	, is
	-							

1	Dues, assessments and similar amounts from members	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	2a	
b	Carryover from last year	2b	
С	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	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?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

## Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

SCHEDULE	D
(Form 990)	

Department of the Treasury

Internal Revenue Service

Supplemental Financial Statements ► Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047	_
2017	
Open to Public Inspection	

Name of	of the or	rganization		Employer identification number
PROS	<b>SPECT</b>	PARK ALLIANCE INC		11-2843763
Par	rt I	Organizations Maintaining Donor Adv		
		Complete if the organization answered		
			(a) Donor advised funds	(b) Funds and other accounts
1		number at end of year		
2		egate value of contributions to (during year)		
3		egate value of grants from (during year) .		
4	00	egate value at end of year		
5		he organization inform all donors and donor		
	funds	s are the organization's property, subject to th	e organization's exclusive legal contr	ol? 🗌 Yes 🗌 No
6	only	he organization inform all grantees, donors, a for charitable purposes and not for the bene purpose and not for the bene	fit of the donor or donor advisor, or t	or any other purpose
Der		erring impermissible private benefit? Conservation Easements.		· · · · · · · L Yes L No
Par	t II	Complete if the organization answered	"Yes" on Form 990 Part IV line 7	
1	Purn	ose(s) of conservation easements held by the		·
•	-	reservation of land for public use (e.g., recrea		f a historically important land area
		rotection of natural habitat		f a certified historic structure
		reservation of open space		
2		plete lines 2a through 2d if the organization he	ald a qualified conservation contributi	on in the form of a conservation
2		ment on the last day of the tax year.	eid a quaimed conservation contributi	Held at the End of the Tax Year
_		• •		
a				-
b		acreage restricted by conservation easement		
c		ber of conservation easements on a certified l		
d		ber of conservation easements included in		
		5		· · 2d
3		ber of conservation easements modified, trans ear ►	sferred, released, extinguished, or ter	minated by the organization during the
4	Num	ber of states where property subject to conse	rvation easement is located >	
5	Does	the organization have a written policy re-	garding the periodic monitoring, ins	spection, handling of
	violat	tions, and enforcement of the conservation ea	sements it holds?	· · · · · · · □ Yes 🗌 No
6	Staff	and volunteer hours devoted to monitoring, inspec	ting, handling of violations, and enforcing	conservation easements during the year
	►	<b>0</b> , 1		<b>3</b>
7	Amoi ►\$	unt of expenses incurred in monitoring, inspectir	ng, handling of violations, and enforcing	conservation easements during the year
8		each conservation easement reported on line section 170(h)(4)(B)(ii)?		
9		rt XIII, describe how the organization reports		
-		nce sheet, and include, if applicable, the text of		
		nization's accounting for conservation easeme		
Par	t III	Organizations Maintaining Collection	s of Art. Historical Treasures. or	<sup>r</sup> Other Similar Assets.
		Complete if the organization answered		
1a	If the	organization elected, as permitted under SF		
		s of art, historical treasures, or other similar		
		c service, provide, in Part XIII, the text of the f	•	
b	lf the	e organization elected, as permitted under S	FAS 116 (ASC 958) to report in its	revenue statement and balance sheet
-		s of art, historical treasures, or other similar		
		c service, provide the following amounts relat	• •	
				► ¢
	(i) 1	evenue included on Form 990, Part VIII, line 1 ssets included in Form 990, Part X		···· Ψ
0	(II) As	SSELS INCIDUED IN FORM 990, Part A	historical traceures or other similar	$\cdot$ $\cdot$ $\cdot$ $\bullet$ $\bullet$
2		e organization received or held works of art wing amounts required to be reported under S		
a		nue included on Form 990, Part VIII, line 1 .		
<u>b</u>		ts included in Form 990, Part X		
For Pa	aperwo	rk Reduction Act Notice, see the Instructions for	r Form 990. Cat. No. 52283	D Schedule D (Form 990) 2017

Schedu	le D (Form 990) 2017					Page <b>2</b>			
Part	III Organizations Maintaining	Collections of A	Art, Historical	<b>Freasures</b> , or	Other Similar A	ssets (continued)			
3	Using the organization's acquisition, collection items (check all that apply):	accession, and otl	her records, cheo	k any of the fol	lowing that are a	significant use of its			
а									
b									
c	<ul> <li>Preservation for future generations</li> </ul>	3		·					
4	Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.								
5	During the year, did the organization	solicit or receive	donations of art	historical treasu	ires or other simi	lar			
5	assets to be sold to raise funds rather								
Part				o o.gaao o					
- Circ	Complete if the organization 990, Part X, line 21.	-	' on Form 990, I	Part IV, line 9, o	or reported an a	mount on Form			
1a	Is the organization an agent, trustee		-						
	included on Form 990, Part X?					📋 Yes 📋 No			
b	If "Yes," explain the arrangement in Pa	art XIII and comple	ete the following t	able:		A			
	5			-		Amount			
c	5 5								
d	· · · · · · · · · · · · · · · · · · ·				1d				
e	Distributions during the year				1e				
f	Ending balance				1f				
2a b	Did the organization include an amount in P					•			
Par	If "Yes," explain the arrangement in Part <b>Endowment Funds.</b>			in has been prov		<u>···</u>			
T al	Complete if the organization	answered "Yes'	' on Form 990	Part IV line 10					
		(a) Current year	(b) Prior year	(c) Two years bac		ck (e) Four years back			
1a	Beginning of year balance	16,406,291	15,233,307	14,961,16					
b		164,461	313,600	14,901,10					
č	Net investment earnings, gains, and	104,401	515,000	103,32		<u>12</u> 0,731,423			
	losses	1,377,959	1,350,370	416,26	58 454,92	808,915			
d	Grants or scholarships	0	0	110/20	0	0 0			
e	Other expenditures for facilities and					<u> </u>			
	programs	444,186	490,986	329,65	429,58	38 258,905			
f	Administrative expenses	0	0		0	0 0			
g	End of year balance	17,504,525	16,406,291	15,233,30	14,961,10	56 13,991,892			
2	Provide the estimated percentage of t								
а	Board designated or quasi-endowmer	-							
b	Permanent endowment  10	.52 %							
С	Temporarily restricted endowment ►	7.19 %							
	The percentages on lines 2a, 2b, and								
3a	Are there endowment funds not in the	e possession of th	e organization th	at are held and	administered for t	he			
	organization by:					Yes No			
	(i) unrelated organizations					3a(i) 🗸 🗸			
	()					3a(ii) 🗸 🗸			
b	If "Yes" on line 3a(ii), are the related o	0				3b			
4	Describe in Part XIII the intended uses		n's endowment f	unds.					
Part					0 = 000				
	Complete if the organization								
	Description of property	(a) Cost or otl (investme		or other basis ( other)	c) Accumulated depreciation	(d) Book value			
1a	Land		0	0		0			
b	Buildings	. 3	,728,891	0	3,669,395	59,496			
С	Leasehold improvements		0	0	0	0			
d	Equipment	. 1	,500,814	0	1,278,779	222,035			
e	Other		0	0	0	0			
Total.	Add lines 1a through 1e. (Column (d) n	nust equal Form 99	90, Part X, columi	n (B), line 10c.) .	🕨	281,531			

Schedule D (Form 990) 2017

Part VII	Investments – Other Securities. Complete if the organization answered "Yes" on Form 990, Part	IV line 11h See I	Form 990 Part X line 12
	(a) Description of security or category	(b) Book value	(c) Method of valuation:
	(including name of security)		Cost or end-of-year market value
(1) Financial			
(2) Closely-1 (3) Other	ield equity interests		
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
	o) 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		
	(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
			Cost of end-of-year market value
(1)			
(2)			
(3)			
(4)			
<u>(5)</u> (6)			
(7)			
(8)			
(9)			
	o) must equal Form 990, Part X, col. (B) line 13.) 🕨		
Part IX	Other Assets.		
	Complete if the organization answered "Yes" on Form 990, Part	IV, line 11d. See I	Form 990, Part X, line 15.
	(a) Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9) Total. (Colui	mn (b) must equal Form 990, Part X, col. (B) line 15.)		. ►
Part X	Other Liabilities.		
	Complete if the organization answered "Yes" on Form 990, Part	IV, line 11e or 11f	. See Form 990, Part X,
	line 25.		
1.	(a) Description of liability		(b) Book value
(1) Federal in	come taxes		
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9) Total (Column (	a) must aqual Form 000 Dart V and /D) line 05 1		
i otal. (Column (l	o) must equal Form 990, Part X, col. (B) line 25.) 🕨		

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

	le D (Form 990) 2017				Page 4
Pari			-	Return	•
	Complete if the organization answered "Yes" on Form 990,				
1	Total revenue, gains, and other support per audited financial statements	• •		1	12,015,341
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	0-			
a h	Net unrealized gains (losses) on investments	2a 2b	941,213		
b	Recoveries of prior year grants	20 2c	483,079		
c d	Other (Describe in Part XIII.)	20 2d	0 54,926		
e	Add lines <b>2a</b> through <b>2d</b>	-	54,920	2e	1,479,218
3	Subtract line <b>2e</b> from line <b>1</b>			3	10,536,123
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	İ		•	10,330,123
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	0		
b	Other (Describe in Part XIII.)	4b	14,762		
c	Add lines <b>4a</b> and <b>4b</b>			4c	14,762
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line	12.)		5	10,550,885
Part	XII Reconciliation of Expenses per Audited Financial Stater	nents	With Expenses pe	r Retu	
	Complete if the organization answered "Yes" on Form 990,	Part l'	V, line 12a.		
1	Total expenses and losses per audited financial statements			1	10,863,248
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a	483,079		
b	Prior year adjustments	2b	0		
С	Other losses	2c	0		
d	Other (Describe in Part XIII.)	2d	54,926		
е	Add lines <b>2a</b> through <b>2d</b>			2e	538,005
3	Subtract line <b>2e</b> from line <b>1</b>	· ·		3	10,325,243
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	0		
b	Other (Describe in Part XIII.)	4b	14,762		
c	Add lines <b>4a</b> and <b>4b</b>			4c	14,762
5	Total expenses. Add lines <b>3</b> and <b>4c</b> . ( <i>This must equal Form 990, Part I, lin</i>	ie 18.)		5	10,340,005
Part	<b>XIII</b> Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a ar		art IV lines the and 2h	· Dort V	line 4: Dort V line
	t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part				
	Jule D, Part III, Line 1 - The Alliance maintains collections of historic reference	-	-		
	practices of many other not-for-profit organizations, the value of the Alliance's				
	on Durchases are expensed in the year they are acquired				
positi	un ruchases ale expensed in the year they are acquired.				
Scher	Jule D, Part III, Line 4 - The Alliance maintains a reference collection which inc	ludes k	nistoric images, contem	norary r	prints and slides
	l images, drawings, plans, postcards and other institutional records. The colle				
	The Prospect Park Alliance also owns a collection of 18th and 18th century ite				
	ooks which are used in various educational programs.		<u></u> <u>9</u> p <u></u> <u>9</u> 07. <u>.</u>		
Schee	Jule D, Part V, Line 4 - The Prospect Park Alliance endowment funds are used	to supp	port the mission of the	organiza	tion by providing
	ure and dependable investment return for appropriation to the operating budg				
Scheo	lule D, Part XI, Line 2d - Cost of goods sold subtracted from merchandise inco	me.			
Sched	lule D, Part XI, Line 4b - Indirect costs of Fundraising events: The Fundraising	Events	s net income presentati	ion in the	e financials is net
of ind	irect costs, but restated in Form 990 as contributions and net event revenue, v	vith inc	lirect costs added to ex	penses.	
Scheo	lule D, Part XII, Line 2d - Cost of goods sold is reported as an expense in the a	udited	financials, but reported	d as a de	duction from
sales	income on Form 990.				
	lule D, Part XII, Line 4b - Indirect cost of Fundraising Events: The Fundraising				financials is net
of ind	irect costs, but restated in Form 990 as contributions and net event revenue w	ith ind	irect cost added to exp	enses.	

		-	-	aising or Gaming		OMB No. 1545-0047
(Form 990 or 990-EZ) Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or organization entered more than \$15,000 on Form 990-EZ, line 6a. ► Attach to Form 990 or Form 990-EZ.						2017
Department of the Treasury Internal Revenue Service		ttach to Form .irs.gov/Form			Open to Public Inspection	
Name of the organization	Employer identific					
PROSPECT PARK ALLIANCE INC Part I Fundraising Activities	Complete if th		ation anov	warad "Vas" on E		2843763 ino 17
Form 990-EZ filers are	•	•		veled res off	0111 990, Fait IV, I	
1 Indicate whether the organization				owing activities. Ch	neck all that apply.	
<b>a</b> 🗹 Mail solicitations		e 🕨		ion of non-governn		
<b>b</b> Internet and email solicitation	ons			ion of government	grants	
<ul> <li>c <ul> <li>Phone solicitations</li> <li>d <ul> <li>✓ In-person solicitations</li> </ul> </li> </ul></li></ul>		g 🕨	Special	fundraising events		
<b>2a</b> Did the organization have a wri	tten or oral agre	ement with	any individ	lual (including offic	ers, directors, truste	ees,
or key employees listed in Forn	n 990, Part VII) o	r entity in c	onnection	with professional fu	undraising services?	🖌 Yes 🗌 No
b If "Yes," list the 10 highest paid compensated at least \$5,000 b			draisers) pı	ursuant to agreeme	ents under which the	e fundraiser is to be
(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)	<b>(vi)</b> Amount paid to (or retained by) organization
		Yes	No			
1 See Schedule G, Part IV, Statement 1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total			►	1,418,165	113,168	1,304,997
3 List all states in which the orga				olicit contributions		ed it is exempt from
registration or licensing.						
NY						

------

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

Part II 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.

			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
			Gala	Party for the Park	3	(add col. (a) through
			(event type)	(event type)	(total number)	col. (c))
Revenue	1	Gross receipts	857,436	200,297	256,566	1,314,299
-	2	Less: Contributions	704,181	169,777	256,566	1,130,524
	3	Gross income (line 1 minus				
		line 2)	153,255	30,520	0	183,775
	4	Cash prizes	0	0	0	0
	5	Noncash prizes	54,335	40,493	0	94,828
sesu	6	Rent/facility costs	208,235	23,317	65,838	297,390
Direct Expenses	7	Food and beverages	84,983	21,545	87,286	193,814
Direc	8	Entertainment	28,300	11,595	7,190	47,085
	9	Other direct expenses .	33,105	4,774	4,222	42,101
	10	Direct expense summary. Add				675,218
	11 rt III	Net income summary. Subtrac				-491,443

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

Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))		
Re	1	Gross revenue						
ses	2	Cash prizes						
Expen	3	Noncash prizes						
Direct Expenses	4	Rent/facility costs						
	5	Other direct expenses .						
	6	Volunteer labor	□ Yes% □ No	□ Yes% □ No	□ Yes% □ No			
	7	Direct expense summary. Ac	ld lines 2 through 5 in c	olumn (d)				
	8	Net gaming income summar	y. Subtract line 7 from li	ne 1, column (d)				
-	<ul> <li>9 Enter the state(s) in which the organization conducts gaming activities:</li> <li>a Is the organization licensed to conduct gaming activities in each of these states?</li> <li>b If "No," explain:</li> </ul>							
10		Vere any of the organization's g "Yes," explain:	-					

Schedu	ile G (Form 990 or 990-EZ) 2017 Page <b>3</b>
11 12	Does the organization conduct gaming activities with nonmembers?
13 a b 14	Indicate the percentage of gaming activity conducted in:         The organization's facility       13a         An outside facility       13b         Indicate the percentage of gaming activity conducted in:         The organization's facility       13a         Max       13b         Indicate the percentage of gaming activity conducted in:         The organization's facility       13a         Max       13b         M
	Name ►
15a	Does the organization have a contract with a third party from whom the organization receives gaming
b c	revenue?
	Name ► Address ►
16	Gaming manager information:
	Name ►
	Gaming manager compensation
	Description of services provided
	Director/officer
17 a	Mandatory distributions: Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?
b	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 ► \$
Part	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

Schedule G (Form 990 or 990-EZ) 2017

### Schedule G, Part IV, Statement 1

Form: Schedule G (2017)

Page: 1

Total:

## PROSPECT PARK ALLIANCE INC

EIN: 11-2843763

## Part I, Line 2b

#### **Fundraiser Activity Information** C1 C2 C3 Name and Address Activity Gross Receipts Advance NYC Institutional and government fundraising No 971,441 80,325 891,116 226 Tulip Avenue consulting, including grant writing and Floral Park, NY 11101 reporting services for fiscal year 2018. Daniller and Company Direct response fundraising services No 446,724 32,843 413,881 3724 Jefferson Suite 302 including creative work and strategy and Austin, TX 78731 content of materials for direct mailing and eappeals. Preparation of materials, distribution planning, mailing, analysis and reporting for Membership and Acquisition campaigns.

1,418,165 113,168 1,304,997

C1 = Fundraiser control of funds?

C2 = Amount paid to (or retained by) fundraiser

C3 = Amount paid to (or retained by) organization

					OMB No. 1545-0047			
(Form	Form 990) For certain Officers, Directors, Trustees, Key Employees, and Highest				)17	7		
		Compensated Employees ► Complete if the organization answered "Yes" on Form 990, Part	IV, line 23.	Open		-		
	ent of the Treasury Revenue Service	Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest info			o Pu Dectio			
	the organization		Employer identificati	_				
PROSI	PECT PARK ALI	LIANCE INC	11-2	2843763				
Part	Questions	Regarding Compensation						
	<b>a</b>			_	Yes	No		
<b>1</b> a		ropriate box(es) if the organization provided any of the following to or for a ection A, line 1a. Complete Part III to provide any relevant information regard		orm				
		or charter travel Housing allowance or residence	•					
	Travel for c	_ 3	•					
		ification and gross-up payments						
		ry spending account   Personal services (such as, main						
b		poxes on line 1a are checked, did the organization follow a written poli						
		nent or provision of all of the expenses described above? If "No,"	complete Part II					
	explain			· 1b	1			
2	Did the orda	nization require substantiation prior to reimbursing or allowing expe	enses incurred by	all				
-		tees, and officers, including the CEO/Executive Director, regarding the						
				· 2				
3		n, if any, of the following the filing organization used to establish the comp						
		CEO/Executive Director. Check all that apply. Do not check any boxes for zation to establish compensation of the CEO/Executive Director, but expl		/a				
	-	tion committee	an ni ar n.					
		t compensation consultant						
		f other organizations Approval by the board or compe	ensation committee					
4		ar, did any person listed on Form 990, Part VII, Section A, line 1a, with res r a related organization:	spect to the filing					
а		erance payment or change-of-control payment?		. 4a	i 📃	~		
b		or receive payment from, a supplemental nonqualified retirement plan?		. 4b		~		
С	•	or receive payment from, an equity-based compensation arrangement?		. 4c	;	~		
	Il res to any	of lines 4a-c, list the persons and provide the applicable amounts for ea	ich item in Part III.					
	Only section	501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines	5–9.					
5	For persons lis	sted on Form 990, Part VII, Section A, line 1a, did the organization pay or						
	compensation	contingent on the revenues of:						
а	•	on?			-	~		
b		ganization?		. 5b	<u>،</u>	~		
	II Yes on line	e 5a or 5b, describe in Part III.						
6		sted on Form 990, Part VII, Section A, line 1a, did the organization pay or contingent on the net earnings of:	accrue any					
а	The organizat	ion?		. 6a		~		
b		ganization?		. 6b	,	~		
	If "Yes" on line	e 6a or 6b, describe in Part III.						
7	For porcent	inted on Form 000 Dart VII Socies A line to did the ensuring	provide one nerf	vod				
7		isted on Form 990, Part VII, Section A, line 1a, did the organization described on lines 5 and 6? If "Yes," describe in Part III				~		
8		ounts reported on Form 990, Part VII, paid or accrued pursuant to a contra		-	+			
	to the initial	contract exception described in Regulations section 53.4958-4(a)(3	)? If "Yes," desc	ribe				
	in Part III			. 8		~		
•	lf "Voo" oo "	no 9 did the expension also follow the vehicitable pressure the	and the describe					
9		ne 8, did the organization also follow the rebuttable presumption prection 53.4958-6(c)?						
	-				1	1		

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and			(F) Compensation
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	(D) Nontaxable benefits	<b>(E)</b> Total of columns (B)(i)–(D)	in column (B) reported as deferred on prior Form 990
Susan Donoghue, President / Ex	(i)	220,548	0	0	4,411	0	224,959	0
-officio Board Member 1	(ii)	0	0	0	0	0	0	0
James Snow, Chief Operating	(i)	176,568	0	0	3,637	5,257	185,462	0
Officer / Chief Financial Officer 2	(ii)	0	0	0	0	0	0	0
Jessica Green Wilson, Vice	(i)	115,276	0	0	2,810	61,342	179,428	0
President for Development and	(ii)	0	0	0	0	0	0	0
Christian Zimmerman, Vice	(i)	130,442	0	0	2,816	31,833	165,091	0
President for Capital and	(ii)	0	0	0	0	0	0	0
	(i)							
5	(ii)							
	(i)							
6	(ii)							
	(i)							
7	(ii)							
	(i)							
8	(ii)							
	(i)							
9	(ii)							
	(i)							
10	(ii)							
	(i)							
11	(ii)							
	(i)							
12	(ii)							
	(i)							
13	(ii)							
	(i)							
14	(ii)							
	(i)							
15	(ii)							
	(i)							
16	(ii)							
		1				1		l

Schedule J (Form 990) 2017

# Part III Supplemental Information

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


# SCHEDULE M (Form 990)

# **Noncash Contributions**

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Attach to Form 990.

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



Employer identification number

11-2843763

Name of the organization

PROSPE	CT PARK	INC

Part	Types of Property						
		<b>(a)</b> Check if applicable	<b>(b)</b> Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(c Method of c noncash contril	determinin	
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	~	21	121,480	FMV on date o	f 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				29		
						Yes	No
30a	During the year, did the organiza 28, that it must hold for at least t to be used for exempt purposes	hree years	from the date of the initial	contribution, and which isr	n't required	0	
ь.					· · · 3	0a	~
ь 31	If "Yes," describe the arrangemen Does the organization have a contributions?	gift accep					
	contributions?				· · ·  ;	31	~

- 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?
  b If "Yes," describe in Part II.
- 33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

~

32a

	Form 990) 2017 Page 2
Part II	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)

# Supplemental Information to Form 990 or 990-EZ

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

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



Department of the Treasury	
Internal Revenue Service	
Name of the organization	

PROSPECT PARK ALLIANCE INC

Employer identification number 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 reviewed by the Audit Committee of the Board of Directors. The Form 990 was then 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 complied by the Human Resources Director. 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 Human Resources Director. These reviews are conducted annually and were last conducted in February 2019.

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.
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.

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

## Schedule O, Statement 1

Form: Form 990 (2017)

Page: 1

## **Reasonable Cause Explanations**

EIN: 11-2843763

**Header Section** 

## Explanation

A Form 8868 was filed and approved on a timely basis to extend the due date to allow adequate time for compilation and Board review.

Page: 2 Part III, Li							
	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 for both schools and the public. During fiscal year 2018, 19,502 people visited the Prospect Park Audubon Center and an additional 81,567 people visited Pop-up Audubon I and II, innovative programs offering mobile presentations in various locations throughout the Park. The Lefferts Historic House Museum had public visitation totaling 26,802. 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. Over 2,700 volunteers contributed 16,653 hours to the Park including 204 outdoor cleanups.	1,168,402	0	13,136			
Total:		1,168,402	0	13,136			

# Schedule O, Statement 2

Form: Form 990 (2017)

PROSPECT PARK ALLIANCE INC

EIN: 11-2843763