



January 31, 2025

Abby Thorne-Lyman  
Base Reuse and Economic Development Director  
950 West Mall Square, 2<sup>nd</sup> Floor  
Alameda, CA 94501

Dear Ms. Thorne-Lyman;

As President of the Downtown Alameda Business Association (DABA), it is my pleasure to submit the attached BIA Activity Report, along with a listing of our current Board of Directors and financials.

Since our establishment, Downtown Alameda has pursued a focused mission: to create a dynamic, welcoming, and unique district in Alameda. We remain steadfast in our efforts to serve property owners, businesses, and downtown stakeholders, recognizing that a thriving downtown enhances the prosperity of the entire city and enriches the quality of life across our Island Community.

Our association is dedicated to making Alameda—and particularly its downtown—a vibrant and vital hub that offers diverse shopping, services, dining, entertainment, and cultural experiences. We aim to foster a district where the arts and leisure are celebrated, enjoyed, and appreciated, all while ensuring a safe and inviting environment for residents and visitors to explore our locally owned shops and restaurants.

As we progress, we deeply value the ongoing collaborative partnerships with the City of Alameda and key organizations such as the West Alameda Business Association and the Alameda Chamber & Economic Alliance. These partnerships are essential for maximizing resources, addressing the evolving needs of our local businesses and the broader community, and driving collective success.

In 2025, Downtown Alameda looks forward to introducing new activities while continuing to enhance our signature offerings. The solid reestablishment and expansion of the Art & Wine Faire and the success of the Seasonal Markets are a testament to the community's enthusiastic support for such initiatives. Additionally, we are excited to engage in discussions about the future use of public spaces within the district, as we work together to shape a stronger and more connected community.

Enclosed, you will find a comprehensive overview of our FY 2024/25 activities and accomplishments, our work plan for 2025, as well as our Board-approved budget and required financial records.

Thank you for your ongoing support, collaboration, and commitment to the success of Downtown Alameda.

Sincerely,  
  
Ron Mooney, Board President  
Downtown Alameda Business Association



## Proposed Assessment for Business Improvement Area Fiscal Year 2025/2026

### **INTRODUCTION:**

The Downtown Alameda Business Association is recommending a BIA budget of one hundred ten thousand dollars (\$120,000) in restricted funds for the Downtown Alameda Business Association for fiscal year 2025/2026. This recommendation is based on the actual income derived from the BIA assessment in fiscal 2024/2025.

### **BUDGET:**

The BIA provides one of the funding sources for the entire scope of the activities proposed in this report. We support the customary annual CPI increase and continuation of the current billing timeline. The other source of revenue are funds raised by the Downtown Association special events. With the return of major fundraising events, our budget has been adjusted to reflect the current situation.

### **MEMBERSHIP PROFILE:**

Over 400 merchants comprise the current boundaries of the downtown district including 110 popular restaurants, bars, and casual eateries. The district welcomed 27 new businesses in 2024. The breakdown is as follows:

- 28% Services
- 27% Beauty & Health
- 21% Food & Drink
- 18% Retail
- 6% Other

### **STRATEGIC PLANNING:**

Throughout 2024, we focused on creating and refining the **2025 Strategic Plan** to guide us into the future. Building on the success of our initial five-year plan established in 2020, this roadmap continues to align our vision, values, and priorities, which remain as relevant as ever.

By evaluating past accomplishments and incorporating membership goals, the updated Strategic Plan enables our Board and Committees to set clear priorities, channel energy and resources effectively, and ensure that all stakeholders work together toward shared objectives.

### **COMMITTEE STRUCTURE**

We continued to implement work plans and focus priorities amongst our three (3) committees: Outreach, Clean, Green & Safe, and Marketing. This implementation has enabled us to empower the committees to create more functional work plans that are aligned to the stated priorities that have emerged throughout our strategic planning process as well as deftly respond to new challenges as they emerged.

## **ACTIVITIES**

Events played a vital role in fostering community connections throughout 2024. The Seasonal Markets gained momentum, providing a fresh platform to showcase local vendors and purveyors. With the iconic Alameda Theatre marquee as a backdrop, families came together to enjoy live entertainment, festive sips, and delicious bites. Despite rainy weather at the Spring Market, the enthusiasm of vendors, musicians, and attendees remained undampened.

Summer brought the beloved Downtown Alameda Art & Wine Faire, which celebrated its 37th year with resounding success. The growth and popularity of the *Authentically, Alameda* area, with its local focus, continues to expand in vision and popularity. Alongside this signature event, Downtown Alameda hosted four popular Strolls: Whiskey Stroll, Rock & Roll Beer Stroll, Rum Stroll, and the free, family-friendly Hot Cocoa Stroll, each warmly embraced by the community.

The Winter Market, quickly becoming a cherished tradition, offered a festive kickoff to the holiday season, blending sparkle and fun. As dusk fell, the twinkle of lights created a magical atmosphere for attendees of the Hot Cocoa Stroll, perfectly complementing the City's Holiday Lighting ceremony. This Seasonal Market also helped to kick-start the holiday season, reminding and encouraging visitors to shop and support their local businesses.

These events are made possible through the invaluable support of individual and local volunteer groups. Together with our nonprofit partners, we generated \$6,500 in cash and in-kind donations, benefiting over 20 worthwhile local organizations.

Celebrating the milestone of surpassing 10,000 followers on Instagram, we continue to strengthen our connection with the community. Social media marketing has become a key tool to engage and inform beyond our immediate business network. By actively increasing our presence and interaction, we've created a platform that fosters direct engagement with our neighbors. Through opportunities to share personal stories and insights from local businesses, we deliver content that is informative, uplifting, and engaging. This approach also enhances the visibility of our member businesses by amplifying their messages to our followers, while encouraging reciprocal support that compounds these benefits. This engagement has proven successful and the results speak for themselves: since January 2024, our Instagram followers have grown by 34%, with Facebook showing a 2% increase.

In the spirit of fostering broader partnerships, the City of Alameda embraced the *I am Local* campaign, which we initiated in 2023, on a citywide scale. Collaborating closely with Downtown Alameda and West Alameda, this popular initiative highlights the individual business owners who play a vital role in the community's success. With its positive reception, the campaign will continue through 2025, incorporating exciting new features that blend heritage and cultural celebrations while recognizing the diversity and uniqueness of Alameda. Moving forward, the program will grow to include customers, city staff and vendors who are crucial in supporting Alameda's small businesses, including those in the Stations, Bay Farm and other neighborhood areas.

The evolution of the Commercial Streets and Parklet Program from temporary to permanent remained a top priority. These spaces continue to serve as an essential lifeline for economic recovery, allowing businesses to utilize additional space and expand their footprint during a still critical period. The benefits of parklets extend beyond individual permit holders, offering the entire district a source of economic

vitality, vibrancy, and energy. Collaborating closely with the Economic Development, Public Works and Planning Department teams ahead of the 2024 restriping of Park Street, we provided tailored, one-on-one guidance to permit holders with site-specific needs who wished to remain part of this fundamental program. Additionally, the placement of decorative concrete barricades not only enhanced safety but also improved and elevated the overall aesthetic of the district.

The popular al fresco dining and gathering area on Alameda Avenue is receiving an exciting facelift. A new wooden parklet-like structure is being installed to create more opportunities for activation and community engagement. Plans include hosting live music, mini markets, and launching a pop-up/incubator program designed to help local vendors learn and grow. To further enrich the visitor experience, neighboring businesses are contributing games and activities, making the space even more vibrant and welcoming.

The Park Street restriping project provided an opportunity to work closely with the Transportation team to accommodate a bike lane and adapt to evolving parking needs. The continued two lane configuration continues to slow traffic through the busy commercial corridor providing an added layer of safety to pedestrians and cyclists. Additionally, we identified designated areas for handicap parking and loading zones while addressing the increasing demands of food app pickups, delivery drivers, and quick-trip customers by providing strategically placed short-term, 15-minute spaces. Moving forward, the introduction of advanced meters and kiosks, app-based payment options, and increased enforcement of parking regulations will further enhance the visitor experience in our district.

Another necessary enhancement is filling vacant storefronts. Led by the City of Alameda's Economic Development team, significant progress has been made in addressing vacancies within the business districts. *The Market Study & Vacant Storefront Strategy* initiative began with a thorough analysis of key findings and the development of draft strategies to tackle challenges and concerns. Working closely with business districts, staff identified problematic properties and leveraged data to guide next steps. The program continues to advance, focusing on outreach to understand obstacles and provide resources to property owners. This flexible approach even facilitated a Holiday Pop-up program, enabling several small businesses to occupy a city-owned storefront and gain experience running a brick-and-mortar operation during a bustling season. Paired with the recent establishment of a partnership with the SBDC to provide small business advising and workshops will help Alameda businesses start, learn, grow and thrive. We are buoyed by the potential these initiatives have to change the landscape of the business districts in an ongoing, profound and impactful way.

Guided by the direction of our Board and membership, we have continued to address key advocacy issues vital to our business community. From championing the continuation of the Commercial Streets program to supporting new businesses as they prepare to open, we have tackled complex challenges, including crime, code compliance, homelessness, parking, and graffiti. Collaborating closely with the City and other business groups, we've worked to implement changes that strengthen Alameda's business environment.

These essential partnerships will remain a cornerstone of our efforts as we prepare for the challenges ahead, including the upcoming Oakland-Alameda Access Project. By working together, we can develop effective strategies to identify and mitigate looming negative impacts on our business community, ensuring we are proactive in addressing issues as they emerge.

We are excited to embrace our shared vision and goals for maintaining and expanding a thriving business district. Together, we can shape a stronger, more connected community that supports both our local businesses and the residents they serve.

### **FINANCIAL HEALTH:**

With the unprecedented success of the Art & Wine Faire in the summer of 2024, we enter the new fiscal year with adequate funds to continue rebuilding revenue streams and reserves to meet our policy goals. The resumption and addition of fundraising events has enabled us to continue that crucial rebuilding process. We will continue to closely monitor our budget and will review and adjust quarterly. The Downtown Association continues a regular review of our monthly financial reporting (QuickBooks) by outside accounting management. We also have increased oversight by our Treasurer of banking, financial planning, and financial obligations of the Downtown Association.

### **LEADERSHIP:**

The focus of the Downtown Alameda Business Association looks beyond the support, safety and advocacy for the businesses and their staff who comprise our district. We strive to make Alameda, especially the Downtown, a vibrant community which embraces diverse offerings of services, shopping, entertainment and dining experiences. To foster a district where arts and leisure are promoted, enjoyed and appreciated. We do this while keeping our community safe and eager to explore our locally owned shops and restaurants. Leading this effort is Executive Director, Kathy Weber.

Our Board leadership is demonstrated by significant involvement of all Board members and Officers.

We continue our leadership plan using the positions of President-Elect, President and Past President, as well as Treasurer and Secretary to have an effective Executive Committee which provides continuity while inviting new ideas and approaches. Our Officers hold office on a calendar year basis, making an effective bridge through our fiscal year planning. We have been provided with the strong leadership of Sadiya Kazi-Koya and Jone Stebbins over the past year, and now Ron Mooney leads as our President.

### **CONCLUSION:**

The Downtown Alameda Business Association would like to thank the Alameda City Council, City Manager, Economic Development and Community Services, Alameda Police, Alameda Fire, Public Works, Planning and Finance Departments for their support of the business community. The work that we have accomplished would not have been possible without the dedication of the City of Alameda's leadership and staff. From the activation of the Vacant Storefront Strategy initiative & Market Study, Commercial Streets Program, parklet permitting, public safety and the expansion of *I am Local*, shop & support local campaigns, their focus on the preservation and support of our business community has been clear and unwavering. The joint collaboration with the City and business community illustrates that the BIA is a valuable tool in our continuing efforts to support Downtown Alameda and sustain & grow our Historic District.

In 2024, we refined the 2025 Strategic Plan to build on the success of our initial five-year plan from 2020. This updated roadmap aligns our vision, values, and priorities, incorporating membership goals to guide our Board and Committees in setting clear priorities, optimizing resources, and uniting stakeholders toward shared objectives.

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### **Strengthen Membership**

Provide value in membership by offering business training, workshops and access to resources in areas of interest. Encourage members to fully participate in activities, cross promotion and collaboration by reducing barriers and seeking feedback. Ensure the Association Board is strong and healthy.

### **Enhance Downtown**

Champion initiatives to enhance and improve Physical Amenities and the Business Climate. Create a comprehensive, prioritized plan for improving cleanliness and stewarding resources. Make the arts a prominent feature and highlight year-round decor throughout the district. Implement strategies from the Market Study and Vacant Storefront Strategy to further strengthen and revitalize the business environment.

### **Promote Downtown**

Promote the district in a way that serves our members, the Association, and the citizens of Alameda. Generate awareness of, and excitement about, Downtown Alameda and its businesses. Collaborate with stakeholders to cross promote, amplify and boost respective awareness

### **Anticipate Trends**

Respond to market trends as our customer base, and the nature of commerce itself, shifts and evolves. Share best practices, innovative models, and relevant economic data with membership.

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With this roadmap in place, our Board and Committees are well-positioned to set clear priorities, allocate resources strategically, and ensure all stakeholders align with shared goals. This unified approach fosters collaboration and focus, driving meaningful progress toward a vibrant future for our district.

As we implement our 2025 Strategic Plan, we remain committed to building on past successes, reflecting on lessons learned, celebrating achievements and incorporating the diverse goals of our membership. These milestones will guide our actions and serve as benchmarks for progress, ensuring we create a thriving, dynamic district that meets the evolving needs of our community.

### Strengthen Membership

- Welcomed 27 new Downtown businesses.
- Assisted 15 businesses in successfully applying for continuation in the Parklet Program.
- Promoted the City's Facade Grant Program that resulted in 7 business and property owners submitting applications, with 7 grants awarded.
- Facilitated regular communication with member businesses and gained feedback through a return of Monthly Mixers, Town Halls, email updates, surveys, and personal visits.
- Hosted and promoted conversations with City leadership, APD Chief Joshi & APD Officers to discuss Downtown public safety concerns.
- Worked with City staff, outreach resources, and APD to assist with complex homeless and mental health issues. Provided resources and guidance for accessing services, filing letters of no trespass, encouraged reporting of violations, stressed the importance of pressing charges and writing victim impact statements for the court.
- Hosted presentation with Alameda County Health Department & Alameda County Vector Control.
- Maintained and expanded a web listing of available properties in the downtown district.
- Provided ongoing resources for ADA Compliance.

### Enhance Downtown Amenities

- Continued maintenance and programming of the al fresco dining area on Alameda Avenue.
- Focused on the removal of temporary signage, plywood, and graffiti. Targeted specific buildings and areas for review. Met with tenants, property owners and brokers to inform them of resources available and potential code violations that resulted in remediation of multiple areas.
- Developed an action plan to address areas such as the block north of Park Street & Lincoln Avenue. Worked with new tenants who invested in exterior improvements; Made facade grant funding conditional on the removal of plywood as appropriate.
- Worked with the City to establish a system of reporting maintenance needs, monitoring cleaning and requesting contract management & oversight. Working to establish an ongoing schedule of power washing sidewalks in the entire district utilizing L&L funds.
- Initiated a program to repaint streetlamp poles throughout the district.
- Identified and added two additional locations for 3-stream containers and refreshed the graphics on all 3-stream stations.
- Installed a total of thirty-one new lighted decorations for Holiday 2024. Created two designs and ordered new flags for display from January-May and July-October 2024. Expanded the installation area for holiday flags to include all of Park Street, plus Central Avenue & Santa Clara Avenue.
- Established a service provider to offer on-demand bio-hazard cleaning services for private property owners.

### Promote Downtown

- Celebrated passing 10K Instagram followers with a promotional campaign. Increased Instagram followers by 34% and Facebook by 3% since January of 2024
- Expanded email communications to promote downtown businesses and activities and increased subscribers by 56% in 2024.
- Developed relationships and collaborated with local and regional influencers to promote and attend events.
- Increased exposure and amplified messaging for downtown businesses on social media by reposting when they use #downtownalameda and @downtownalameda.
- Collaborated with the City to promote retail and restaurant promotions including Alameda Restaurant Week, and the expansion of the successful *I am Local* campaign.
- Partnership and support of local non profit organizations totaled \$6,500. Increased opportunities has created a robust list of volunteers composed of individuals, businesses and organizations. The volunteer program has enabled us to continue to engage returning volunteers and encouraged recruitment of friends/associates to expand our roster.
- The 37th Art & Wine Faire was eagerly attended. The event also included an expanded *Authentically, Alameda* area focused on local vendors, purveyors and entertainment.
- The Seasonal Market events, Spring & Winter, hosted in a smaller footprint for a street closure event, have been well received and showcase seasonal sips, local vendors, purveyors and entertainment with the historic Alameda Theatre marquee as the inviting backdrop.
- Hosted Four Alameda Strolls: Whiskey Stroll, Rock & Roll Beer Stroll, Rum Stroll, Hot Cocoa Stroll.
- Downtown Alameda continued as one of the lead organizers involved in the planning and production of the expanded 3rd Annual *Pride In The Park* events at Chochenyo Park. The *Pride Block Party* at Alameda Avenue is a welcoming, family-friendly and enjoyable component of the weekend-long slate of activities in the district.

### Staff & Board Involvement

- Board members continue to provide valuable input for City-led programs such as the Commercial Streets Program and Economic Development projects.
- Board involvement includes assistance and support during District events.
- Staff actively participates in monthly I Am Local meetings, CARES Team meetings, Business District Homeless Outreach meetings, EGA meetings, and OAAP meetings to stay engaged and address key community and business district priorities.
- Staff and Board continue to collaborate and have regular communications with City staff and local business organizations including: West Alameda Business Association, Alameda Chamber & Economic Alliance and CASA.



As our staff and the Board leadership continue to implement the Strategic Plan outlined above, our Work Plan identifies and creates a clear path to prioritize those goals and objectives. In addition to the committee objectives listed below, Downtown Alameda will continue to work closely with the West Alameda Business Association to identify and address issues of importance to our stakeholders and our small business community.

### **OUTREACH COMMITTEE:**

Develops and maintains relationships with stakeholders and important entities including local businesses, property owners, City staff, and various government agencies.

### **2025/2026 Objectives:**

1. Address vacancies. Work with the City on marketing business opportunities. Improve aesthetics of vacant storefronts.
  - a. Identify types of businesses that would be desired. Work with the City to implement the Vacant Storefront Strategy initiative & Market Study. Support brokers to recruit prospects and continue to market Properties Available on the website.
  - b. Consider window clings/displays: Help address concerns with: insurance issues, access. Partner with community organizations.
  - c. Work with City Staff on adjusting the uses allowed in the Zoning Ordinance for the District.
2. Focus on the prevention and removal of graffiti.
  - a. Educate businesses & property owners on mitigation strategies.
  - b. Work with City officials to continue code compliance/enforcement and look for opportunities to streamline the process to report, inform and comply.
3. Support continuation and expansion of the Facade Grant program.
4. Work with City Staff, Outreach resources, and APD to assist with the unhoused, and those experiencing mental health emergencies.
  - a. Provide resources to business and property owners to address concerns on public & private property.
5. Invite active engagement with District members and stakeholders. Interview and survey business owners to determine their needs as well as evaluate their input in the direction/continuation of Monthly Mixers.
6. Work on keeping the Alameda Avenue area viable for everyone.
  - a. Complete construction of the parklet-like structure to replace tenting.
  - b. Continue activation of Alameda Avenue, improve amenities and expand activities to include vendor opportunities, initiate a pop-up incubator program and regularly scheduled entertainment.

### **CLEAN, GREEN & SAFE COMMITTEE:**

Plans and executes key programs that are vital to the Downtown Association including managing the L&L Assessment and operational functions for street maintenance, event execution, and volunteers.

### **2025/2026 Objectives:**

1. Support fundraising opportunities for the Association.
2. Work with the Marketing Committee to continue the expansion and installation of the Holiday Decor & Lighting Program.
3. Establish a Banner and Flag program to install custom banners and flags and replace brackets & poles as needed.
4. Continue & expand the light pole repainting project in the district.
5. Expand the use and activation of Alameda Avenue.
  - a. Complete construction of the parklet-like structure to replace tenting.
  - b. Continue activation of Alameda Avenue, improve amenities and expand activities to include vendor opportunities, initiate a pop-up incubator program and regularly scheduled entertainment.
6. Strengthen a volunteer program to support downtown activities and member involvement.
7. Continue activation of Alameda Avenue, improve amenities and begin activities to include vendor opportunities, initiate a pop-up incubator program and regularly scheduled entertainment.
  - a. Complete construction of the parklet-like structure to replace tenting. Include storage for maintenance supplies and space for trash, recycling and green bins.
8. Continue advocacy for long-term opportunities for the Commercial Streets and the Parklet Program.
9. Work with the City to install wayfinding and directional parking signage.
10. Continue ongoing systems for monitoring cleaning and reporting needs.

### **MARKETING COMMITTEE:**

Develops the Downtown Association's long-term marketing plan, creating a consistent brand and key messaging strategy to bring visitors to the downtown; plans and implements public events.

### **2025/2026 Objectives:**

1. Continue to refine annual events: Art & Wine Faire, Seasonal Markets (Spring & Winter) and Strolls (Whiskey, Beer, Rum and Hot Cocoa).
2. Create revenue-generating activation on Alameda Avenue. Improve amenities and expand activities to include vendor opportunities, initiate a pop-up incubator program and regularly scheduled entertainment.
3. Collaborate with the City on planning and promoting *Alameda Restaurant Week*, *I am Local* and campaigns that support and bring focus to local businesses year round.
4. Continue promotion of the district and its businesses through consistent social media messaging and relevant advertising & promotional opportunities.
5. Work with businesses to collaborate in ways that are beneficial and include their plans in upcoming district events and promotions.
6. Work with the Clean, Green & Safe Committee to continue the expansion and installation of the Holiday Decor & Lighting Program.
7. Strengthen communication to the public to generate excitement about Downtown Alameda.
8. Enhance communication to the membership via email, online opportunities, Monthly Mixers and personal visits.
9. Work with select nonprofit organizations to support local organizations and engage the community.



## Officers

**President** - Ron Mooney, [Daisy's](#)

**President-Elect** - Tony Yu [Pampered Pup](#)

**Past President** - Sadiya Kazi-Koya, [Swings and Wings](#)

**Treasurer** - Steve Busse, [Park Centre Animal Hospital](#)

**Secretary** - Sabrina Cazarez, [Twirl](#)

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## Directors At Large

William Allen, [Fowl & Fare](#)

Naomi Berghoef, [Mommy's Trading Post](#)

Aaron Kraw, [Park Social](#)

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## Committee Chairs

**Marketing** - Shannon Marsden, [Julie's Coffee & Tea Garden](#)

**Outreach** -

**Clean, Green & Safe** -

## 2025-2026 DABA Budget

BUDGET Item	BoardApproved 1/30/2025
<b>INCOME:</b>	<b>2025-2026</b>
<b><u>Unrestricted</u></b>	
Misc. Income <small>(Assoc Members, P Lot, other misc)</small>	\$8,000
<b>Stroll Events (3 events) {Net!}</b>	\$60,000
<b>Seasonal Markets / Alameda Avenue {Net!}</b>	\$15,000
<b>Art &amp; Wine Faire {Net!}</b>	\$120,000
<i>Use of loan / reserve (Not Income~!)</i>	
<b>Unrestricted Funds Sub Total</b>	<b>\$203,000</b>
<b><u>Restricted</u></b>	
BIA Payments	\$120,000
Alameda Avenue (City of Alameda)	\$0
<b>Restricted Income Sub Total</b>	<b>\$120,000</b>
<b>Funds to Use Grand Total</b>	<b>\$323,000</b>
<b>EXPENSES:</b>	
<b><u>Unrestricted</u></b>	
Executive Director Salary <small>(Combine w/ Memb Coord.)</small>	90,000
Employer Taxes & WC	10,800
Meetings/Trainings <small>(Outreach / Marketing)</small>	2,000
Outside Services & Office Exp	2,000
Conferences	0
Alameda Avenue Operations	25,000
Event / Marketing Coordinators Wages <small>(includes tax, wc w/ Member Serv 2/3 Total)</small>	65,500
Advisory Committee Program	0
Debt Payment (SBA loan) {QB= Interest & Finance Charges}	\$7,700
Transfer to Restricted Programs (initiatives & support)	
<b>Sub Total</b>	<b>\$203,000</b>
<b><u>Restricted (BIA paid)</u></b>	
Utilities	\$2,400
Member Meetings & Awards <small>(Membership Program)</small>	\$0
Exec Dir. wages <small>(Membership allocation)</small>	\$30,000
Employer Taxes & Workers Comp <small>(Restricted)</small>	\$3,600
Alameda Avenue - Restricted programming	\$0
Marketing Program. <small>(Promotion)</small>	\$10,000
<b>Accounting / Tax Prep</b>	<b>\$8,000</b>
Postage/Printing	\$1,000
Supplies	\$500
Marketing Consultant/Internet Media	\$20,000
Liability/D&O Insurance	\$4,000
Office Rent	\$31,200
Other Office Costs	\$600
Outreach Committee	\$1,000
Website - Maint. & Email & online programs	\$2,500
Board Authorized Reserve <small>(~ 5%)</small>	\$5,200
<b>Sub Total *</b>	<b>120,000</b>
<b>Expenses Grand Totals</b>	<b>323,000</b>
<b>Total Income less Total Expense</b>	<b>\$ -</b>



## Forms 990 / 990-EZ Return Summary

For calendar year 2023, or tax year beginning **07/01/23** , and ending **06/30/24**

**PARK STREET BUSINESS ASSOCIATION, INC.**      **\*\*--\*\*\*7526**

**Net Asset / Fund Balance at Beginning of Year** -90,784

**Revenue**

Contributions	<u>140,965</u>		
Program service revenue	<u>312,706</u>		
Investment income			
Capital gain / loss			
Fundraising / Gaming:			
Gross revenue			
Direct expenses			
Net income			
Other income	<u>0</u>		
<b>Total revenue</b>		<u><u>453,671</u></u>	

**Expenses**

Program services	<u>281,020</u>		
Management and general	<u>144,631</u>		
Fundraising			
<b>Total expenses</b>		<u><u>425,651</u></u>	
<b>Excess / (deficit)</b>			<u><u>28,020</u></u>

Changes

**Net Asset / Fund Balance at End of Year** -62,764

**Reconciliation of Revenue**

Total revenue per financial statements	_____
Less:	
Unrealized gains	_____
Donated services	_____
Recoveries	_____
Other	_____
Plus:	
Investment expenses	_____
Other	_____
<b>Total revenue per return</b>	<u><u>453,671</u></u>

**Reconciliation of Expenses**

Total expenses per financial statements	_____
Less:	
Donated services	_____
Prior year adjustments	_____
Losses	_____
Other	_____
Plus:	
Investment expenses	_____
Other	_____
<b>Total expenses per return</b>	<u><u>425,651</u></u>

**Balance Sheet**

	Beginning	Ending	Differences
Assets	<u>137,527</u>	<u>126,340</u>	
Liabilities	<u>228,311</u>	<u>189,104</u>	
Net assets	<u><u>-90,784</u></u>	<u><u>-62,764</u></u>	<u><u>28,020</u></u>

**Miscellaneous Information**

Amended return \_\_\_\_\_  
 Return / extended due date 05/15/25  
 Failure to file penalty \_\_\_\_\_

Form **8879-TE**

**IRS E-file Signature Authorization  
for a Tax Exempt Entity**

OMB No. 1545-0047

For calendar year 2023, or fiscal year beginning 7/01, 2023, and ending 6/30, 20 24

**2023**

Department of the Treasury  
Internal Revenue Service

**Do not send to the IRS. Keep for your records.**  
Go to [www.irs.gov/Form8879TE](http://www.irs.gov/Form8879TE) for the latest information.

Name of filer

**PARK STREET BUSINESS ASSOCIATION,  
INC.**

EIN or SSN

**\*\*-\*\*\*7526**

Name and title of officer or person subject to tax **RON MOONEY  
PRESIDENT ELECT**

**Part I Type of Return and Return Information**

Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than one line in Part I.

1a Form 990 check here	<input checked="" type="checkbox"/>	b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b	<u>453, 671</u>
2a Form 990-EZ check here	<input type="checkbox"/>	b Total revenue, if any (Form 990-EZ, line 9)	2b	
3a Form 1120-POL check here	<input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3b	
4a Form 990-PF check here	<input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part V, line 5)	4b	
5a Form 8868 check here	<input type="checkbox"/>	b Balance due (Form 8868, line 3c)	5b	
6a Form 990-T check here	<input type="checkbox"/>	b Total tax (Form 990-T, Part III, line 4)	6b	
7a Form 4720 check here	<input type="checkbox"/>	b Total tax (Form 4720, Part III, line 1)	7b	
8a Form 5227 check here	<input type="checkbox"/>	b FMV of assets at end of tax year (Form 5227, Item D)	8b	
9a Form 5330 check here	<input type="checkbox"/>	b Tax due (Form 5330, Part II, line 19)	9b	
10a Form 8038-CP check here	<input type="checkbox"/>	b Amount of credit payment requested (Form 8038-CP, Part III, line 22)	10b	

**Part II Declaration and Signature Authorization of Officer or Person Subject to Tax**

Under penalties of perjury, I declare that  I am an officer of the above entity or  I am a person subject to tax with respect to (name of entity) \_\_\_\_\_, (EIN) \_\_\_\_\_ and that I have examined a copy of the 2023 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal.

**PIN: check one box only**

I authorize RYAN VAN VALER to enter my PIN [REDACTED] as my signature  
ERO firm name Enter five numbers, but do not enter all zeros

on the tax year 2023 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2023 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Signature of officer or person subject to tax \_\_\_\_\_ Date 01/24/25

**Part III Certification and Authentication**

**ERO's EFIN/PIN.** Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

**\*\*\*\*\***  
Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2023 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163**, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature RYAN VAN VALER Date 01/24/25

**ERO Must Retain This Form — See Instructions  
Do Not Submit This Form to the IRS Unless Requested To Do So**



Form **990**

# Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

**2023**

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

**Open to Public Inspection**

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

**A For the 2023 calendar year, or tax year beginning 07/01/23, and ending 06/30/24**

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization <b>PARK STREET BUSINESS ASSOCIATION, INC.</b>		<b>D</b> Employer identification number <b>**-***7526</b>
	Doing business as <b>DOWNTOWN ALAMEDA BUSINESS ASSN.</b>		<b>E</b> Telephone number <b>510-523-1392</b>
	Number and street (or P.O. box if mail is not delivered to street address) <b>2447 SANTA CLARA AVE STE 302</b>		<b>G</b> Gross receipts \$ <b>453,671</b>
	City or town, state or province, country, and ZIP or foreign postal code <b>ALAMEDA CA 94501</b>		<b>H(a)</b> Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions
<b>F</b> Name and address of principal officer: <b>SADIYA KAZI-KOYA</b>			<b>H(c)</b> Group exemption number

<b>I</b> Tax-exempt status: <input type="checkbox"/> 501(c)(3) <input checked="" type="checkbox"/> 501(c) ( <b>6</b> ) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527	<b>J</b> Website: <b>HTTP://DOWNTOWNALAMEDA.COM/</b>	<b>L</b> Year of formation: <b>1990</b>	<b>M</b> State of legal domicile: <b>CA</b>
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other			

## Part I Summary

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities: <b>SEE SCHEDULE O</b>			
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.			
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)		<b>3</b>	<b>11</b>
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)		<b>4</b>	<b>11</b>
	<b>5</b> Total number of individuals employed in calendar year 2023 (Part V, line 2a)		<b>5</b>	<b>2</b>
	<b>6</b> Total number of volunteers (estimate if necessary)		<b>6</b>	<b>0</b>
	<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12		<b>7a</b>	<b>0</b>
<b>b</b> Net unrelated business taxable income from Form 990-T, Part I, line 11		<b>7b</b>	<b>0</b>	
<b>Revenue</b>			Prior Year	Current Year
	<b>8</b> Contributions and grants (Part VIII, line 1h)		<b>101,101</b>	<b>140,965</b>
	<b>9</b> Program service revenue (Part VIII, line 2g)		<b>101,009</b>	<b>312,706</b>
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)			<b>0</b>
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			<b>0</b>
<b>12</b> Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)		<b>202,110</b>	<b>453,671</b>	
<b>Expenses</b>	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1–3)			<b>0</b>
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)			<b>0</b>
	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)		<b>161,506</b>	<b>181,487</b>
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)			<b>0</b>
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25)		<b>0</b>	
	<b>17</b> Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)		<b>135,979</b>	<b>244,164</b>
	<b>18</b> Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)		<b>297,485</b>	<b>425,651</b>
<b>19</b> Revenue less expenses. Subtract line 18 from line 12		<b>-95,375</b>	<b>28,020</b>	
<b>Net Assets or Fund Balances</b>			Beginning of Current Year	End of Year
	<b>20</b> Total assets (Part X, line 16)		<b>137,527</b>	<b>126,340</b>
	<b>21</b> Total liabilities (Part X, line 26)		<b>228,311</b>	<b>189,104</b>
<b>22</b> Net assets or fund balances. Subtract line 21 from line 20			<b>-90,784</b>	<b>-62,764</b>

## Part II Signature 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.

<b>Sign Here</b>	Signature of officer		Date	
	<b>RON MOONEY</b> Type or print name and title		<b>PRESIDENT ELECT</b>	
<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's signature	Date	Check <input checked="" type="checkbox"/> if self-employed PTIN
	<b>RYAN VAN VALER</b>	<b>RYAN VAN VALER</b>	<b>01/30/25</b>	<b>*****</b>
	Firm's name	Firm's EIN		
<b>RYAN VAN VALER, E.A.</b>		<b>**--***0181</b>		
Firm's address		Phone no.		
<b>2447 SANTA CLARA AVE STE 300 A ALAMEDA, CA 94501-4579</b>		<b>510-521-0252</b>		

May the IRS discuss this return with the preparer shown above? See instructions  Yes  No

For Paperwork Reduction Act Notice, see the separate instructions.

**Part III Statement of Program Service Accomplishments**

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

**1** Briefly describe the organization's mission:

**SEE SCHEDULE O**

**2** Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?  Yes  No

If "Yes," describe these new services on Schedule O.

**3** Did the organization cease conducting, or make significant changes in how it conducts, any program services?  Yes  No

If "Yes," describe these changes on Schedule O.

**4** Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

**4a** (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

**THE PARK STREET BUSINESS ASSOCIATION (DBA DOWNTOWN ALAMEDA BUSINESS ASSOCIATION) IS HARD AT WORK YEAR ROUND WITH NEARLY 500 BUSINESSES IN MIND. FIRST FORMED IN 1981, WE SERVE AS A SUPPORT NETWORK AND ADVOCATE FOR BUSINESSES OPERATING IN OUR HISTORIC BUSINESS IMPROVEMENT AREA. THE DOWNTOWN ASSOCIATION PROMOTES A HEALTHY RETAIL/SERVICE CLIMATE AS WELL AS A DISTRICT THAT IS FAMILY-FRIENDLY, CLEAN, GREEN, AND SAFE. THE WELFARE OF THE ASSOCIATION AND ITS MEMBERS IS ACTIVELY PURSUED BY STAFF, OUR BOARD OF DIRECTORS, CITY OFFICIALS, AND CIVIC-MINDED VOLUNTEERS.**

**4b** (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

**N/A**

**4c** (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

**N/A**

**4d** Other program services (Describe on Schedule O.)

(Expenses \$ including grants of \$ ) (Revenue \$ )

**4e** Total program service expenses

**Part IV Checklist of Required Schedules**

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A		<b>X</b>
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions		<b>X</b>
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		<b>X</b>
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	<b>X</b>	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I		<b>X</b>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		<b>X</b>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		<b>X</b>
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV		<b>X</b>
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? If "Yes," complete Schedule D, Part V		<b>X</b>
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	<b>X</b>	
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII		<b>X</b>
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? If "Yes," complete Schedule D, Part VIII		<b>X</b>
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX		<b>X</b>
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	<b>X</b>	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X		<b>X</b>
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII		<b>X</b>
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		<b>X</b>
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		<b>X</b>
14a	Did the organization maintain an office, employees, or agents outside of the United States?		<b>X</b>
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV		<b>X</b>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV		<b>X</b>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV		<b>X</b>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions		<b>X</b>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II		<b>X</b>
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		<b>X</b>
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		<b>X</b>
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II		<b>X</b>

**Part IV Checklist of Required Schedules** *(continued)*

		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>		X
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>		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a	<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>		
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>		
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		X
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions).		
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>		X
b	A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>		X
c	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>		X
29	Did the organization receive more than \$25,000 in noncash contributions? <i>If "Yes," complete Schedule M</i>		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
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>		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? <b>Note:</b> All Form 990 filers are required to complete Schedule O.	X	

**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		
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		

1a	6
1b	0

<b>Part V Statements Regarding Other IRS Filings and Tax Compliance</b> (continued)		Yes	No		
<b>2a</b>	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	<b>2a</b>	<b>2</b>		
<b>b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	<b>2b</b>		<b>X</b>	
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year?	<b>3a</b>			<b>X</b>
<b>b</b>	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	<b>3b</b>			
<b>4a</b>	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	<b>4a</b>			<b>X</b>
<b>b</b>	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).				
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<b>5a</b>			<b>X</b>
<b>b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	<b>5b</b>			<b>X</b>
<b>c</b>	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	<b>5c</b>			
<b>6a</b>	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?	<b>6a</b>			<b>X</b>
<b>b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	<b>6b</b>			
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>				
<b>a</b>	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	<b>7a</b>			
<b>b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided?	<b>7b</b>			
<b>c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	<b>7c</b>			
<b>d</b>	If "Yes," indicate the number of Forms 8282 filed during the year	<b>7d</b>			
<b>e</b>	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<b>7e</b>			
<b>f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	<b>7f</b>			
<b>g</b>	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	<b>7g</b>			
<b>h</b>	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	<b>7h</b>			
<b>8</b>	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	<b>8</b>			
<b>9</b>	<b>Sponsoring organizations maintaining donor advised funds.</b>				
<b>a</b>	Did the sponsoring organization make any taxable distributions under section 4966?	<b>9a</b>			
<b>b</b>	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	<b>9b</b>			
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter:				
<b>a</b>	Initiation fees and capital contributions included on Part VIII, line 12	<b>10a</b>			
<b>b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	<b>10b</b>			
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter:				
<b>a</b>	Gross income from members or shareholders	<b>11a</b>			
<b>b</b>	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	<b>11b</b>			
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?	<b>12a</b>			
<b>b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	<b>12b</b>			
<b>13</b>	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>				
<b>a</b>	Is the organization licensed to issue qualified health plans in more than one state? <b>Note:</b> See the instructions for additional information the organization must report on Schedule O.	<b>13a</b>			
<b>b</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	<b>13b</b>			
<b>c</b>	Enter the amount of reserves on hand	<b>13c</b>			
<b>14a</b>	Did the organization receive any payments for indoor tanning services during the tax year?	<b>14a</b>			<b>X</b>
<b>b</b>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	<b>14b</b>			
<b>15</b>	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.	<b>15</b>			<b>X</b>
<b>16</b>	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	<b>16</b>			<b>X</b>
<b>17</b>	<b>Section 501(c)(21) organizations.</b> Did the trust, any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069.	<b>17</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 on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI

**Section A. Governing Body and Management**

		Yes	No
<b>1a</b>	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.	<b>11</b>	
<b>1b</b>	Enter the number of voting members included on line 1a, above, who are independent	<b>11</b>	
<b>2</b>	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		<b>X</b>
<b>3</b>	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		<b>X</b>
<b>4</b>	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		<b>X</b>
<b>5</b>	Did the organization become aware during the year of a significant diversion of the organization's assets?		<b>X</b>
<b>6</b>	Did the organization have members or stockholders?		<b>X</b>
<b>7a</b>	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?		<b>X</b>
<b>7b</b>	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		<b>X</b>
<b>8</b>	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
<b>8a</b>	The governing body?	<b>X</b>	
<b>8b</b>	Each committee with authority to act on behalf of the governing body?	<b>X</b>	
<b>9</b>	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O		<b>X</b>

**Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
<b>10a</b>	Did the organization have local chapters, branches, or affiliates?		<b>X</b>
<b>10b</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?		
<b>11a</b>	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?		<b>X</b>
<b>11b</b>	Describe on Schedule O the process, if any, used by the organization to review this Form 990.		
<b>12a</b>	Did the organization have a written conflict of interest policy? If "No," go to line 13		<b>X</b>
<b>12b</b>	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?		
<b>12c</b>	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done		
<b>13</b>	Did the organization have a written whistleblower policy?		<b>X</b>
<b>14</b>	Did the organization have a written document retention and destruction policy?	<b>X</b>	
<b>15</b>	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
<b>15a</b>	The organization's CEO, Executive Director, or top management official		<b>X</b>
<b>15b</b>	Other officers or key employees of the organization		<b>X</b>
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.		
<b>16a</b>	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		<b>X</b>
<b>16b</b>	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

**Section C. Disclosure**

- 17** List the states with which a copy of this Form 990 is required to be filed **CA**
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  
 Own website  Another's website  Upon request  Other (explain on Schedule O)
- 19** Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records.

**KATHY WEBER** **2447 SANTA CLARA AVE. STE 302** **510-523-1392**  
**ALAMEDA** **CA 94501**

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) <b>RON MOONEY</b> ..... <b>PRESIDENT ELECT</b>	5.00 ..... 0.00	X		X				0	0	0
(2) <b>SADIYA KAZI-KOYA</b> ..... <b>PRESIDENT</b>	3.00 ..... 0.00	X						0	0	0
(3) <b>SABRINA CAZAREZ</b> ..... <b>SECRETARY</b>	1.00 ..... 0.00	X		X				0	0	0
(4) <b>STEVE BUSSE</b> ..... <b>COMMITTEE CHAIR</b>	1.00 ..... 0.00	X						0	0	0
(5) <b>NAOMI BERGHOEF</b> ..... <b>DIRECTOR</b>	1.00 ..... 0.00	X						0	0	0
(6) <b>CASEY HUNT</b> ..... <b>DIRECTOR</b>	0.00 ..... 0.00	X						0	0	0
(7) <b>TONY YU</b> ..... <b>DIRECTOR</b>	1.00 ..... 0.00	X						0	0	0
(8) <b>MIKE YAKURA</b> ..... <b>DIRECTOR</b>	1.00 ..... 0.00	X						0	0	0
(9) <b>KATHY WEBER</b> ..... <b>EXECUTIVE DIRECTOR</b>	40.00 ..... 0.00	X						93,830	0	0
(10)										
(11)										

**Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees** *(continued)*

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(12) .....										
(13) .....										
(14) .....										
(15) .....										
(16) .....										
(17) .....										
(18) .....										
(19) .....										
<b>1b Subtotal</b> .....							<b>93,830</b>			
<b>c Total from continuation sheets to Part VII, Section A</b> .....										
<b>d Total (add lines 1b and 1c)</b> .....							<b>93,830</b>			

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

	Yes	No
<b>3</b> Did the organization list any <b>former</b> officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i> .....		<b>X</b>
<b>4</b> For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i> .....		<b>X</b>
<b>5</b> Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i> .....		<b>X</b>

**Section B. Independent Contractors**

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

(A) Name and business address	(B) Description of services	(C) Compensation

**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**



**Part VIII Statement of Revenue**

Check if Schedule O contains a response 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	
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1a</b> Federated campaigns	<b>1a</b>						
	<b>b</b> Membership dues	<b>1b</b>	120,965					
	<b>c</b> Fundraising events	<b>1c</b>						
	<b>d</b> Related organizations	<b>1d</b>						
	<b>e</b> Government grants (contributions)	<b>1e</b>	20,000					
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b>						
	<b>g</b> Noncash contributions included in lines 1a-1f	<b>1g</b>	\$					
	<b>h Total.</b> Add lines 1a-1f			140,965				
	<b>Program Service Revenue</b>	<b>2a</b> ART & WINE FAIRE	Business Code		206,069	206,069		
<b>b</b> STROLL EVENTS				71,681	71,681			
<b>c</b> SEASONAL MARKETS				26,819	26,819			
<b>d</b> MISC.				3,987	3,987			
<b>e</b> MUNI LOT				3,000	3,000			
<b>f</b> All other program service revenue				1,150	1,150			
<b>g Total.</b> Add lines 2a-2f				312,706				
<b>Other Revenue</b>		<b>3</b> Investment income (including dividends, interest, and other similar amounts)						
	<b>4</b> Income from investment of tax-exempt bond proceeds							
	<b>5</b> Royalties							
	<b>6a</b> Gross rents	<b>6a</b>	(i) Real	(ii) Personal				
			<b>b</b> Less: rental expenses	<b>6b</b>				
			<b>c</b> Rental inc. or (loss)	<b>6c</b>				
	<b>d</b> Net rental income or (loss)							
	<b>7a</b> Gross amount from sales of assets other than inventory	<b>7a</b>	(i) Securities	(ii) Other				
			<b>b</b> Less: cost or other basis and sales exps.	<b>7b</b>				
			<b>c</b> Gain or (loss)	<b>7c</b>				
	<b>d</b> Net gain or (loss)							
	<b>8a</b> Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	<b>8a</b>						
			<b>b</b> Less: direct expenses	<b>8b</b>				
			<b>c</b> Net income or (loss) from fundraising events					
<b>9a</b> Gross income from gaming activities. See Part IV, line 19	<b>9a</b>							
		<b>b</b> Less: direct expenses	<b>9b</b>					
		<b>c</b> Net income or (loss) from gaming activities						
<b>10a</b> Gross sales of inventory, less returns and allowances	<b>10a</b>							
		<b>b</b> Less: cost of goods sold	<b>10b</b>					
		<b>c</b> Net income or (loss) from sales of inventory						
<b>Miscellaneous Revenue</b>	<b>11a</b>	Business Code						
	<b>b</b>							
	<b>c</b>							
	<b>d</b> All other revenue							
	<b>e Total.</b> Add lines 11a-11d							
<b>12 Total revenue.</b> See instructions				453,671	312,706	0	0	

**Part IX Statement of Functional Expenses**

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22				
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
<b>4</b> Benefits paid to or for members				
<b>5</b> Compensation of current officers, directors, trustees, and key employees				
<b>6</b> Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
<b>7</b> Other salaries and wages	<b>167,347</b>	<b>94,261</b>	<b>73,086</b>	
<b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
<b>9</b> Other employee benefits				
<b>10</b> Payroll taxes	<b>14,140</b>		<b>14,140</b>	
<b>11</b> Fees for services (nonemployees):				
<b>a</b> Management				
<b>b</b> Legal				
<b>c</b> Accounting	<b>7,744</b>		<b>7,744</b>	
<b>d</b> Lobbying				
<b>e</b> Professional fundraising services. See Part IV, line 17				
<b>f</b> Investment management fees				
<b>g</b> Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	<b>24,420</b>	<b>24,420</b>		
<b>12</b> Advertising and promotion	<b>18,069</b>	<b>18,069</b>		
<b>13</b> Office expenses	<b>3,715</b>		<b>3,715</b>	
<b>14</b> Information technology				
<b>15</b> Royalties				
<b>16</b> Occupancy	<b>31,871</b>		<b>31,871</b>	
<b>17</b> Travel				
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials				
<b>19</b> Conferences, conventions, and meetings	<b>2,407</b>		<b>2,407</b>	
<b>20</b> Interest	<b>4,039</b>		<b>4,039</b>	
<b>21</b> Payments to affiliates				
<b>22</b> Depreciation, depletion, and amortization				
<b>23</b> Insurance	<b>7,254</b>	<b>2,838</b>	<b>4,416</b>	
<b>24</b> Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
<b>a</b> <b>ALAMEDA AVENUE</b>	<b>21,912</b>	<b>21,912</b>		
<b>b</b> <b>SUPPLY &amp; EQUIPMENT RENTAL</b>	<b>16,710</b>	<b>16,710</b>		
<b>c</b> <b>WINE</b>	<b>16,110</b>	<b>16,110</b>		
<b>d</b> <b>OTHER</b>	<b>14,768</b>	<b>14,768</b>		
<b>e</b> All other expenses	<b>75,145</b>	<b>71,932</b>	<b>3,213</b>	
<b>25</b> Total functional expenses. Add lines 1 through 24e	<b>425,651</b>	<b>281,020</b>	<b>144,631</b>	<b>0</b>
<b>26</b> 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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

**Part X Balance Sheet**

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

		(A) Beginning of year		(B) End of year	
<b>Assets</b>	1	Cash—non-interest-bearing	116,930	1	96,927
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	1,380	4	20,750
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	17,067	9	6,738
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 26,262		
	b	Less: accumulated depreciation	10b 26,262	10c	
	11	Investments—publicly traded securities		11	
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	2,150	15	1,925
16	<b>Total assets.</b> Add lines 1 through 15 (must equal line 33)	137,527	16	126,340	
<b>Liabilities</b>	17	Accounts payable and accrued expenses	4,393	17	4,434
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	223,918	25	184,670
	26	<b>Total liabilities.</b> Add lines 17 through 25	228,311	26	189,104
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.</b>				
	27	Net assets without donor restrictions	-90,784	27	-44,719
	28	Net assets with donor restrictions		28	-18,045
	<b>Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.</b>				
	29	Capital stock or trust principal, or current funds		29	
	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
	31	Retained earnings, endowment, accumulated income, or other funds		31	
	32	<b>Total net assets or fund balances</b>	-90,784	32	-62,764
33	<b>Total liabilities and net assets/fund balances</b>	137,527	33	126,340	

**Part XI Reconciliation of Net Assets**

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

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	<b>453,671</b>
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	<b>425,651</b>
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	<b>28,020</b>
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	<b>4</b>	<b>-90,784</b>
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	
<b>6</b>	Donated services and use of facilities	<b>6</b>	
<b>7</b>	Investment expenses	<b>7</b>	
<b>8</b>	Prior period adjustments	<b>8</b>	
<b>9</b>	Other changes in net assets or fund balances (explain on Schedule O)	<b>9</b>	
<b>10</b>	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	<b>10</b>	<b>-62,764</b>

**Part XII Financial Statements and Reporting**

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

		Yes	No
<b>1</b>	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
<b>2a</b>	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both. <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		<b>X</b>
<b>2b</b>	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both. <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		<b>X</b>
<b>2c</b>	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.		
<b>3a</b>	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		
<b>3b</b>	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		

**SCHEDULE C  
(Form 990)**

**Political Campaign and Lobbying Activities**

OMB No. 1545-0047

**2023**

**Open to Public  
Inspection**

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

**Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.**

**Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**

Department of the Treasury  
Internal Revenue Service

**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 **PARK STREET BUSINESS ASSOCIATION,  
INC.**

Employer identification number  
**\*\*-\*\*\*7526**

**Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.**

**1** Provide a description of the organization's direct and indirect political campaign activities in Part IV. See instructions for definition of "political campaign activities."

**2** Political campaign activity expenditures. See instructions ..... \$ .....

**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 4955 ..... \$ .....

**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 501(c)(3).**

**1** Enter the amount directly expended by the filing organization for section 527 exempt function activities ..... \$ .....

**2** Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ..... \$ .....

**3** Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, 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 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.

(a) Name	(b) Address	(c) EIN	(d) 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) 2023

**Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**

- A** Check  if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B** Check  if the filing organization checked box A and "limited control" provisions apply.

**Limits on Lobbying Expenditures**

**(The term "expenditures" means amounts paid or incurred.)**

	(a) Filing organization's totals	(b) Affiliated group totals												
<b>1a</b> Total lobbying expenditures to influence public opinion (grassroots lobbying) .....														
<b>b</b> Total lobbying expenditures to influence a legislative body (direct lobbying) .....														
<b>c</b> Total lobbying expenditures (add lines 1a and 1b) .....														
<b>d</b> Other exempt purpose expenditures .....														
<b>e</b> Total exempt purpose expenditures (add lines 1c and 1d) .....														
<b>f</b> Lobbying nontaxable amount. Enter the amount from the following table in both columns.														
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 33%;">If the amount on line 1e, column (a) or (b) is:</th> <th style="width: 67%;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>not over \$500,000,</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>over \$500,000 but not over \$1,000,000,</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>over \$1,000,000 but not over \$1,500,000,</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>over \$1,500,000 but not over \$17,000,000,</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>over \$17,000,000,</td> <td>\$1,000,000.</td> </tr> </tbody> </table>	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	not over \$500,000,	20% of the amount on line 1e.	over \$500,000 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 \$17,000,000,	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:													
not over \$500,000,	20% of the amount on line 1e.													
over \$500,000 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 \$17,000,000,	\$1,000,000.													
<b>g</b> Grassroots nontaxable amount (enter 25% of line 1f) .....														
<b>h</b> Subtract line 1g from line 1a. If zero or less, enter -0- .....														
<b>i</b> Subtract line 1f from line 1c. If zero or less, enter -0- .....														
<b>j</b> If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? .....		<input type="checkbox"/> Yes <input type="checkbox"/> 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)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) Total
<b>2a</b> Lobbying nontaxable amount					
<b>b</b> Lobbying ceiling amount (150% of line 2a, column (e))					
<b>c</b> Total lobbying expenditures					
<b>d</b> Grassroots nontaxable amount					
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					
<b>f</b> Grassroots lobbying expenditures					

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 each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

Table with 3 main columns: (a) Yes/No, (b) Amount. Rows include: 1 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation... a Volunteers? b Paid staff or management... c Media advertisements? d Mailings to members... e Publications... f Grants to other organizations... g Direct contact with legislators... h Rallies, demonstrations... i Other activities? j Total. Add lines 1c through 1i. 2a Did the activities in line 1 cause the organization to not be described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912. c If "Yes," enter the amount of any tax incurred by organization managers under section 4912. d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

Table with 3 columns: Question, Yes, No. Rows include: 1 Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

Table with 3 columns: Question, 1, 2a, 2b, 2c, 3, 4, 5. Rows include: 1 Dues, assessments and similar amounts from members. 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). a Current year. b Carryover from last year. c Total. 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues. 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 expenditures next year? 5 Taxable amount of lobbying and political expenditures. See instructions.

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.

Series of horizontal dotted lines for providing supplemental 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

2023

Open to Public Inspection

Name of the organization

PARK STREET BUSINESS ASSOCIATION, INC.

Employer identification number

\*\*-\*\*\*7526

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, and questions about donor advisement.

Part II Conservation Easements

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include purpose of easements, total number of easements, and monitoring expenses.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include questions about reporting art and historical treasures.

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** *(continued)*

- 3** Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply).
- a**  Public exhibition
  - b**  Scholarly research
  - c**  Preservation for future generations
  - d**  Loan or exchange program
  - e**  Other .....
- 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 treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

**Part IV Escrow and Custodial Arrangements**

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No
- b** If "Yes," explain the arrangement in Part XIII and complete the following table.
- |  | Amount    |
|--|-----------|
| <b>c</b> Beginning balance .....             | <b>1c</b> |
| <b>d</b> Additions during the year .....     | <b>1d</b> |
| <b>e</b> Distributions during the year ..... | <b>1e</b> |
| <b>f</b> Ending balance .....                | <b>1f</b> |
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  Yes  No
- b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII  Yes  No

**Part V Endowment Funds**

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
<b>1a</b> Beginning of year balance .....					
<b>b</b> Contributions .....					
<b>c</b> Net investment earnings, gains, and losses .....					
<b>d</b> Grants or scholarships .....					
<b>e</b> Other expenditures for facilities and programs .....					
<b>f</b> Administrative expenses .....					
<b>g</b> End of year balance .....					

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a** Board designated or quasi-endowment .....
  - b** Permanent endowment .....
  - c** Term endowment .....
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- |   | Yes           | No |
|---|---------------|----|
| <b>(i)</b> Unrelated organizations? ..... | <b>3a(i)</b>  |    |
| <b>(ii)</b> Related organizations? .....  | <b>3a(ii)</b> |    |
- b** If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?  Yes  No
- 3b**  Yes  No
- 4** Describe in Part XIII the intended uses of the organization's endowment funds.

**Part VI Land, Buildings, and Equipment**

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
<b>1a</b> Land .....				
<b>b</b> Buildings .....				
<b>c</b> Leasehold improvements .....				
<b>d</b> Equipment .....				
<b>e</b> Other .....				
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B)) .....		<b>26,262</b>	<b>26,262</b>	

**Part VII Investments – Other Securities**

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

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

**Part VIII Investments – Program Related**

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

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

**Part IX Other Assets**

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

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

**Part X Other Liabilities**

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) <b>LOAN PAYABLE</b>	<b>152,407</b>
(3) <b>UNEARNED REVENUE</b>	<b>22,773</b>
(4) <b>ACCRUED PAYROLL</b>	<b>6,786</b>
(5) <b>PAYROLL TAXES</b>	<b>2,626</b>
(6) <b>WORKERS COMP</b>	<b>78</b>
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, line 25, col. (B))	<b>184,670</b>

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 FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

**Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return**

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

<b>1</b>	Total revenue, gains, and other support per audited financial statements .....		<b>1</b>	
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
<b>a</b>	Net unrealized gains (losses) on investments .....	<b>2a</b>		
<b>b</b>	Donated services and use of facilities .....	<b>2b</b>		
<b>c</b>	Recoveries of prior year grants .....	<b>2c</b>		
<b>d</b>	Other (Describe in Part XIII.) .....	<b>2d</b>		
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> .....		<b>2e</b>	
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> .....		<b>3</b>	
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b .....	<b>4a</b>		
<b>b</b>	Other (Describe in Part XIII.) .....	<b>4b</b>		
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> .....		<b>4c</b>	
<b>5</b>	Total revenue. Add lines <b>3</b> and <b>4c</b> . ( <i>This must equal Form 990, Part I, line 12.</i> ) .....		<b>5</b>	

**Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return**

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

<b>1</b>	Total expenses and losses per audited financial statements .....		<b>1</b>	
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
<b>a</b>	Donated services and use of facilities .....	<b>2a</b>		
<b>b</b>	Prior year adjustments .....	<b>2b</b>		
<b>c</b>	Other losses .....	<b>2c</b>		
<b>d</b>	Other (Describe in Part XIII.) .....	<b>2d</b>		
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> .....		<b>2e</b>	
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> .....		<b>3</b>	
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b .....	<b>4a</b>		
<b>b</b>	Other (Describe in Part XIII.) .....	<b>4b</b>		
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> .....		<b>4c</b>	
<b>5</b>	Total expenses. Add lines <b>3</b> and <b>4c</b> . ( <i>This must equal Form 990, Part I, line 18.</i> ) .....		<b>5</b>	

**Part XIII Supplemental Information**

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

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**Part XIII** Supplemental Information *(continued)*

[Dotted lines for supplemental information entry]

**SCHEDULE O  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

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

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

Attach to Form 990 or Form 990-EZ.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2023**

**Open to Public  
Inspection**

Name of the organization	<b>PARK STREET BUSINESS ASSOCIATION, INC.</b>	Employer identification number <b>**-***7526</b>
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**FORM 990 - ORGANIZATION'S MISSION**

**THE PARK STREET BUSINESS ASSOCIATION (DBA DOWNTOWN ALAMEDA BUSINESS ASSOCIATION) IS HARD AT WORK YEAR ROUND WITH OUR NEARLY 500 BUSINESSES IN MIND. FIRST FORMED IN 1981, WE SERVE AS A SUPPORT NETWORK AND ADVOCATE FOR BUSINESSES OPERATING IN OUR HISTORIC BUSINESS IMPROVEMENT AREA. THE DOWNTOWN ASSOCIATION PROMOTES A HEALTHY RETAIL/SERVICE CLIMATE AS WELL AS A DISTRICT THAT IS FAMILY-FRIENDLY, CLEAN, GREEN, AND SAFE. THE WELFARE OF THE ASSOCIATION AND ITS MEMBERS IS ACTIVELY PURSUED BY STAFF, OUR BOARD OF DIRECTORS, CITY OFFICIALS, AND CIVIC-MINDED VOLUNTEERS.**

**FORM 990, PART III, LINE 4D - ALL OTHER ACCOMPLISHMENTS**

**THE PARK STREET BUSINESS ASSOCIATION (DBA DOWNTOWN ALAMEDA BUSINESS ASSOCIATION) IS HARD AT WORK YEAR ROUND WITH OUR NEARLY 500 BUSINESSES IN MIND. FIRST FORMED IN 1981, WE SERVE AS A SUPPORT NETWORK AND ADVOCATE FOR BUSINESSES OPERATING IN OUR HISTORIC BUSINESS IMPROVEMENT AREA. THE DOWNTOWN ASSOCIATION PROMOTES A HEALTHY RETAIL/SERVICE CLIMATE AS WELL AS A DISTRICT THAT IS FAMILY-FRIENDLY, CLEAN, GREEN, AND SAFE. THE WELFARE OF THE ASSOCIATION AND ITS MEMBERS IS ACTIVELY PURSUED BY STAFF, OUR BOARD OF DIRECTORS, CITY OFFICIALS, AND CIVIC-MINDED VOLUNTEERS.**

**FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990 DIRECTOR(S) REVIEW FORM 990 PRIOR TO FILING**

**FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION AVAILABLE UPON REQUEST**

Name of the organization

Employer identification number

**PARK STREET BUSINESS ASSOCIATION,**

**\*\*-\*\*\*7526**

**FORM 990, PART IX, LINE 24E - OTHER EXPENSES**

**DESCRIPTION**

**TOT/PROG SERVICE**

**MGT & GENERAL**

**FUNDRAISING**

**EVENT RENTAL**

\$ 10,364

\$ 0

\$ 0

**BEER**

\$ 10,200

\$ 0

\$ 0

**LUMPERS**

\$ 8,750

\$ 0

\$ 0

**GLASSES**

\$ 7,338

\$ 0

\$ 0

**BEVERAGES**

\$ 6,250

\$ 0

\$ 0

**GLASSWARE**

\$ 4,678

\$ 0

\$ 0

**MISC.**

\$ 3,670

\$ 0

\$ 0

**MERCHANT FEES**

\$ 3,161

\$ 0

\$ 0

**AWF T-SHIRTS**

\$ 3,000

\$ 0

\$ 0

**MISC.**

\$ 2,440

\$ 0

\$ 0

**MERCHANT SERVICE FEES**

\$ 1,174

\$ 1,174

\$ 0

**TAXES/LICENSES**

Name of the organization		Employer identification number	
<b>PARK STREET BUSINESS ASSOCIATION,</b>		<b>**-***7526</b>	
\$	2,146	\$	0
<b>PAYROLL FEES</b>			
\$	0	\$	2,039
<b>PRESSURE WASHING</b>			
\$	1,900	\$	0
<b>SUPPLIES</b>			
\$	1,777	\$	0
<b>PERMITS</b>			
\$	1,506	\$	0
<b>AWF ICE</b>			
\$	784	\$	0
<b>ELECTICIAN</b>			
\$	650	\$	0
<b>BIKE MONITORS</b>			
\$	630	\$	0
<b>RENTAL TRUCKS</b>			
\$	609	\$	0
<b>POSTER</b>			
\$	517	\$	0
<b>TABLES/CHAIRS RENTALS</b>			
\$	342	\$	0
<b>DRINK TICKETS</b>			
\$	88	\$	0
<b>TAXES/LICENSES</b>			
\$	85	\$	0
<b>MEMBER OUTREACH</b>			
\$	85	\$	0



Name of the organization

Employer identification number

**PARK STREET BUSINESS ASSOCIATION,**

**\*\*-\*\*\*7526**

**SECURITY**

\$ -212                      \$ 0                      \$ 0

**TOTAL**

\$ 71,932                      \$ 3,213                      \$ 0

\*\*-\*\*\*7526

# Federal Asset Report

FYE: 6/30/2024

## Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per Conv Meth	Prior	Current
<b>Prior MACRS:</b>									
I	Furnishings and Equipment	6/30/06	26,262			26,262	10 HY 200DB	26,262	0
			<u>26,262</u>			<u>26,262</u>		<u>26,262</u>	<u>0</u>
	<b>Grand Totals</b>		26,262			26,262		26,262	0
	<b>Less: Dispositions and Transfers</b>		0			0		0	0
	<b>Less: Start-up/Org Expense</b>		<u>0</u>			<u>0</u>		<u>0</u>	<u>0</u>
	<b>Net Grand Totals</b>		<u>26,262</u>			<u>26,262</u>		<u>26,262</u>	<u>0</u>

\*\*-\*\*\*7526

# CA Asset Report

FYE: 6/30/2024

## Form 990, Page 1

Asset	Description	Date In Service	Cost	Basis for Depr	CA Prior	CA Current	Federal Current	Difference Fed - CA
<b>Prior MACRS:</b>								
I	Furnishings and Equipment	6/30/06	26,262	26,262	26,262	0	0	0
			<u>26,262</u>	<u>26,262</u>	<u>26,262</u>	<u>0</u>	<u>0</u>	<u>0</u>
	<b>Grand Totals</b>		26,262	26,262	26,262	0	0	0
	<b>Less: Dispositions</b>		0	0	0	0	0	0
	<b>Less: Start-up/Org Expense</b>		<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
	<b>Net Grand Totals</b>		<u>26,262</u>	<u>26,262</u>	<u>26,262</u>	<u>0</u>	<u>0</u>	<u>0</u>

\*\*-\*\*\*7526

# AMT Asset Report

FYE: 6/30/2024

## Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per Conv Meth	Prior	Current
<b>Prior MACRS:</b>									
I	Furnishings and Equipment	6/30/06	26,262			26,262	10 HY 150DB	26,262	0
			<u>26,262</u>			<u>26,262</u>		<u>26,262</u>	<u>0</u>
	<b>Grand Totals</b>		26,262			26,262		26,262	0
	<b>Less: Dispositions and Transfers</b>		<u>0</u>			<u>0</u>		<u>0</u>	<u>0</u>
	<b>Net Grand Totals</b>		<u>26,262</u>			<u>26,262</u>		<u>26,262</u>	<u>0</u>

# Depreciation Adjustment Report

## All Business Activities

<u>Form</u>	<u>Unit</u>	<u>Asset</u>	<u>Description</u>	<u>Tax</u>	<u>AMT</u>	<u>AMT Adjustments/ Preferences</u>
<b><u>MACRS Adjustments:</u></b>						
Page 1	1	1	Furnishings and Equipment	<u>0</u>	<u>0</u>	<u>0</u>
				<u>0</u>	<u>0</u>	<u>0</u>

**Future Depreciation Report FYE: 6/30/25**

<u>Asset</u>	<u>Description</u>	<u>Date In Service</u>	<u>Cost</u>	<u>Tax</u>	<u>AMT</u>
<b><u>Prior MACRS:</u></b>					
1	Furnishings and Equipment	6/30/06	<u>26,262</u>	<u>0</u>	<u>0</u>
			<u>26,262</u>	<u>0</u>	<u>0</u>
<b>Grand Totals</b>			<u>26,262</u>	<u>0</u>	<u>0</u>

**CA Future Depreciation Report**

**FYE: 6/30/25**

FYE: 6/30/2024

**Form 990, Page 1**

<u>Asset</u>	<u>Description</u>	<u>Date In Service</u>	<u>Cost</u>	<u>CA</u>
<b><u>Prior MACRS:</u></b>				
1	Furnishings and Equipment	6/30/06	<u>26,262</u>	<u>0</u>
			<u>26,262</u>	<u>0</u>
	<b>Grand Totals</b>		<u>26,262</u>	<u>0</u>

Form <b>990</b>	<b>Two Year Comparison Report</b>	<b>2022 &amp; 2023</b>
For calendar year 2023, or tax year beginning <b>07/01/23</b> , ending <b>06/30/24</b>		

Name **PARK STREET BUSINESS ASSOCIATION, INC.** Taxpayer Identification Number **\*\*-\*\*\*7526**

		2022	2023	Differences	
<b>Revenue</b>	1. Contributions, gifts, grants	1.			
	2. Membership dues and assessments	2.	100,101	120,965	
	3. Government contributions and grants	3.	1,000	20,000	
	4. Program service revenue	4.	101,009	312,706	
	5. Investment income	5.			
	6. Proceeds from tax exempt bonds	6.			
	7. Net gain or (loss) from sale of assets other than inventory	7.			
	8. Net income or (loss) from fundraising events	8.			
	9. Net income or (loss) from gaming	9.			
	10. Net gain or (loss) on sales of inventory	10.			
	11. Other revenue	11.			
	<b>12. Total revenue.</b> Add lines 1 through 11	<b>12.</b>	<b>202,110</b>	<b>453,671</b>	<b>251,561</b>
<b>Expenses</b>	13. Grants and similar amounts paid	13.			
	14. Benefits paid to or for members	14.			
	15. Compensation of officers, directors, trustees, etc.	15.			
	16. Salaries, other compensation, and employee benefits	16.	161,506	181,487	
	17. Professional fundraising fees	17.			
	18. Other professional fees	18.	27,403	32,164	
	19. Occupancy, rent, utilities, and maintenance	19.	30,929	31,871	
	20. Depreciation and Depletion	20.			
	21. Other expenses	21.	77,647	180,129	
	<b>22. Total expenses.</b> Add lines 13 through 21	<b>22.</b>	<b>297,485</b>	<b>425,651</b>	<b>128,166</b>
	<b>23. Excess or (Deficit).</b> Subtract line 22 from line 12	<b>23.</b>	<b>-95,375</b>	<b>28,020</b>	<b>123,395</b>
<b>Other Information</b>	24. Total exempt revenue	24.	202,110	453,671	
	25. Total unrelated revenue	25.			
	26. Total excludable revenue	26.	101,009	312,706	
	27. Total assets	27.	137,527	126,340	
	28. Total liabilities	28.	228,311	189,104	
	29. Retained earnings	29.	-90,784	-62,764	
	30. Number of voting members of governing body	30.	11	11	
	31. Number of independent voting members of governing body	31.	11	11	
	32. Number of employees	32.	2	2	
	33. Number of volunteers	33.	120		



Form <b>990</b>	<b>Tax Return History</b>	<b>2023</b>
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Name <b>PARK STREET BUSINESS ASSOCIATION, INC.</b>	Employer Identification Number <b>**-***7526</b>
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	2019	2020	2021	2022	2023	2024
Contributions, gifts, grants .....		<b>166,664</b>	<b>5,000</b>	<b>1,000</b>	<b>20,000</b>	
Membership dues .....	<b>121,043</b>	<b>101,588</b>	<b>95,739</b>	<b>100,101</b>	<b>120,965</b>	
Program service revenue .....	<b>251,006</b>	<b>6,609</b>	<b>86,264</b>	<b>101,009</b>	<b>312,706</b>	
Capital gain or loss .....						
Investment income .....						
Fundraising revenue (income/loss) .....						
Gaming revenue (income/loss) .....						
Other revenue .....						
<b>Total revenue</b> .....	<b>372,049</b>	<b>274,861</b>	<b>187,003</b>	<b>202,110</b>	<b>453,671</b>	
Grants and similar amounts paid .....						
Benefits paid to or for members .....						
Compensation of officers, etc. ....						
Other compensation .....	<b>143,934</b>	<b>130,651</b>	<b>158,333</b>	<b>161,506</b>	<b>181,487</b>	
Professional fees .....	<b>41,755</b>	<b>12,667</b>	<b>27,810</b>	<b>27,403</b>	<b>32,164</b>	
Occupancy costs .....	<b>27,535</b>	<b>27,529</b>	<b>30,381</b>	<b>30,929</b>	<b>31,871</b>	
Depreciation and depletion .....						
Other expenses .....	<b>157,218</b>	<b>177,654</b>	<b>85,796</b>	<b>77,647</b>	<b>180,129</b>	
<b>Total expenses</b> .....	<b>370,442</b>	<b>348,501</b>	<b>302,320</b>	<b>297,485</b>	<b>425,651</b>	
<b>Excess or (Deficit)</b> .....	<b>1,607</b>	<b>-73,640</b>	<b>-115,317</b>	<b>-95,375</b>	<b>28,020</b>	
<b>Total exempt revenue</b> .....	<b>372,049</b>	<b>274,861</b>	<b>187,003</b>	<b>202,110</b>	<b>453,671</b>	
Total unrelated revenue .....						
Total excludable revenue .....	<b>251,006</b>	<b>6,609</b>	<b>86,264</b>	<b>101,009</b>	<b>312,706</b>	
Total Assets .....	<b>210,875</b>	<b>299,753</b>	<b>208,514</b>	<b>137,527</b>	<b>126,340</b>	
Total Liabilities .....	<b>17,327</b>	<b>179,845</b>	<b>203,923</b>	<b>228,311</b>	<b>189,104</b>	
Net Fund Balances .....	<b>193,548</b>	<b>119,908</b>	<b>4,591</b>	<b>-90,784</b>	<b>-62,764</b>	

## Federal Statements

### Form 990, Part IX, Line 11g - Other Fees for Service (Non-employee)

Description	Total Expenses	Program Service	Management & General	Fund Raising
IT/ SOCIAL MEDIA	\$ 19,100	\$ 19,100	\$	\$
GRAPHIC DESIGN	5,320	5,320		
TOTAL	\$ 24,420	\$ 24,420	\$ 0	\$ 0

**Federal Statements****Form 990, Part IX, Line 24e - All Other Expenses**

Description	Total Expenses	Program Service	Management & General	Fund Raising
EVENT RENTAL	\$ 10,364	\$ 10,364	\$	\$
BEER	10,200	10,200		
LUMPERS	8,750	8,750		
GLASSES	7,338	7,338		
BEVERAGES	6,250	6,250		
GLASSWARE	4,678	4,678		
MISC.	3,670	3,670		
MERCHANT FEES	3,161	3,161		
AWF T-SHIRTS	3,000	3,000		
MISC.	2,440	2,440		
MERCHANT SERVICE FEES	2,348	1,174	1,174	
TAXES/LICENSES	2,146	2,146		
PAYROLL FEES	2,039		2,039	
PRESSURE WASHING	1,900	1,900		
SUPPLIES	1,777	1,777		
PERMITS	1,506	1,506		
AWF ICE	784	784		
ELECTICIAN	650	650		
BIKE MONITORS	630	630		
RENTAL TRUCKS	609	609		
POSTER	517	517		
TABLES/CHAIRS RENTALS	342	342		
DRINK TICKETS	88	88		
TAXES/LICENSES	85	85		
MEMBER OUTREACH	85	85		
SECURITY	-212	-212		
TOTAL	\$ <u>75,145</u>	\$ <u>71,932</u>	\$ <u>3,213</u>	\$ <u>0</u>

## Form 199 Return Summary

For calendar year 2023, or tax year beginning **07/01/2023** , and ending **06/30/2024**

**PARK STREET BUSINESS ASSOCIATION,      \*\*-\*\*\*7526**  
**INC.**

Gross sales / receipts	<u>312,706</u>	
Dues from members		
Contributions / grants	<u>140,965</u>	
Total costs		
Expenses	<u>425,651</u>	
<b>Excess / (deficit)</b>		<u><u>28,020</u></u>

Total payments	<u>                    </u>
Penalties and interest	<u>                    </u>
Use tax	<u>                    </u>

<b>Balance due</b>	<u>                    </u>
<b>Refund</b>	<u><u>                    </u></u>

Balance Sheet			
	Beginning	Ending	Differences
Assets	<u>137,527</u>	<u>126,340</u>	
Liabilities	<u>228,311</u>	<u>189,104</u>	
Net assets	<u><u>-90,784</u></u>	<u><u>-62,764</u></u>	<u><u>28,020</u></u>

### Miscellaneous Information

Amended return  
 Return / extended due date 05/15/25

MAIL TO:  
 Registry of Charities and Fundraisers  
 P.O. Box 903447  
 Sacramento, CA 94203-4470

STREET ADDRESS:  
 1300 I Street  
 Sacramento, CA 95814

WEBSITE ADDRESS:  
[www.oag.ca.gov/charities](http://www.oag.ca.gov/charities)

## ANNUAL REGISTRATION RENEWAL FEE REPORT TO ATTORNEY GENERAL OF CALIFORNIA

**Sections 12586 and 12587, California Government Code  
 11 Cal. Code Regs. sections 301-307, and 310**

Failure to submit this report annually no later than four months and fifteen days after the end of the organization's accounting period may result in the loss of tax exemption and the assessment of a minimum tax of \$800, plus interest, and/or fines or filing penalties. Revenue & Taxation Code section 23703; Government Code section 12586.1. IRS extensions will be honored.

(For Registry Use Only)

<p><b>PARK STREET BUSINESS ASSOCIATION,</b>                  Name of Organization</p> <hr/> <p>List all DBAs and names the organization uses or has used  <b>2447 SANTA CLARA AVE STE 302</b></p> <p>Address (Number and Street)  <b>ALAMEDA CA 94501</b></p> <p>City or Town, State, and ZIP Code  <b>510-523-1392</b></p> <p>Telephone Number  <b>KATHY@DOWNTOWNALAMEDA.COM</b></p> <p>E-mail Address</p>	<p>Check if:</p> <p><input type="checkbox"/> Change of address</p> <p><input type="checkbox"/> Amended report</p> <p><input type="checkbox"/> Organization requests email notifications</p> <hr/> <p>State Charity Registration Number _____</p> <p>Corporation or Organization No. <b>1667903</b></p> <p>Federal Employer ID No. <b>**-***7526</b></p>
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**ANNUAL REGISTRATION RENEWAL FEE SCHEDULE (11 Cal. Code Regs. sections 301-307, and 310)**

Make Check Payable to Department of Justice

Total Revenue	Fee	Total Revenue	Fee	Total Revenue	Fee
Less than \$50,000	\$25	Between \$250,001 and \$1 million	\$100	Between \$20,000,001 and \$100 million	\$800
Between \$50,000 and \$100,000	\$50	Between \$1,000,001 and \$5 million	\$200	Between \$100,000,001 and \$500 million	\$1,000
Between \$100,001 and \$250,000	\$75	Between \$5,000,001 and \$20 million	\$400	Greater than \$500 million	\$1,200

**PART A - ACTIVITIES**

For your most recent full accounting period (beginning 07/01/23 ending 06/30/24) list:

**Total Revenue \$** 453,671 Noncash Contributions \$ 0 Total Assets \$ 126,340  
(including noncash contributions)

Program Expenses \$ 281,020 Total Expenses \$ 425,651

**PART B - STATEMENTS REGARDING ORGANIZATION DURING THE PERIOD OF THIS REPORT**

Note: All questions must be answered. If you answer "yes" to any of the questions below, you must attach a separate page providing an explanation and details for each "yes" response. Please review RRF-1 instructions for information required.

	Yes	No
1. During this reporting period, were there any contracts, loans, leases or other financial transactions between the organization and any officer, director or trustee thereof, either directly or with an entity in which any such officer, director or trustee had any financial interest?		<b>X</b>
2. During this reporting period, was there any theft, embezzlement, diversion or misuse of the organization's charitable property or funds?		<b>X</b>
3. During this reporting period, were any organization funds used to pay any penalty, fine or judgment?		<b>X</b>
4. During this reporting period, were the services of a commercial fundraiser, fundraising counsel for charitable purposes, or commercial coventurer used?		<b>X</b>
5. During this reporting period, did the organization receive any governmental funding?		<b>X</b>
6. During this reporting period, did the organization hold a raffle for charitable purposes?		<b>X</b>
7. Does the organization conduct a vehicle donation program?		<b>X</b>
8. Did the organization conduct an independent audit and prepare audited financial statements in accordance with generally accepted accounting principles for this reporting period?		<b>X</b>
9. At the end of this reporting period, did the organization hold restricted net assets, while reporting negative unrestricted net assets?		<b>X</b>

**I declare under penalty of perjury that I have examined this report, including accompanying documents, and to the best of my knowledge and belief, the content is true, correct and complete, and I am authorized to sign.**

_____ Signature of Authorized Agent	<b>RON MOONEY</b> Printed Name	<b>PRESIDENT ELECT</b> Title	_____ Date
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Form **990**

# Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

## 2023

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

Open to Public Inspection

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

**A** For the 2023 calendar year, or tax year beginning **07/01/23**, and ending **06/30/24**

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization <b>PARK STREET BUSINESS ASSOCIATION, INC.</b>		<b>D</b> Employer identification number <b>**-***7526</b>
	Doing business as <b>DOWNTOWN ALAMEDA BUSINESS ASSN.</b>		<b>E</b> Telephone number <b>510-523-1392</b>
	Number and street (or P.O. box if mail is not delivered to street address) <b>2447 SANTA CLARA AVE STE 302</b>		<b>G</b> Gross receipts \$ <b>453,671</b>
	City or town, state or province, country, and ZIP or foreign postal code <b>ALAMEDA CA 94501</b>		<b>H(a)</b> Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions
<b>F</b> Name and address of principal officer: <b>SADIYA KAZI-KOYA</b>			<b>H(c)</b> Group exemption number

<b>I</b> Tax-exempt status: <input type="checkbox"/> 501(c)(3) <input checked="" type="checkbox"/> 501(c) ( <b>6</b> ) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527	<b>J</b> Website: <b>HTTP://DOWNTOWNALAMEDA.COM/</b>	<b>L</b> Year of formation: <b>1990</b>	<b>M</b> State of legal domicile: <b>CA</b>
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other			

### Part I Summary

Activities & Governance	<b>1</b> Briefly describe the organization's mission or most significant activities: <b>SEE SCHEDULE O</b>		
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	<b>11</b>
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	<b>11</b>
	<b>5</b> Total number of individuals employed in calendar year 2023 (Part V, line 2a)	<b>5</b>	<b>2</b>
	<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>	<b>0</b>
	<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	<b>0</b>
<b>b</b> Net unrelated business taxable income from Form 990-T, Part I, line 11	<b>7b</b>	<b>0</b>	
Revenue	<b>8</b> Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	<b>9</b> Program service revenue (Part VIII, line 2g)	<b>101,101</b>	<b>140,965</b>
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<b>101,009</b>	<b>312,706</b>
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		<b>0</b>
	<b>12</b> Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<b>202,110</b>	<b>453,671</b>
Expenses	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1–3)		<b>0</b>
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)		<b>0</b>
	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	<b>161,506</b>	<b>181,487</b>
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)		<b>0</b>
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25)	<b>0</b>	
	<b>17</b> Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	<b>135,979</b>	<b>244,164</b>
	<b>18</b> Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	<b>297,485</b>	<b>425,651</b>
<b>19</b> Revenue less expenses. Subtract line 18 from line 12	<b>-95,375</b>	<b>28,020</b>	
Net Assets or Fund Balances	<b>20</b> Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	<b>21</b> Total liabilities (Part X, line 26)	<b>137,527</b>	<b>126,340</b>
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20	<b>228,311</b>	<b>189,104</b>
		<b>-90,784</b>	<b>-62,764</b>

### Part II Signature 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.

<b>Sign Here</b>	Signature of officer		Date	
	<b>RON MOONEY</b> Type or print name and title		<b>PRESIDENT ELECT</b>	
<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's signature	Date	Check <input checked="" type="checkbox"/> if self-employed PTIN
	<b>RYAN VAN VALER</b>	<b>RYAN VAN VALER</b>	<b>01/30/25</b>	<b>*****</b>
	Firm's name	Firm's EIN		
<b>RYAN VAN VALER, E.A.</b>		<b>**--***0181</b>		
Firm's address		Phone no.		
<b>2447 SANTA CLARA AVE STE 300 A ALAMEDA, CA 94501-4579</b>		<b>510-521-0252</b>		

May the IRS discuss this return with the preparer shown above? See instructions  Yes  No

For Paperwork Reduction Act Notice, see the separate instructions.

**Part III Statement of Program Service Accomplishments**

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

**1** Briefly describe the organization's mission:

**SEE SCHEDULE O**

**2** Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?  Yes  No

If "Yes," describe these new services on Schedule O.

**3** Did the organization cease conducting, or make significant changes in how it conducts, any program services?  Yes  No

If "Yes," describe these changes on Schedule O.

**4** Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

**4a** (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

**THE PARK STREET BUSINESS ASSOCIATION (DBA DOWNTOWN ALAMEDA BUSINESS ASSOCIATION) IS HARD AT WORK YEAR ROUND WITH NEARLY 500 BUSINESSES IN MIND. FIRST FORMED IN 1981, WE SERVE AS A SUPPORT NETWORK AND ADVOCATE FOR BUSINESSES OPERATING IN OUR HISTORIC BUSINESS IMPROVEMENT AREA. THE DOWNTOWN ASSOCIATION PROMOTES A HEALTHY RETAIL/SERVICE CLIMATE AS WELL AS A DISTRICT THAT IS FAMILY-FRIENDLY, CLEAN, GREEN, AND SAFE. THE WELFARE OF THE ASSOCIATION AND ITS MEMBERS IS ACTIVELY PURSUED BY STAFF, OUR BOARD OF DIRECTORS, CITY OFFICIALS, AND CIVIC-MINDED VOLUNTEERS.**

**4b** (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

**N/A**

**4c** (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

**N/A**

**4d** Other program services (Describe on Schedule O.)

(Expenses \$ including grants of \$ ) (Revenue \$ )

**4e** Total program service expenses

**Part IV Checklist of Required Schedules**

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A		X
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		X
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	X	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? If "Yes," complete Schedule D, Part V		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	X	
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII		X
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? If "Yes," complete Schedule D, Part VIII		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX		X
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII		X
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		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II		X



**Part IV Checklist of Required Schedules** *(continued)*

		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>		X
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>		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a	<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>		
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>		
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		X
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions).		
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>		X
b	A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>		X
c	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>		X
29	Did the organization receive more than \$25,000 in noncash contributions? <i>If "Yes," complete Schedule M</i>		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
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>		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? <b>Note:</b> All Form 990 filers are required to complete Schedule O.	X	

**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		
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		

1a	6
1b	0

<b>Part V Statements Regarding Other IRS Filings and Tax Compliance</b> <i>(continued)</i>		Yes	No
<b>2a</b>	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	<b>2a</b>	<b>2</b>
<b>b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	<b>2b</b>	<b>X</b>
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year?	<b>3a</b>	<b>X</b>
<b>b</b>	If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation on Schedule O</i>	<b>3b</b>	
<b>4a</b>	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	<b>4a</b>	<b>X</b>
<b>b</b>	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<b>5a</b>	<b>X</b>
<b>b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	<b>5b</b>	<b>X</b>
<b>c</b>	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	<b>5c</b>	
<b>6a</b>	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?	<b>6a</b>	<b>X</b>
<b>b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	<b>6b</b>	
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
<b>a</b>	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	<b>7a</b>	
<b>b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided?	<b>7b</b>	
<b>c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	<b>7c</b>	
<b>d</b>	If "Yes," indicate the number of Forms 8282 filed during the year	<b>7d</b>	
<b>e</b>	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<b>7e</b>	
<b>f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	<b>7f</b>	
<b>g</b>	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	<b>7g</b>	
<b>h</b>	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	<b>7h</b>	
<b>8</b>	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	<b>8</b>	
<b>9</b>	<b>Sponsoring organizations maintaining donor advised funds.</b>		
<b>a</b>	Did the sponsoring organization make any taxable distributions under section 4966?	<b>9a</b>	
<b>b</b>	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	<b>9b</b>	
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter:		
<b>a</b>	Initiation fees and capital contributions included on Part VIII, line 12	<b>10a</b>	
<b>b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	<b>10b</b>	
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter:		
<b>a</b>	Gross income from members or shareholders	<b>11a</b>	
<b>b</b>	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	<b>11b</b>	
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?	<b>12a</b>	
<b>b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	<b>12b</b>	
<b>13</b>	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>		
<b>a</b>	Is the organization licensed to issue qualified health plans in more than one state? <b>Note:</b> See the instructions for additional information the organization must report on Schedule O.	<b>13a</b>	
<b>b</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	<b>13b</b>	
<b>c</b>	Enter the amount of reserves on hand	<b>13c</b>	
<b>14a</b>	Did the organization receive any payments for indoor tanning services during the tax year?	<b>14a</b>	<b>X</b>
<b>b</b>	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i>	<b>14b</b>	
<b>15</b>	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.	<b>15</b>	<b>X</b>
<b>16</b>	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	<b>16</b>	<b>X</b>
<b>17</b>	<b>Section 501(c)(21) organizations.</b> Did the trust, any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069.	<b>17</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 on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI

**Section A. Governing Body and Management**

		Yes	No
<b>1a</b>	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.		
<b>b</b>	Enter the number of voting members included on line 1a, above, who are independent		
<b>2</b>	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		<b>X</b>
<b>3</b>	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		<b>X</b>
<b>4</b>	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		<b>X</b>
<b>5</b>	Did the organization become aware during the year of a significant diversion of the organization's assets?		<b>X</b>
<b>6</b>	Did the organization have members or stockholders?		<b>X</b>
<b>7a</b>	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?		<b>X</b>
<b>b</b>	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		<b>X</b>
<b>8</b>	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
<b>a</b>	The governing body?	<b>X</b>	
<b>b</b>	Each committee with authority to act on behalf of the governing body?	<b>X</b>	
<b>9</b>	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O		<b>X</b>

**Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
<b>10a</b>	Did the organization have local chapters, branches, or affiliates?		<b>X</b>
<b>b</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?		
<b>11a</b>	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?		<b>X</b>
<b>b</b>	Describe on Schedule O the process, if any, used by the organization to review this Form 990.		
<b>12a</b>	Did the organization have a written conflict of interest policy? If "No," go to line 13		<b>X</b>
<b>b</b>	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?		
<b>c</b>	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done		
<b>13</b>	Did the organization have a written whistleblower policy?		<b>X</b>
<b>14</b>	Did the organization have a written document retention and destruction policy?	<b>X</b>	
<b>15</b>	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
<b>a</b>	The organization's CEO, Executive Director, or top management official		<b>X</b>
<b>b</b>	Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.		<b>X</b>
<b>16a</b>	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		<b>X</b>
<b>b</b>	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

**Section C. Disclosure**

- 17** List the states with which a copy of this Form 990 is required to be filed **CA**
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  
 Own website  Another's website  Upon request  Other (explain on Schedule O)
- 19** Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records.

**KATHY WEBER** **2447 SANTA CLARA AVE. STE 302** **510-523-1392**  
**ALAMEDA** **CA 94501**

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) <b>RON MOONEY</b> ..... <b>PRESIDENT ELECT</b>	5.00 ..... 0.00	X		X				0	0	0
(2) <b>SADIYA KAZI-KOYA</b> ..... <b>PRESIDENT</b>	3.00 ..... 0.00	X						0	0	0
(3) <b>SABRINA CAZAREZ</b> ..... <b>SECRETARY</b>	1.00 ..... 0.00	X		X				0	0	0
(4) <b>STEVE BUSSE</b> ..... <b>COMMITTEE CHAIR</b>	1.00 ..... 0.00	X						0	0	0
(5) <b>NAOMI BERGHOEF</b> ..... <b>DIRECTOR</b>	1.00 ..... 0.00	X						0	0	0
(6) <b>CASEY HUNT</b> ..... <b>DIRECTOR</b>	0.00 ..... 0.00	X						0	0	0
(7) <b>TONY YU</b> ..... <b>DIRECTOR</b>	1.00 ..... 0.00	X						0	0	0
(8) <b>MIKE YAKURA</b> ..... <b>DIRECTOR</b>	1.00 ..... 0.00	X						0	0	0
(9) <b>KATHY WEBER</b> ..... <b>EXECUTIVE DIRECTOR</b>	40.00 ..... 0.00	X						93,830	0	0
(10)										
(11)										

**Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees** (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(12) .....										
(13) .....										
(14) .....										
(15) .....										
(16) .....										
(17) .....										
(18) .....										
(19) .....										
<b>1b Subtotal</b> .....							<b>93,830</b>			
<b>c Total from continuation sheets to Part VII, Section A</b> .....										
<b>d Total (add lines 1b and 1c)</b> .....							<b>93,830</b>			

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

	Yes	No
<b>3</b> Did the organization list any <b>former</b> officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i> .....		<b>X</b>
<b>4</b> For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i> .....		<b>X</b>
<b>5</b> Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i> .....		<b>X</b>

**Section B. Independent Contractors**

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

(A) Name and business address	(B) Description of services	(C) Compensation

**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**

**Part VIII Statement of Revenue**

Check if Schedule O contains a response 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	
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1a</b> Federated campaigns	<b>1a</b>						
	<b>b</b> Membership dues	<b>1b</b>	120,965					
	<b>c</b> Fundraising events	<b>1c</b>						
	<b>d</b> Related organizations	<b>1d</b>						
	<b>e</b> Government grants (contributions)	<b>1e</b>	20,000					
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b>						
	<b>g</b> Noncash contributions included in lines 1a-1f	<b>1g</b>	\$					
	<b>h Total.</b> Add lines 1a-1f			140,965				
	<b>Program Service Revenue</b>	<b>2a</b> ART & WINE FAIRE	Business Code		206,069	206,069		
<b>b</b> STROLL EVENTS				71,681	71,681			
<b>c</b> SEASONAL MARKETS				26,819	26,819			
<b>d</b> MISC.				3,987	3,987			
<b>e</b> MUNI LOT				3,000	3,000			
<b>f</b> All other program service revenue				1,150	1,150			
<b>g Total.</b> Add lines 2a-2f				312,706				
<b>Other Revenue</b>		<b>3</b> Investment income (including dividends, interest, and other similar amounts)						
	<b>4</b> Income from investment of tax-exempt bond proceeds							
	<b>5</b> Royalties							
	<b>6a</b> Gross rents	<b>6a</b>	(i) Real	(ii) Personal				
			<b>b</b> Less: rental expenses	<b>6b</b>				
			<b>c</b> Rental inc. or (loss)	<b>6c</b>				
	<b>d</b> Net rental income or (loss)							
	<b>7a</b> Gross amount from sales of assets other than inventory	<b>7a</b>	(i) Securities	(ii) Other				
			<b>b</b> Less: cost or other basis and sales exps.	<b>7b</b>				
			<b>c</b> Gain or (loss)	<b>7c</b>				
	<b>d</b> Net gain or (loss)							
	<b>8a</b> Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	<b>8a</b>						
			<b>b</b> Less: direct expenses	<b>8b</b>				
			<b>c</b> Net income or (loss) from fundraising events					
<b>9a</b> Gross income from gaming activities. See Part IV, line 19	<b>9a</b>							
		<b>b</b> Less: direct expenses	<b>9b</b>					
		<b>c</b> Net income or (loss) from gaming activities						
<b>10a</b> Gross sales of inventory, less returns and allowances	<b>10a</b>							
		<b>b</b> Less: cost of goods sold	<b>10b</b>					
		<b>c</b> Net income or (loss) from sales of inventory						
<b>Miscellaneous Revenue</b>	<b>11a</b>	Business Code						
	<b>b</b>							
	<b>c</b>							
	<b>d</b> All other revenue							
	<b>e Total.</b> Add lines 11a-11d							
<b>12 Total revenue.</b> See instructions				453,671	312,706	0	0	

**Part IX Statement of Functional Expenses**

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22				
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
<b>4</b> Benefits paid to or for members				
<b>5</b> Compensation of current officers, directors, trustees, and key employees				
<b>6</b> Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
<b>7</b> Other salaries and wages	<b>167,347</b>	<b>94,261</b>	<b>73,086</b>	
<b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
<b>9</b> Other employee benefits				
<b>10</b> Payroll taxes	<b>14,140</b>		<b>14,140</b>	
<b>11</b> Fees for services (nonemployees):				
<b>a</b> Management				
<b>b</b> Legal				
<b>c</b> Accounting	<b>7,744</b>		<b>7,744</b>	
<b>d</b> Lobbying				
<b>e</b> Professional fundraising services. See Part IV, line 17				
<b>f</b> Investment management fees				
<b>g</b> Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	<b>24,420</b>	<b>24,420</b>		
<b>12</b> Advertising and promotion	<b>18,069</b>	<b>18,069</b>		
<b>13</b> Office expenses	<b>3,715</b>		<b>3,715</b>	
<b>14</b> Information technology				
<b>15</b> Royalties				
<b>16</b> Occupancy	<b>31,871</b>		<b>31,871</b>	
<b>17</b> Travel				
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials				
<b>19</b> Conferences, conventions, and meetings	<b>2,407</b>		<b>2,407</b>	
<b>20</b> Interest	<b>4,039</b>		<b>4,039</b>	
<b>21</b> Payments to affiliates				
<b>22</b> Depreciation, depletion, and amortization				
<b>23</b> Insurance	<b>7,254</b>	<b>2,838</b>	<b>4,416</b>	
<b>24</b> Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
<b>a</b> <b>ALAMEDA AVENUE</b>	<b>21,912</b>	<b>21,912</b>		
<b>b</b> <b>SUPPLY &amp; EQUIPMENT RENTAL</b>	<b>16,710</b>	<b>16,710</b>		
<b>c</b> <b>WINE</b>	<b>16,110</b>	<b>16,110</b>		
<b>d</b> <b>OTHER</b>	<b>14,768</b>	<b>14,768</b>		
<b>e</b> All other expenses	<b>75,145</b>	<b>71,932</b>	<b>3,213</b>	
<b>25</b> Total functional expenses. Add lines 1 through 24e	<b>425,651</b>	<b>281,020</b>	<b>144,631</b>	<b>0</b>
<b>26</b> 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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

**Part X Balance Sheet**

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

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash—non-interest-bearing	<b>116,930</b>	<b>1</b>	<b>96,927</b>
	<b>2</b> Savings and temporary cash investments		<b>2</b>	
	<b>3</b> Pledges and grants receivable, net		<b>3</b>	
	<b>4</b> Accounts receivable, net	<b>1,380</b>	<b>4</b>	<b>20,750</b>
	<b>5</b> Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		<b>5</b>	
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		<b>6</b>	
	<b>7</b> Notes and loans receivable, net		<b>7</b>	
	<b>8</b> Inventories for sale or use		<b>8</b>	
	<b>9</b> Prepaid expenses and deferred charges	<b>17,067</b>	<b>9</b>	<b>6,738</b>
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	<b>10a</b> <b>26,262</b>		
	<b>b</b> Less: accumulated depreciation	<b>10b</b> <b>26,262</b>	<b>10c</b>	
	<b>11</b> Investments—publicly traded securities		<b>11</b>	
	<b>12</b> Investments—other securities. See Part IV, line 11		<b>12</b>	
	<b>13</b> Investments—program-related. See Part IV, line 11		<b>13</b>	
	<b>14</b> Intangible assets		<b>14</b>	
	<b>15</b> Other assets. See Part IV, line 11	<b>2,150</b>	<b>15</b>	<b>1,925</b>
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 33)	<b>137,527</b>	<b>16</b>	<b>126,340</b>	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses	<b>4,393</b>	<b>17</b>	<b>4,434</b>
	<b>18</b> Grants payable		<b>18</b>	
	<b>19</b> Deferred revenue		<b>19</b>	
	<b>20</b> Tax-exempt bond liabilities		<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D		<b>21</b>	
	<b>22</b> Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties		<b>23</b>	
	<b>24</b> Unsecured notes and loans payable to unrelated third parties		<b>24</b>	
	<b>25</b> 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	<b>223,918</b>	<b>25</b>	<b>184,670</b>
	<b>26 Total liabilities.</b> Add lines 17 through 25	<b>228,311</b>	<b>26</b>	<b>189,104</b>
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow FASB ASC 958, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27, 28, 32, and 33.</b>			
	<b>27</b> Net assets without donor restrictions	<b>-90,784</b>	<b>27</b>	<b>-44,719</b>
	<b>28</b> Net assets with donor restrictions		<b>28</b>	<b>-18,045</b>
	<b>Organizations that do not follow FASB ASC 958, check here</b> <input type="checkbox"/> <b>and complete lines 29 through 33.</b>			
	<b>29</b> Capital stock or trust principal, or current funds		<b>29</b>	
	<b>30</b> Paid-in or capital surplus, or land, building, or equipment fund		<b>30</b>	
	<b>31</b> Retained earnings, endowment, accumulated income, or other funds		<b>31</b>	
	<b>32 Total net assets or fund balances</b>	<b>-90,784</b>	<b>32</b>	<b>-62,764</b>
<b>33 Total liabilities and net assets/fund balances</b>	<b>137,527</b>	<b>33</b>	<b>126,340</b>	



**Part XI Reconciliation of Net Assets**

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

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	<b>453,671</b>
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	<b>425,651</b>
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	<b>28,020</b>
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	<b>4</b>	<b>-90,784</b>
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	
<b>6</b>	Donated services and use of facilities	<b>6</b>	
<b>7</b>	Investment expenses	<b>7</b>	
<b>8</b>	Prior period adjustments	<b>8</b>	
<b>9</b>	Other changes in net assets or fund balances (explain on Schedule O)	<b>9</b>	
<b>10</b>	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	<b>10</b>	<b>-62,764</b>

**Part XII Financial Statements and Reporting**

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

		Yes	No
<b>1</b>	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
<b>2a</b>	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both. <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		<b>X</b>
<b>2b</b>	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both. <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		<b>X</b>
<b>2c</b>	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.		
<b>3a</b>	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		
<b>3b</b>	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		

**SCHEDULE C  
(Form 990)**

**Political Campaign and Lobbying Activities**

OMB No. 1545-0047

**2023**

**Open to Public Inspection**

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

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

Department of the Treasury  
Internal Revenue Service

**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 **PARK STREET BUSINESS ASSOCIATION, INC.**

Employer identification number  
**\*\*-\*\*\*7526**

**Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.**

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. See instructions for definition of "political campaign activities."
- 2 Political campaign activity expenditures. See instructions \$ .....
- 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 4955 \$ .....
- 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 501(c)(3).**

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities \$ .....
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities \$ .....
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, 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 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.

(a) Name	(b) Address	(c) EIN	(d) 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) 2023

**Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**

- A** Check  if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B** Check  if the filing organization checked box A and "limited control" provisions apply.

**Limits on Lobbying Expenditures**

**(The term "expenditures" means amounts paid or incurred.)**

	(a) Filing organization's totals	(b) Affiliated group totals												
<b>1a</b> Total lobbying expenditures to influence public opinion (grassroots lobbying) .....														
<b>b</b> Total lobbying expenditures to influence a legislative body (direct lobbying) .....														
<b>c</b> Total lobbying expenditures (add lines 1a and 1b) .....														
<b>d</b> Other exempt purpose expenditures .....														
<b>e</b> Total exempt purpose expenditures (add lines 1c and 1d) .....														
<b>f</b> Lobbying nontaxable amount. Enter the amount from the following table in both columns.														
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 33%;">If the amount on line 1e, column (a) or (b) is:</th> <th style="width: 67%;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>not over \$500,000,</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>over \$500,000 but not over \$1,000,000,</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>over \$1,000,000 but not over \$1,500,000,</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>over \$1,500,000 but not over \$17,000,000,</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>over \$17,000,000,</td> <td>\$1,000,000.</td> </tr> </tbody> </table>	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	not over \$500,000,	20% of the amount on line 1e.	over \$500,000 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 \$17,000,000,	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:													
not over \$500,000,	20% of the amount on line 1e.													
over \$500,000 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 \$17,000,000,	\$1,000,000.													
<b>g</b> Grassroots nontaxable amount (enter 25% of line 1f) .....														
<b>h</b> Subtract line 1g from line 1a. If zero or less, enter -0- .....														
<b>i</b> Subtract line 1f from line 1c. If zero or less, enter -0- .....														
<b>j</b> If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? .....		<input type="checkbox"/> Yes <input type="checkbox"/> 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)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) Total
<b>2a</b> Lobbying nontaxable amount					
<b>b</b> Lobbying ceiling amount (150% of line 2a, column (e))					
<b>c</b> Total lobbying expenditures					
<b>d</b> Grassroots nontaxable amount					
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					
<b>f</b> Grassroots lobbying expenditures					

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 each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

Table with 3 main columns: (a) Yes/No, (b) Amount. Rows include: 1 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation...; 2a Did the activities in line 1 cause the organization to not be described in section 501(c)(3)?; 2b If "Yes," enter the amount of any tax incurred under section 4912; 2c If "Yes," enter the amount of any tax incurred by organization managers under section 4912; 2d 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)(5), or section 501(c)(6).

Table with 3 columns: Question, Yes, No. Rows include: 1 Were substantially all (90% or more) dues received nondeductible by members?; 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?; 3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

Table with 3 columns: Question, 1, 2a, 2b, 2c, 3, 4, 5. Rows include: 1 Dues, assessments and similar amounts from members; 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); 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues; 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 expenditures next year?; 5 Taxable amount of lobbying and political expenditures. See instructions.

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.

Series of horizontal dotted lines for providing supplemental 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

2023

Open to Public Inspection

Name of the organization

PARK STREET BUSINESS ASSOCIATION, INC.

Employer identification number

\*\*-\*\*\*7526

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, and questions about donor advisement.

Part II Conservation Easements

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include purpose of easements, total number of easements, and monitoring expenses.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include questions about reporting art and historical treasures.

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** *(continued)*

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply).
- a  Public exhibition
  - b  Scholarly research
  - c  Preservation for future generations
  - d  Loan or exchange program
  - e  Other .....
- 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 treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

**Part IV Escrow and Custodial Arrangements**

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No
- b If "Yes," explain the arrangement in Part XIII and complete the following table.
- |                                       | Amount |
|---------------------------------------|--------|
| c Beginning balance .....             | 1c     |
| d Additions during the year .....     | 1d     |
| e Distributions during the year ..... | 1e     |
| f Ending balance .....                | 1f     |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  Yes  No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII  Yes  No

**Part V Endowment Funds**

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance .....					
b Contributions .....					
c Net investment earnings, gains, and losses .....					
d Grants or scholarships .....					
e Other expenditures for facilities and programs .....					
f Administrative expenses .....					
g End of year balance .....					

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment .....
  - b Permanent endowment .....
  - c Term endowment .....
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- (i) Unrelated organizations?  Yes  No
  - (ii) Related organizations?  Yes  No
- b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?  Yes  No
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

**Part VI Land, Buildings, and Equipment**

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land .....				
b Buildings .....				
c Leasehold improvements .....				
d Equipment .....				
e Other .....		<b>26,262</b>	<b>26,262</b>	
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B)) .....				

**Part VII Investments – Other Securities**

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

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

**Part VIII Investments – Program Related**

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

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

**Part IX Other Assets**

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

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

**Part X Other Liabilities**

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) <b>LOAN PAYABLE</b>	<b>152,407</b>
(3) <b>UNEARNED REVENUE</b>	<b>22,773</b>
(4) <b>ACCRUED PAYROLL</b>	<b>6,786</b>
(5) <b>PAYROLL TAXES</b>	<b>2,626</b>
(6) <b>WORKERS COMP</b>	<b>78</b>
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, line 25, col. (B))	<b>184,670</b>

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 FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII







**SCHEDULE O  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

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

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

Attach to Form 990 or Form 990-EZ.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2023**

**Open to Public  
Inspection**

Name of the organization	<b>PARK STREET BUSINESS ASSOCIATION, INC.</b>	Employer identification number <b>**-***7526</b>
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**FORM 990 - ORGANIZATION'S MISSION**

**THE PARK STREET BUSINESS ASSOCIATION (DBA DOWNTOWN ALAMEDA BUSINESS ASSOCIATION) IS HARD AT WORK YEAR ROUND WITH OUR NEARLY 500 BUSINESSES IN MIND. FIRST FORMED IN 1981, WE SERVE AS A SUPPORT NETWORK AND ADVOCATE FOR BUSINESSES OPERATING IN OUR HISTORIC BUSINESS IMPROVEMENT AREA. THE DOWNTOWN ASSOCIATION PROMOTES A HEALTHY RETAIL/SERVICE CLIMATE AS WELL AS A DISTRICT THAT IS FAMILY-FRIENDLY, CLEAN, GREEN, AND SAFE. THE WELFARE OF THE ASSOCIATION AND ITS MEMBERS IS ACTIVELY PURSUED BY STAFF, OUR BOARD OF DIRECTORS, CITY OFFICIALS, AND CIVIC-MINDED VOLUNTEERS.**

**FORM 990, PART III, LINE 4D - ALL OTHER ACCOMPLISHMENTS**

**THE PARK STREET BUSINESS ASSOCIATION (DBA DOWNTOWN ALAMEDA BUSINESS ASSOCIATION) IS HARD AT WORK YEAR ROUND WITH OUR NEARLY 500 BUSINESSES IN MIND. FIRST FORMED IN 1981, WE SERVE AS A SUPPORT NETWORK AND ADVOCATE FOR BUSINESSES OPERATING IN OUR HISTORIC BUSINESS IMPROVEMENT AREA. THE DOWNTOWN ASSOCIATION PROMOTES A HEALTHY RETAIL/SERVICE CLIMATE AS WELL AS A DISTRICT THAT IS FAMILY-FRIENDLY, CLEAN, GREEN, AND SAFE. THE WELFARE OF THE ASSOCIATION AND ITS MEMBERS IS ACTIVELY PURSUED BY STAFF, OUR BOARD OF DIRECTORS, CITY OFFICIALS, AND CIVIC-MINDED VOLUNTEERS.**

**FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990 DIRECTOR(S) REVIEW FORM 990 PRIOR TO FILING**

**FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION AVAILABLE UPON REQUEST**

Name of the organization

Employer identification number

**PARK STREET BUSINESS ASSOCIATION,**

**\*\*-\*\*\*7526**

**FORM 990, PART IX, LINE 24E - OTHER EXPENSES**

**DESCRIPTION**

**TOT/PROG SERVICE**

**MGT & GENERAL**

**FUNDRAISING**

**EVENT RENTAL**

\$ 10,364

\$ 0

\$ 0

**BEER**

\$ 10,200

\$ 0

\$ 0

**LUMPERS**

\$ 8,750

\$ 0

\$ 0

**GLASSES**

\$ 7,338

\$ 0

\$ 0

**BEVERAGES**

\$ 6,250

\$ 0

\$ 0

**GLASSWARE**

\$ 4,678

\$ 0

\$ 0

**MISC.**

\$ 3,670

\$ 0

\$ 0

**MERCHANT FEES**

\$ 3,161

\$ 0

\$ 0

**AWF T-SHIRTS**

\$ 3,000

\$ 0

\$ 0

**MISC.**

\$ 2,440

\$ 0

\$ 0

**MERCHANT SERVICE FEES**

\$ 1,174

\$ 1,174

\$ 0

**TAXES/LICENSES**

Name of the organization		Employer identification number	
<b>PARK STREET BUSINESS ASSOCIATION,</b>		<b>**-***7526</b>	
\$	2,146	\$	0
<b>PAYROLL FEES</b>			
\$	0	\$	2,039
<b>PRESSURE WASHING</b>			
\$	1,900	\$	0
<b>SUPPLIES</b>			
\$	1,777	\$	0
<b>PERMITS</b>			
\$	1,506	\$	0
<b>AWF ICE</b>			
\$	784	\$	0
<b>ELECTICIAN</b>			
\$	650	\$	0
<b>BIKE MONITORS</b>			
\$	630	\$	0
<b>RENTAL TRUCKS</b>			
\$	609	\$	0
<b>POSTER</b>			
\$	517	\$	0
<b>TABLES/CHAIRS RENTALS</b>			
\$	342	\$	0
<b>DRINK TICKETS</b>			
\$	88	\$	0
<b>TAXES/LICENSES</b>			
\$	85	\$	0
<b>MEMBER OUTREACH</b>			
\$	85	\$	0

Name of the organization

Employer identification number

**PARK STREET BUSINESS ASSOCIATION,**

**\*\*-\*\*\*7526**

**SECURITY**

\$ -212                      \$ 0                      \$ 0

**TOTAL**

\$ 71,932                      \$ 3,213                      \$ 0

034

Date Accepted \_\_\_\_\_

DO NOT MAIL THIS FORM TO THE FTB

TAXABLE YEAR

2023

# California e-file Return Authorization for Exempt Organizations

FORM

8453-EO

Exempt Organization name **PARK STREET BUSINESS ASSOCIATION, INC.**

Identifying number  
**\*\*--\*\*\*7526**

### Part I Electronic Return Information (whole dollars only)

1 Total gross receipts or unrelated business taxable income (Form 199, line 4 or Form 109, line 5)	1	<b>453,671</b>
2 Total gross income or total tax (Form 199, line 8 or Form 109, line 14)	2	<b>453,671</b>
3 Total expenses and disbursements (Form 199, line 9)	3	<b>425,651</b>
4 Tax due (Form 109, line 23)	4	
5 Overpayment (Form 109, line 24)	5	

### Part II Settle Your Account Electronically for Taxable Year 2023

6  Direct Deposit of refund (Form 109 only.)

7  Electronic funds withdrawal      7a Amount \_\_\_\_\_      7b Withdrawal date (mm/dd/yyyy) \_\_\_\_\_

### Part III Schedule of Estimated Tax Payments for Taxable Year 2024 (These are NOT installment payments for the current amount the exempt organization owes.)

	First Payment	Second Payment	Third Payment	Fourth Payment
8 Amount				
9 Withdrawal Date				

### Part IV Banking Information (Have you verified the exempt organization's banking information?)



10 Routing number \_\_\_\_\_

11 Account number \_\_\_\_\_      12 Type of account:  Checking  Savings

### Part V Declaration of Officer

I authorize the exempt organization's account to be settled as designated in Part II. If I check Part II, box 6, I declare that the bank account specified in Part IV for the direct deposit refund agrees with the authorization stated on my return. If I check Part II, box 7, I authorize an electronic funds withdrawal for the amount listed on line 7a and any estimated payment amounts listed on Part III, line 8 from the bank account specified in Part IV.

Under penalties of perjury, I declare that I am an officer of the above exempt organization and that the information I provided to my electronic return originator (ERO), transmitter, or intermediate service provider and the amounts in Part I above agree with the amounts on the corresponding lines of the exempt organization's 2023 California electronic return. To the best of my knowledge and belief, the exempt organization's return is true, correct, and complete. If the exempt organization is filing a balance due return, I understand that if the Franchise Tax Board (FTB) does not receive full and timely payment of the exempt organization's tax liability, the exempt organization will remain liable for the tax liability and all applicable interest and penalties. I authorize the exempt organization return and accompanying schedules and statements be transmitted to the FTB by the ERO, transmitter, or intermediate service provider. **If the processing of the exempt organization's return or refund is delayed, I authorize the FTB to disclose to the ERO or intermediate service provider the reason(s) for the delay or the date when the refund was sent.**



**Sign Here**            **01/24/25**            **PRESIDENT ELECT**


Signature of officer      Date      Title

### Part VI Declaration of Electronic Return Originator (ERO) and Paid Preparer. See instructions.

I declare that I have reviewed the above exempt organization's return and that the entries on form FTB 8453-EO are complete and correct to the best of my knowledge. (If I am only an intermediate service provider, I understand that I am not responsible for reviewing the exempt organization's return. I declare, however, that form FTB 8453-EO accurately reflects the data on the return.) I have obtained the organization officer's signature on form FTB 8453-EO before transmitting this return to the FTB; I have provided the organization officer with a copy of all forms and information that I will file with the FTB, and I have followed all other requirements described in FTB Pub. 1345, 2023 Handbook for Authorized e-file Providers. I will keep form FTB 8453-EO on file for **four** years from the due date of the return or **four** years from the date the exempt organization return is filed, whichever is later, and I will make a copy available to the FTB upon request. If I am also the paid preparer, under penalties of perjury, I declare that I have examined the above exempt organization's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. I make this declaration based on all information of which I have knowledge.

**ERO Must Sign**

ERO's signature       Date \_\_\_\_\_      Check if also paid preparer       Check if self-employed       ERO's PTIN 



Firm's name (or yours if self-employed) and address       **RYAN VAN VALER**  
**2447 SANTA CLARA AVENUE**  
**ALAMEDA CA**


Firm's FEIN **\*\*\*\*\*0181**

ZIP code **94501**

Under penalties of perjury, I declare that I have examined the above organization's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. I make this declaration based on all information of which I have knowledge.

**Paid Preparer Must Sign**

Paid preparer's signature       Date **01/30/25**      Check if self-employed       Paid preparer's PTIN 

Firm's name (or yours if self-employed) and address       **RYAN VAN VALER, E.A.**  
**2447 SANTA CLARA AVE STE 300 A**  
**ALAMEDA CA**

Firm's FEIN **\*\*--\*\*\*0181**

ZIP code **94501-4579**

TAXABLE YEAR

California Exempt Organization Annual Information Return

FORM

2023

199

Calendar Year 2023 or fiscal year beginning (mm/dd/yyyy) 07/01/2023, and ending (mm/dd/yyyy) 06/30/2024

Corporation/Organization name PARK STREET BUSINESS ASSOCIATION, INC. California corporation number 1667903
Additional information. See instructions. DOWNTOWN ALAMEDA BUSINESS ASSN. FEIN \*\*-\*\*\*7526
Street address (suite or room) 2447 SANTA CLARA AVE STE 302 PMB no.
City ALAMEDA State CA ZIP code 94501
Foreign country name Foreign province/state/county Foreign postal code

A First return [ ] Yes [X] No
B Amended return [ ] Yes [X] No
C IRC Section 4947(a)(1) trust [ ] Yes [X] No
D Final information return? [ ] Dissolved [ ] Surrendered (Withdrawn) [ ] Merged/Reorganized
E Check accounting method: (1) [ ] Cash (2) [X] Accrual (3) [ ] Other
F Federal return filed? (1) [ ] 990T (2) [ ] 990PF (3) [ ] Sch H (990) (4) [ ] Other 990 series
G Is this a group filing? See instructions [ ] Yes [X] No
H Is this organization in a group exemption If "Yes," what is the parent's name?
I Did the organization have any changes to its guidelines not reported to the FTB? See instructions. [ ] Yes [X] No
J If exempt under R&TC Section 23701d, has the organization engaged in political activities? See instructions. N/A [ ] Yes [ ] No
K Is the organization exempt under R&TC Section 23701g? [ ] Yes [X] No
L Is the organization a limited liability company? [ ] Yes [X] No
M Did the organization file Form 100 or Form 109 to report taxable income? [ ] Yes [X] No
N Is the organization under audit by the IRS or has the IRS audited in a prior year? [ ] Yes [X] No
O Is federal Form 1023/1024 pending? [ ] Yes [X] No

Part I Complete Part I unless not required to file this form. See General Information B and C.

Table with 4 columns: Description, Line Number, Amount, and Total. Rows include Receipts and Revenues (lines 1-8), Expenses (lines 9-10), and Payments (lines 11-16). Total balance due is 28,020.

Sign Here: Declaration of preparer, Signature of officer RYAN VAN VALER, Title PRESIDENT ELECT, Date 01/30/2025, Telephone 510-523-1392
Paid Preparer's Use Only: Preparer's signature RYAN VAN VALER, Date 01/30/2025, Firm's name RYAN VAN VALER, E.A., Address 2447 SANTA CLARA AVE STE 300 A ALAMEDA, CA 94501-4579, Telephone 510-521-0252
May the FTB discuss this return with the preparer shown above? See instructions [ ] Yes [ ] No



**PARK STREET BUSINESS ASSOCIATION,**  
**\*\*--\*\*\*7526**

**Part II** Organizations with gross receipts of more than \$50,000 and private foundations regardless of amount of gross receipts — complete Part II or furnish substitute information.

<b>Receipts from Other Sources</b>	1	Gross sales or receipts from all business activities. See instructions	•	1	<b>312,706</b>	00	
	2	Interest	•	2		00	
	3	Dividends	•	3		00	
	4	Gross rents	•	4		00	
	5	Gross royalties	•	5		00	
	6	Gross amount received from sale of assets (See instructions)	•	6		00	
	7	Other income. Attach schedule	•	7		00	
	8	<b>Total</b> gross sales or receipts from other sources. Add line 1 through line 7. Enter here and on Side 1, Part I, line 1		8	<b>312,706</b>	00	
	9	Contributions, gifts, grants, and similar amounts paid. Attach schedule	•	9		00	
	10	Disbursements to or for members	•	10		00	
	11	Compensation of officers, directors, and trustees. Attach schedule <b>SEE STATEMENT 1</b>	•	11		00	
	12	Other salaries and wages	•	12	<b>167,347</b>	00	
	<b>Expenses and Disbursements</b>	13	Interest	•	13	<b>4,039</b>	00
		14	Taxes	•	14	<b>2,231</b>	00
		15	Rents	•	15	<b>31,871</b>	00
		16	Depreciation and depletion (See instructions)	•	16		00
		17	Other expenses and disbursements. Attach schedule <b>SEE STATEMENT 2</b>	•	17	<b>220,163</b>	00
		18	<b>Total</b> expenses and disbursements. Add line 9 through line 17. Enter here and on Side 1, Part I, line 9		18	<b>425,651</b>	00

**Schedule L Balance Sheet**

	Beginning of taxable year		End of taxable year	
	(a)	(b)	(c)	(d)
<b>Assets</b>				
1 Cash		<b>116,930</b>		<b>96,927</b>
2 Net accounts receivable		<b>1,380</b>		<b>20,750</b>
3 Net notes receivable				
4 Inventories				
5 Federal and state government obligations				
6 Investments in other bonds				
7 Investments in stock				
8 Mortgage loans				
9 Other investments. Attach schedule				
10 a Depreciable assets	<b>26,262</b>		<b>26,262</b>	
b Less accumulated depreciation	<b>26,262</b>		<b>26,262</b>	
11 Land				
12 Other assets. Attach schedule <b>STMT 3</b>		<b>19,217</b>		<b>8,663</b>
13 <b>Total assets</b>		<b>137,527</b>		<b>126,340</b>
<b>Liabilities and net worth</b>				
14 Accounts payable		<b>4,393</b>		<b>4,434</b>
15 Contributions, gifts, or grants payable				
16 Bonds and notes payable				
17 Mortgages payable				
18 Other liabilities. Attach schedule <b>STMT 4</b>		<b>223,918</b>		<b>184,670</b>
19 Capital stock or principal fund				
20 Paid-in or capital surplus. Attach reconciliation				
21 Retained earnings or income fund		<b>-90,784</b>		<b>-62,764</b>
22 <b>Total liabilities and net worth</b>		<b>137,527</b>		<b>126,340</b>

**Schedule M-1 Reconciliation of income per books with income per return**

Do not complete this schedule if the amount on Schedule L, line 13, column (d), is less than \$50,000.

1	Net income per books	<b>28,020</b>	7	Income recorded on books this year not included in this return. Attach schedule	
2	Federal income tax		8	Deductions in this return not charged against book income this year. Attach schedule	
3	Excess of capital losses over capital gains		9	<b>Total.</b> Add line 7 and line 8	
4	Income not recorded on books this year. Attach schedule		10	Net income per return. Subtract line 9 from line 6	<b>28,020</b>
5	Expenses recorded on books this year not deducted in this return. Attach schedule				
6	<b>Total.</b> Add line 1 through line 5	<b>28,020</b>			

## California Statements

### Statement 1 - Form 199, Part II, Line 11 - Officer Compensation

Name	Address			Title	Avg Hrs	Compensation Amount
	City	State	Zip			
RON MOONEY				PRESIDENT ELECT	5.00	
SADIYA KAZI-KOYA				PRESIDENT	3.00	
SABRINA CAZAREZ				SECRETARY	1.00	
STEVE BUSSE				COMMITTEE CHAIR	1.00	
NAOMI BERGHOEF				DIRECTOR	1.00	
CASEY HUNT				DIRECTOR		
TONY YU				DIRECTOR	1.00	
MIKE YAKURA				DIRECTOR	1.00	
KATHY WEBER				EXECUTIVE DIRECTOR	40.00	
TOTAL						0

**California Statements****Statement 2 - Form 199, Part II, Line 17 - Other Expenses**

Description	Amount
	\$
ART & WINE FAIRE	
	8,642
AWF ICE	784
AWF T-SHIRTS	3,000
BANNERS	
BEER	10,200
BIKE MONITORS	630
DRINK TICKETS	88
DUMPSTER	
ELECTICIAN	650
EVENT RENTAL	10,364
GLASSES	7,338
LUMPERS	8,750
MISC.	3,670
OTHER	
PERMITS	1,506
POSTER	517
PRESSURE WASHING	1,900
RENTAL TRUCKS	609
SECURITY	-212
SPONSORS BOOTHS	
SUPPLIES	1,777
TABLES/CHAIRS RENTALS	342
WINE	16,110
MERCHANT FEES	3,161
SEASONAL MARKETS	
	628
	587
BEVERAGES	6,250
SUPPLY & EQUIPMENT RENTAL	16,710
MISC.	2,440
TOILET RENTAL	
BIKE PARKING	
MUSIC	
LUMPERS	
POSTER	
BANNER	
PLATES	
T-SHIRTS	
MISC.	
PRINTING	
POSTAGE	
STROLL EVENTS	
	3,201
	2,251
GLASSWARE	4,678
OTHER	14,768
IT/ SOCIAL MEDIA	19,100
GRAPHIC DESIGN	5,320
PRINTING/ POSTAGE	
MEETINGS	521

**California Statements****Statement 2 - Form 199, Part II, Line 17 - Other Expenses (continued)**

<u>Description</u>	<u>Amount</u>
MEMBERSHIP PROGRAM	\$ 1,396
STAFF DEVELOPMENT/ TRAINING	490
MERCHANT SERVICE FEES	2,348
ALAMEDA AVENUE	21,912
PAYROLL FEES	2,039
MARKETING	5,598
SUPPLIES	55
OTHER	3,660
WORKERS COMP	928
LIABILITY/ D&O	3,488
PAYROLL TAXES	14,140
ACCOUNTING	7,744
MEMBER OUTREACH	85
TOTAL	<u>\$ 220,163</u>

**Statement 3 - Form 199, Schedule L, Line 12 - Other Assets**

<u>Description</u>	<u>Beginning of Year</u>	<u>End of Year</u>
SECURITY DEPOSIT	\$ 1,925	\$ 1,925
UNDEPOSITED FUNDS	225	
PREPAID EXPENSES	17,067	6,738
TOTAL	<u>\$ 19,217</u>	<u>\$ 8,663</u>

**Statement 4 - Form 199, Schedule L, Line 18 - Other Liabilities**

<u>Description</u>	<u>Beginning of Year</u>	<u>End of Year</u>
UNEARNED REVENUE	\$ 60,641	\$ 22,773
ACCRUED PAYROLL	5,146	6,786
WORKERS COMP	54	78
LOAN PAYABLE	156,060	152,407
PAYROLL TAXES	2,017	2,626
TOTAL	<u>\$ 223,918</u>	<u>\$ 184,670</u>

**Balance Sheet**

As of June 30, 2024

	<u>Jun 30, 24</u>
<b>ASSETS</b>	
<b>Current Assets</b>	
<b>Checking/Savings</b>	
Bank of Marin Checking	19,018.10
Comerica Checking (6236)	2,476.44
Money Market - B Marin	11,099.53
Paypal	0.72
Petty Cash	150.00
PEX Corp	348.69
PEX Card - 1997 (Kathy)	1,109.30
PEX Card - 7489 ( Ali)	588.05
PEX Card 1994 (Allison)	100.00
Comerica CD - 5066	62,035.86
<b>Total Checking/Savings</b>	<u>96,926.69</u>
<b>Accounts Receivable</b>	
Accounts Receivable	20,750.00
<b>Total Accounts Receivable</b>	<u>20,750.00</u>
<b>Other Current Assets</b>	
<b>Prepaid Expenses</b>	
Prepaid Event Expenses	4,163.21
Prepaid Rent	2,575.00
<b>Total Prepaid Expenses</b>	<u>6,738.21</u>
<b>Total Other Current Assets</b>	<u>6,738.21</u>
<b>Total Current Assets</b>	124,414.90
<b>Fixed Assets</b>	
Computer Equipment	2,163.00
Furniture & Fixtures	1,265.00
Accumulated Depreciation	-3,428.00
<b>Total Fixed Assets</b>	<u>0.00</u>
<b>Other Assets</b>	
Security Deposits	1,925.40
<b>Total Other Assets</b>	<u>1,925.40</u>
<b>TOTAL ASSETS</b>	<b><u>126,340.30</u></b>
<b>LIABILITIES &amp; EQUITY</b>	
<b>Liabilities</b>	
<b>Current Liabilities</b>	
Accounts Payable	
Accounts Payable	4,434.47
<b>Total Accounts Payable</b>	<u>4,434.47</u>
<b>Other Current Liabilities</b>	
Accrued Payroll	6,786.40
Payroll Taxes Payable	2,625.61
Worker' s Comp. Payable	77.52
Unearned Revenue	22,773.00
<b>Total Other Current Liabilities</b>	<u>32,262.53</u>
<b>Total Current Liabilities</b>	<u>36,697.00</u>
<b>Long Term Liabilities</b>	
SBA Loan Payable	152,407.19
<b>Total Long Term Liabilities</b>	<u>152,407.19</u>
<b>Total Liabilities</b>	189,104.19

1:14 PM

**Downtown Alameda Business Association**

01/15/25

**Balance Sheet**

Accrual Basis

As of June 30, 2024

---

	<u>Jun 30, 24</u>
Equity	
Temp. BIA Restricted Funds	-18,044.75
Unrestricted Funds	-44,719.14
	<hr/>
Total Equity	-62,763.89
	<hr/>
<b>TOTAL LIABILITIES &amp; EQUITY</b>	<b>126,340.30</b>
	<hr/> <hr/>

## Downtown Alameda Business Association

01/15/25

## Profit &amp; Loss

Accrual Basis

July 2023 through June 2024

	Jul '23 - Jun 24
Ordinary Income/Expense	
Income	
UNRESTRICTED INCOME	
Event Income	
Seasonal Markets	
Sponsorship	10,000.00
Sales	8,968.52
Vendor Fees	7,850.00
Total Seasonal Markets	26,818.52
Stroll Events	
Sponsors - Strolls	1,800.00
Ticket Sales - Stroll	65,908.91
Stroll Events - Other	3,972.00
Total Stroll Events	71,680.91
Art & Wine Faire	
Sales	118,644.32
Sponsorship	
Vendor Fees - Local Booth	3,425.00
Sponsorship - Other	43,000.00
Total Sponsorship	46,425.00
Eckerstrom Contract Payment	41,000.00
Total Art & Wine Faire	206,069.32
Total Event Income	304,568.75
Program Income	
Associate Members	1,150.00
Muni Lot Income	3,000.00
Total Program Income	4,150.00
Misc. Income	3,986.52
Total UNRESTRICTED INCOME	312,705.27
RESTRICTED INCOME	
City Grant	20,000.00
BIA Restricted Income	120,965.26
Total RESTRICTED INCOME	140,965.26
Total Income	453,670.53
Gross Profit	453,670.53
Expense	
UNRESTRICTED EXPENSES	
Alameda Avenue	
Maintenance & Repair	990.18
Cleaning & Trash	135.00
Total Alameda Avenue	1,125.18
Event Expenses	
Seasonal Market Expense	
Supply & Equipment Rental	16,710.44
Other Expenses	1,743.60
Insurance	587.00
Advertising / Promo	627.85
Beverage costs	6,250.41
Permit & Fees	2,145.75
Seasonal Market Expense - Other	696.30

## Downtown Alameda Business Association

## Profit &amp; Loss

01/15/25

July 2023 through June 2024

Accrual Basis

	Jul '23 - Jun 24
Total Seasonal Market Expense	28,761.35
<b>Stroll Events</b>	
Insurance - Stroll	2,251.00
Glassware / customer SWAG	4,677.60
Other Expenses	14,767.72
Permit & Licenses	85.00
Advertsing / Marketing	3,200.61
<b>Total Stroll Events</b>	24,981.93
<b>Art &amp; Wine Faire Expenses</b>	
Merchant Fees - Booth sales	3,161.44
Event Rental	10,364.00
Beer	10,200.00
Wine	16,110.12
Glasses	7,338.49
Tables/Chairs Rentals	342.00
Lumpers	8,750.00
Bike Monitors	630.00
Electrician	650.00
Change Fund	0.00
Advertising	8,642.41
Poster	516.64
Security	-212.00
Rental Trucks	609.38
AWF Ice	784.68
AWF T-Shirts	3,000.22
Misc.	3,669.78
Permits	1,505.50
Drink Tickets	88.25
Supplies	1,776.54
Pressure Washing	1,900.00
<b>Total Art &amp; Wine Faire Expenses</b>	79,827.45
<b>Total Event Expenses</b>	133,570.73
Executive Director's Salary	93,829.50
Event Coordinator - Wages	47,346.14
Payroll Taxes - UNREST.	11,977.63
Worker's Comp. - Unrest.	824.58
Member Outreach & Communication	84.95
Meetings/Training	520.79
Merchant Service Fees	2,347.74
Office Supplies / Eqpmnt - Un	55.46
Interest & Finance Charges	4,039.02
<b>Total UNRESTRICTED EXPENSES</b>	295,721.72
<b>RESTRICTED EXPENSES</b>	
<b>Grant Expenses</b>	
Alameda Avenue	
Cleaning and Trash	18,895.26
Security	195.09
Street furniture & supplies	1,568.18
Signage	128.39
<b>Total Alameda Avenue</b>	20,786.92
<b>Total Grant Expenses</b>	20,786.92
<b>Membership Program - Restricted</b>	
Administration Expenses	1,176.63
Mixer/Event Expenses	220.00
<b>Total Membership Program - Restricted</b>	1,396.63



## Downtown Alameda Business Association

## Profit &amp; Loss

01/15/25

July 2023 through June 2024

Accrual Basis

	Jul '23 - Jun 24
<b>Marketing (Promo) - Restricted</b>	
Graphic Design	5,320.00
Theatre Ad	2,475.00
Website	439.95
Other Costs - Promo.	2,033.40
Marketing (Promo) - Restricted - Other	650.00
<b>Total Marketing (Promo) - Restricted</b>	10,918.35
<b>Staff Development/Training</b>	490.00
<b>Membership Coord. - Wages</b>	26,170.50
<b>Payroll Taxes - REST.</b>	2,162.33
<b>Workers Comp.</b>	103.47
<b>Audit/Accounting</b>	
Tax/Audit	1,750.00
Accounting/Bookkeeping	5,993.75
Payroll Fees	2,038.97
<b>Total Audit/Accounting</b>	9,782.72
<b>Internet/Social Media Consultan</b>	19,100.00
<b>Liability/D&amp;O Insurance</b>	3,488.00
<b>Office Rent</b>	30,000.00
<b>Office Expenses</b>	3,659.82
<b>Utilities</b>	
Phone/Internet	1,871.19
<b>Total Utilities</b>	1,871.19
<b>Total RESTRICTED EXPENSES</b>	129,929.93
<b>Total Expense</b>	425,651.65
<b>Net Ordinary Income</b>	28,018.88
<b>Other Income/Expense</b>	
Other Expense	
Temp. Rest. Funds Reserve	11,822.25
Unrestricted Funds Reserve	16,196.63
<b>Total Other Expense</b>	28,018.88
<b>Net Other Income</b>	-28,018.88
<b>Net Income</b>	<b>0.00</b>

**Downtown Alameda Business Association  
A/P Aging Summary  
As of June 30, 2024**

---

	<u>Current</u>	<u>1 - 30</u>	<u>31 - 60</u>	<u>61 - 90</u>	<u>&gt; 90</u>	<u>TOTAL</u>
<b>Ali Savage</b>	199.02	0.00	0.00	0.00	0.00	199.02
<b>Andrew Mooney</b>	175.00	0.00	0.00	0.00	0.00	175.00
<b>Bridget Halberstadt</b>	680.00	0.00	0.00	0.00	0.00	680.00
<b>Hilliard Management Group</b>	568.75	0.00	0.00	0.00	0.00	568.75
<b>Mei-Ling Jenks Creative</b>	1,630.00	0.00	0.00	0.00	0.00	1,630.00
<b>Peralta Service Corporation</b>	0.00	726.70	0.00	0.00	0.00	726.70
<b>Rhythmix Cultural Works</b>	375.00	0.00	0.00	0.00	0.00	375.00
<b>Rythmics</b>	80.00	0.00	0.00	0.00	0.00	80.00
<b>TOTAL</b>	<b><u>3,707.77</u></b>	<b><u>726.70</u></b>	<b><u>0.00</u></b>	<b><u>0.00</u></b>	<b><u>0.00</u></b>	<b><u>4,434.47</u></b>

**Downtown Alameda Business Association**  
**A/R Aging Summary**  
As of June 30, 2024

---

	<u>Current</u>	<u>1 - 30</u>	<u>31 - 60</u>	<u>61 - 90</u>	<u>&gt; 90</u>	<u>TOTAL</u>
City of Alameda	750.00	0.00	0.00	0.00	0.00	750.00
City of Alameda, Community Development	4,269.01	0.00	15,730.99	0.00	0.00	20,000.00
<b>TOTAL</b>	<b><u>5,019.01</u></b>	<b><u>0.00</u></b>	<b><u>15,730.99</u></b>	<b><u>0.00</u></b>	<b><u>0.00</u></b>	<b><u>20,750.00</u></b>



# Bank of Marin

PO Box 2039  
Novato, CA 94948-2039

Account Number: [REDACTED]  
Statement Period: 05/31/24 - 06/28/24  
Page: 1 of 5

## Customer Service Information

**Branch:** 510-748-8425  
**Touch Tone Banking:** 800-654-5111

**Lost or Stolen Card:**  
24 hours 7 days per week 866-626-6004

**Written Inquiries:**  
805 MARINA VILLAGE PARKWAY  
ALAMEDA, CA 94501

**Visit us Online:** [www.bankofmarin.com](http://www.bankofmarin.com)

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PARK STREET BUSINESS ASSOCIATION, INC  
DBA DOWNTOWN ALAMEDA BUSINESS ASSOC  
2447 SANTA CLARA AVE # 302  
ALAMEDA CA 94501-4579

## Account Summary for BASIC BUSINESS [REDACTED]

<b>Beginning Balance as of 05/31/24</b>	<b>\$12,841.58</b>
(+) Deposits and Credits (22)	45,251.47
(-) Withdrawals and Debits (31)	35,549.75
<b>Ending Balance as of 06/28/24</b>	<b>\$22,543.30</b>
Enclosures	15

## Checks Posted

\* Skip in check sequence

Number	Date	Amount	Number	Date	Amount	Number	Date	Amount
3653	06/05	215.00	3658	06/05	155.00	3669*	06/25	200.00
3654	06/17	2,413.91	3659	06/07	2,500.00	3670	06/27	200.00
3655	06/05	320.00	3660	06/26	250.00	3671	06/26	200.00
3656	06/14	1,450.00	3663*	06/24	250.00	3672	06/21	200.00
3657	06/06	525.00	3667*	06/25	200.00	3674*	06/28	50.00

## Debits

Date	Description	Subtractions
06/03	Preauthorized Debit SQUARE INC SQ240603 240603	140.00
06/03	Preauthorized Debit SBA LOAN PAYMENT 240603 0000	641.00
06/03	Preauthorized Debit PEX CARD EPAY 240603	2,500.00
06/04	Preauthorized Debit ADP PAY-BY-PAY PAY-BY-PAY 240604 675073843988X83	66.69
06/04	Preauthorized Debit ADP - TAX ADP - TAX 240604 927133931758A01	2,114.94
06/04	Preauthorized Debit ADP WAGE PAY WAGE PAY 240604 675073843987X83	5,687.15
06/05	Preauthorized Debit SQUARE INC 240605P2 240605	75.00





**BASIC BUSINESS 100 (continued) Account [REDACTED]**

**Debits (continued)**

Date	Description	Subtractions
06/05	Preauthorized Debit GOOGLE APPS_COMME 240605	115.20
06/14	Preauthorized Debit ADP PAYROLL FEES ADP FEES 240614 929533799716	85.62
06/18	Preauthorized Debit ADP PAY-BY-PAY PAY-BY-PAY 240618 928233421129X83	67.04
06/18	Preauthorized Debit ADP - TAX ADP - TAX 240618 930333927995A01	2,136.32
06/18	Preauthorized Debit ADP WAGE PAY WAGE PAY 240618 928233421128X83	5,706.26
06/21	Online Transfer Dr REF 1731057L FUNDS TRANSFER TO DEP XXXX2605 FROM ONLINE FUNDS TRANSFER VIA	5,000.00
06/24	Preauthorized Debit PEX CARD EPAY 240624 12365013066	1,000.00
06/28	Preauthorized Debit ADP PAYROLL FEES ADP FEES 240628 931632921563	85.62
06/28	Preauthorized Debit PEX CARD EPAY 240628 12370243260	1,000.00

**Credits**

Date	Description	Additions
06/03	Deposit	300.00
06/03	Deposit	2,500.00
06/03	Preauthorized Credit SQUARE INC 240603P2 240603	144.75
06/03	Preauthorized Credit SQUARE INC 240603P2 240603	144.75
06/03	Preauthorized Credit SQUARE INC 240603P2 240603	434.25
06/04	Preauthorized Credit EVENTBRITE, INC. EDI PYMNTS RMR*IV*90617151238 7**3972*3972\	3,972.00
06/06	Preauthorized Credit SQUARE INC 240606P2 240606	144.75
06/07	Preauthorized Credit SQUARE INC 240607P2 240607	869.70
06/10	Preauthorized Credit SQUARE INC 240610P2 240610	216.97
06/14	Preauthorized Credit SQUARE INC 240614P2 240614	5,259.10





**BASIC BUSINESS 100 (continued) Account [REDACTED]**

**Credits (continued)**

Date	Description	Additions
06/17	Online Transfer Cr REF 1691515L FUNDS TRANSFER FRM DEP XXXX2605 FROM ONLINE FUNDS TRANSFER VIA	10,000.00
06/18	Deposit	50.00
06/18	Deposit	750.00
06/18	Preauthorized Credit SQUARE INC 240618P2 240618	144.75
06/18	Preauthorized Credit EVENTBRITE, INC. EDI PYMNTS RMR*IV*90617151238 7**3820*3820\	3,820.00
06/20	Deposit	2,500.00
06/24	Preauthorized Credit SQUARE INC 240624P2 240624	144.75
06/24	Preauthorized Credit SQUARE INC 0624 SFB1 240624	254.68
06/24	Preauthorized Credit SQUARE INC 240624P2 240624	362.02
06/27	Preauthorized Credit SQUARE INC 240627P2 240627	2,412.35
06/27	Preauthorized Credit DOWNTOWNALAMEDA. EVENTBRITE 240627 ST-P3L2M6U8O7A6	10,681.90
06/28	Preauthorized Credit SQUARE INC 240628P2 240628	144.75

**Daily Balances**

Date	Amount	Date	Amount	Date	Amount
05/31	12,841.58	06/10	6,513.77	06/24	11,489.92
06/03	13,084.33	06/14	10,237.25	06/25	11,089.92
06/04	9,187.55	06/17	17,823.34	06/26	10,639.92
06/05	8,307.35	06/18	14,678.47	06/27	23,534.17
06/06	7,927.10	06/20	17,178.47	06/28	22,543.30
06/07	6,296.80	06/21	11,978.47		

**Overdraft/Return Item Fees**

Description	Total this Period	Total Year to Date
Total Overdraft Fees	\$0.00	\$0.00
Total Returned Item Fees	\$0.00	\$0.00





# Bank of Marin

PO Box 2039  
Novato, CA 94948-2039

Account Number: [REDACTED]  
Statement Period: 05/31/24 - 06/28/24  
Page: 1 of 1

## Customer Service Information

**Branch:** 510-748-8425  
**Touch Tone Banking:** 800-654-5111

**Lost or Stolen Card:**  
24 hours 7 days per week 866-626-6004

**Written Inquiries:**  
805 MARINA VILLAGE PARKWAY  
ALAMEDA, CA 94501

**Visit us Online:** [www.bankofmarin.com](http://www.bankofmarin.com)

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PARK STREET BUSINESS ASSOCIATION, INC  
DBA DOWNTOWN ALAMEDA BUSINESS ASSOC  
2447 SANTA CLARA AVE # 302  
ALAMEDA CA 94501-4579

## Account Summary for BUSINESS MONEY MARKET [REDACTED]

<b>Beginning Balance as of 05/31/24</b>	<b>\$16,091.98</b>	Annual Percentage Yield Earned	0.75%
+ Deposits and Credits (2)	5,007.55	Average Balance for APY	\$13,234.84
- Withdrawals and Debits (1)	10,000.00	Interest Earned	\$7.55
<b>Ending Balance as of 06/28/24</b>	<b>\$11,099.53</b>	Interest Paid Year to Date	\$132.66
		Interest Bearing Days	28

### Debits

Date	Description	Subtractions
06/17	Online Transfer Dr REF 1691515L FUNDS TRANSFER TO DEP XXXX3970 FROM ONLINE FUNDS TRANSFER VIA	10,000.00

### Credits

Date	Description	Additions
06/21	Online Transfer Cr REF 1731057L FUNDS TRANSFER FRM DEP XXXX3970 FROM ONLINE FUNDS TRANSFER VIA	5,000.00
06/28	Interest	7.55

### Daily Balances

Date	Balance	Date	Balance	Date	Balance
05/31	16,091.98	06/21	11,091.98	06/28	11,099.53
06/17	6,091.98				



### Overdraft/Return Item Fees

Description	Total This Period	Total Year to Date
Total Overdraft Fees	\$0.00	\$0.00
Total Returned Item Fees	\$0.00	\$0.00



# 2024-06 Comerica Bank Account Summary



Welcome! Your last Log In was Thursday, June 13, 2024 6:28:00 PM ET [Messages](#) [Self Service](#) [Log Out](#)

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ACCOUNTS

E STATEMENTS

TRANSFERS

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## Accounts

CD/IRA (\*\*\*\*\*5066)

**\$62,035.86**

[Recent Transactions](#)

CHECKING (\*\*\*\*\*6236)

**\$2,476.44**

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PARK STREET BUSINESS ASSOCIATION  
INCORPORATED DBA  
DOWNTOWN ALAMEDA BUSINESS ASSOCIATION  
2447 SANTA CLARA AVE #302  
ALAMEDA CA 94501



**Basic Business Checking  
statement**

June 1, 2024 to June 30, 2024  
Account number [REDACTED]

**Account summary**

Beginning balance  
on June 1, 2024 **\$2,476.44**

Ending balance  
on June 30, 2024 **\$2,476.44**

**Summary of interest you've earned**

- Interest paid to you this statement period: \$0.00
- Total interest paid to you this year: \$2.88

**\$ Lowest daily balance**

Your lowest daily balance this statement period was **\$2,476.44**  
on **June 1, 2024**.

**To contact us**

**Call**  
(800) 522-2265  
**Visit our web site**  
[www.comerica.com](http://www.comerica.com)

**Write to us**  
COMERICA BANK  
2416 CENTRAL AVE  
ALAMEDA CA 94501-4351

**Important information**

The Account Balance Fee for this statement  
period for this account is \$0.00/\$1,000.

**Thank you**