

February 28, 2017

Debbie Potter
Community Development Director
City of Alameda
2263 Santa Clara Ave.
Alameda, CA 94501

Dear Ms. Potter:

As President of the Downtown Alameda Business Association, I am pleased to submit the attached BIA Report, accompanying 2016/2017 actual year-to-date budget for our Association, the Strategic Goals (yet to be approved by the Board), and a listing of the current Downtown Association board of directors.

We are proposing changes in the BIA boundaries for 2018/2019 as our work plan was not far enough along for the 2017/2018 submission. We have a very aggressive work plan we will be rolling out with all of our committees and with City staff to determine appropriate addresses for the proposed expansion of the BIA boundaries.

We have provided a description of the activities the Downtown Association is proposing for the upcoming year. The attached budget is a draft and once approved by the Board will be forwarded to you in its complete form.

Sincerely,

Donna Layburn
President
Downtown Alameda Business Association

2447 Santa Clara Ave., #302, Alameda CA 94501
Phone: (510) 523-1392 - Fax: (510) 523-2372
Email: office@DowntownAlameda.com - Website: www.DowntownAlameda.com

DOWNTOWN ALAMEDA BUSINESS ASSOCIATION

2447 Santa Clara Ave., #302, Alameda, CA 94501

PROPOSED ASSESSMENT FOR BUSINESS IMPROVEMENT AREA FISCAL YEAR 2017/2018

INTRODUCTION:

The Downtown Alameda Business Association is recommending a BIA budget of \$98,000 for the Downtown Alameda Business District for fiscal year 2017/2018. This recommendation is based on the estimate of the income derived from the BIA assessment in fiscal 2016/2017.

While the activities and goals for the Downtown Association are still in the works for the 2016/2017 period, the projected activities present many challenges and opportunities as the state of the downtown district requires moving forward with new ideas, visions, and activities. The budget is not yet completely defined for 2017/2018, and Strategic Goals and activities are the result of monthly ongoing Board of Director and committee meetings.

BUDGET:

The BIA is one of two sources of funding for the entire scope of the activities proposed in this report. The other source is funds raised by the Downtown Alameda Business Association through our special events. The Downtown Association will continue its current schedule of street events for the calendar year 2017, which are under contract, as well as working toward replacing or continuing the events in 2018.

BOUNDARIES:

We will work with City staff to determine appropriate addresses for a proposed expansion of the BIA boundaries in 2018/2019 with the goal of aligning the Business Improvement Area boundaries with the existing Landscape & Lighting (L&L) boundaries.

ACTIVITIES:

Attached is a summary of the proposed activities for the fiscal year 2017/2018. These activities are designed to improve the pedestrian-friendly look of the downtown district, improve the vitality of the downtown district to increase sales and sales tax revenues, promote member businesses and the district as a whole, attract new businesses to the downtown district, and increase the overall business atmosphere in Downtown Alameda.

REPORTING:

A partial list of committee activities is included in this packet. A final summary including the Board-approved budget will be forwarded at the end of this fiscal year.

2017/18 Membership Committee Work Plan Outline

OBJECTIVE:

Ensure members are informed of the latest news pertaining to the District, apprised of marketing and educational opportunities available to the membership, and given a regular opportunity to meet and mix with other members.

1. Communicate news and information to the membership:
 - Continue to email monthly newsletter to everyone on the email distribution list.
 - Continue to email mixer reminders and other updates to the membership.
2. Conduct and improve attendance at Downtown Mixers:
 - Provide relevant and useful information.
 - Recognize individual business achievements/highlights.
 - Invite city officials (presentation/Q&A).
 - Provide a brief program at select mixers.
 - Review host's mixer expectations and remind them to invite guests.
3. Improve communication to membership:
 - Gather additional member email addresses.
 - E.D. to conduct weekly "get to know" members by visiting on a regular basis.
3. Update, print, and distribute new member brochure on an as needed basis.
4. Plan and conduct the Downtown Association's Holiday Party.
5. Enhance the member awards program to include recognition of anniversaries, green business awards, etc. on a monthly basis.

2017/18 Maintenance & Improvement Committee Work Plan Outline

OBJECTIVE:

Identify, organize, report, and monitor the maintenance and improvements of the Downtown Alameda district which includes: garbage, ACI relationship, planters, lighting, planters, trees, light posts, etc.

1. Work with Public Works to implement enhanced maintenance.
2. Work with Public Works and ACI to ensure collection of all trash containers as outlined.
3. Continue to support County mandatory recycling requirements.
4. Ensure the installation of recycling containers on the street. Support and submit grants for new recycling programs and receptacles.
5. Create a protocol for identifying, documenting, and reporting maintenance issues.
6. Ensure that all street events have proper recycling containers.
7. Work with Public Works to ensure proper street trees are replanted where warranted.
8. Identify street paving and crowning activities and priorities.
9. Review Phase III streetscape possibilities North of Lincoln and funding options.
10. Interact with the Police Department on crime, theft, and coverage issues.
11. Identify needs and ideas for making district more bicycle friendly.
12. Create an RFP to Alameda's Art Fund to assist in producing banners for selected light poles.

2017/18 Promotions Committee Work Plan Outline

OBJECTIVE:

Promote the Downtown Alameda district to the broadest audience possible using as many media outlets, events, publications, and social media outlets as possible.

1. Website:

- Continue to improve new website.
- Conduct training for members on how to maximize their own page.
- Campaign to add more member email addresses for including more businesses.
- Ensure search engine optimization.
- Research and redesign member area to increase communication and interest.
- Interactive map includes points of interest and parking locations.
- Add PayPal feature and “For Sale” tickets and promotional materials.

2. Special Events:

- Plan and develop marketing plan for new events that do not shut down the street.
- Plan and conduct Art & Wine Faire (last weekend of July 2017).
- Plan and conduct Classic Car Show (2nd Saturday in October 2017).

3. Other Events:

- Plan and implement new events with input from the Board of Directors and members.
- Complete plan to offer summer music events in conjunction with 2nd Friday Art Walks.

4. Update and print 2017 Shopping Guide & Business Directory

5. Print Advertising:

- Continue newspaper ads for special events and holiday season

6. Cable Advertising:

- Continue ads for special events

7. Alameda Theatre’s Pre-Movie Advertising:

- Three ads for each of our special events running 4 weeks prior to the event.
- One generic ad promoting Downtown Alameda running all other times.

8. Holiday Marketing:

- Maximize local advertising outlets.
- Work with Alameda Theatre to expand Dickens program.

9. Arts District Designation Grant:

- Follow up on grant submission to California Arts Council for “Creative California Community” Grant. Develop work plan if granted.

2017/18 Economic Government Relations Committee Work Plan Outline

OBJECTIVE:

Recognizing how critical future development of the north of Lincoln area is to the district; how current vacant properties throughout the district are being developed, identified, and marketed; the challenges in starting a new business in Alameda; and the importance of maintaining relationships with the city staff and government — the goal of this committee is to develop strategies to improve communications and assist in economic development.

1. Share updated status of vacant storefronts and development projects in monthly mixers, newsletters, and property owner communications.
2. Work with the City of Alameda to ensure proper legislation is enacted prior to the public hearing pertaining to the BIA expansion.
3. Outline a marketing campaign to inform and gather consensus for the proposed expansion.
4. Develop member surveys to get ideas and referrals for outreach to potential new businesses.
5. Outreach to the businesses in the areas of expansion to share the case for expansion with them including the benefits for them with new member packets and face-to-face meetings.
6. Outreach to current members about the proposed expansion.
7. Maintain affiliate membership in California Main Street Alliance. Board to make recommendations on new programs from the annual conferences.
8. Continue to work with other associations, developers, and the City of Alameda to improve the planning, permit, and inspection process.

METHOD AND BASIS OF LEVYING ASSESSMENT

Budget: See Exhibit A

CONCLUSION:

The Downtown Alameda Business Association would like to thank the Alameda City Council, City Attorney, Community Development, Public Works, and Finance Departments for their assistance in implementing the BIA. The increased participation from the business community and the continued quality of projects have shown the BIA is a valuable tool in our continuing efforts to revitalize the Downtown Alameda and the Historic Park Street Business District.

**Downtown Alameda Business Association
2017 Board of Directors**

Officers:

President

Donna Layburn
Marketplace
865-1500

Vice President

Steve Busse
Park Centre Animal Hospital
521-1700

Secretary

Deb Knowles
Edward Jones
749-0403

Treasurer

Ron Mooney
Daisy's
522-6443

At Large Directors:

Julie Baron
Julie's Coffee & Tea Garden
865-2385

Kyle Conner
Alameda Theatre
769-2160

Cindy Kahl
Speisekammer
522-1300

Jennifer Serr
The Sewing Room
332-9807

Committee Chairs:

City & Economic Relations
Rich Krinks
Harbor Bay Realty
814-4802

Maintenance & Improvement
Kate Pryor
Tucker's Ice Cream
522-4960

Membership
open

Promotions
open

Staff:

***Interim Executive Director &
Marketing/Promotions Manager***
Rose Chastain
rose@downtownalameda.com
(510) 523-1392

***Membership Services
Manager***
Danielle Brown
office@downtownalameda.com

***Marketing/Communications
Consultant***
Stephanie Prothero
stephanie@downtownalameda.com

**Downtown Alameda Business Association
2017/2018 DRAFT Budget**

INCOME:

<u>Restricted</u>	<u>17/18 Budget</u>
BIA Payments	\$110,000
Restricted Income Sub Total	\$110,000

<u>Unrestricted</u>	<u>17/18 Budget</u>
Misc. Income	\$9,000
Customer Appreciation Day	\$2,000
Art & Wine Faire (Net)	\$85,000
Car Show (Net)	\$3,000
Spring Festival (Net)	\$30,000
Unrestricted Income Sub Total	\$129,000
Income Grand Total	\$239,000

EXPENSES:

<u>Restricted</u>	<u>17/18 Budget</u>
Liability/D&O Insurance	\$5,000
Audit/Accounting	\$5,000
Postage/Printing	\$1,900
Supplies	\$2,300
Office Rent	\$15,900
Workers Comp	\$2,000
Utilities	\$2,300
Membership Committee	\$1,000
Membership Manager	\$32,000
Employer Taxes	\$2,900
Other Office Costs	\$500
Customer Celebration Day	\$1,700
Promotions Committee	\$15,000
Marketing Consultant	\$24,000
Restricted Expenses Sub Total	\$111,500

<u>Unrestricted</u>	<u>17/18 Budget</u>
Executive Director Salaries	\$70,000
Employer Taxes	\$5,800
Maintenance/Improvement	\$20,000
CAMSA Conference	\$1,500
Meetings/Trainings	\$2,500
Outside Services - Programs	\$21,500
Board Authorized Reserve	\$6,200
Unrestricted Expenses Sub Total	\$127,500
Expenses Grand Totals	\$239,000

Downtown Alameda Business Association
2017/2018 DRAFT Budget



DOWNTOWN ALAMEDA BUSINESS ASSOCIATION

Summary of Activities 2016-2017

The following is a summary of activities conducted during 2016 and activities to date in 2017. These activities have already taken place, or will take place before the end of the current fiscal year.

ACCOMPLISHMENTS:

MARKETING/ PROMOTIONS COMMITTEE:

Spring Festival 2016:

- 50,000 visitors to the Park Street District during Mother's Day weekend, May 7-8, 2016.
- Net income was \$35,000.

Art & Wine Faire 2016:

- 100,000 + visitors to the Park Street District during the two days of the event, July 30-31, 2016.
- Net income was \$97,000.

Classic Car Show 2016:

- 25,000 visitors to the Park Street district during the one day of the event, October 8, 2016.
- This event is planned to be revenue neutral. Net income of \$5000.

Customer Celebration Day:

- Coordinated Customer Celebration Day with over 50 participating members.
- Events included: sales, games, prizes, discounts, and gift baskets.
- Marketing and advertising in local papers, emails, Twitter, and Facebook.

Marketing/ Promotions Coordinator/ Committee/ Marketing Director:

- Continually upgraded website pages, including merchant individual pages.
- Expanded use of social media for all promotions and events with Twitter, Facebook.
- Produced and distributed 2016 Shopping Guide to members, hotels, and doctor offices.
- Produced 2-3 electronic newsletters per month; and emailed to members and City Staff.
- Defined Alameda Sun promotions calendar for features and member highlights for 2017.
- Prepared rebranding logo and promotional materials to support Downtown logo and dba.
- Prepared new "Welcome packets" and individual outreach to existing members and new members.
- Goal to reach 80-90% face to face meetings with members before year end.

2017 Festivals:

- Hired interim Marketing Promotions Director to ensure execution of Spring and Art & Wine Festivals for 2017, currently under existing contract.
- Launched communication program to work with members on opportunities and “how to’s” to promote their businesses during the festivals.

Mixers:

- Established new goals to improve outreach and attendance at monthly mixers, held at locations throughout the District.

MAINTENANCE/IMPROVEMENT COMMITTEE:

- Worked with City Staff to communicate issues on Maintenance Contract and performance.
- Worked with City Staff to effect removal/improvement of News racks throughout the district.
- Worked with Public Works to order and install 3-stream Recycle/Compost/Landfill bins on prominent high traffic corners and locations in core of the Downtown District.
- Supported grant application with CASA to improve public education for recycling/compost sorting, and a study to determine cross contamination and effectiveness of existing sorting in bins.
- Participated with WABA in communicating more effectively with Public Works on common issues and goals for both districts, in order to streamline use of staff time and identification of issues/resolution.

BOARD PARTICIPATION IN CALIFORNIA MAIN STREET PROGRAM:

- Board members have participated/networked in both 2016/2017 California Main Street annual conferences as affiliate members.
- Working on directions for future events to bring more people into the district for community/family events.
- Networking with several Executive Directors of cities throughout California to identify successful potential events that do not close down the streets as additional or replacement events in the future.

ECONOMIC/GOVERNMENT RELATIONS COMMITTEE:

- Worked with numerous members to support and advocate for their new developments, remodels, or store openings.
- Worked to identify potential new retailers or restaurants; and had members write letters of support for businesses to consider the Downtown District for their locations.
- Created lists of improvements, enhancements, and potential projects to improve the “Gateway” entrance to the District; including the installation of an arch and preliminary research into costs and RFP to have an arch designed, built, and installed with comments on potential fundraising opportunities.

MEMBERSHIP COMMITTEE:

- Created 2017 calendar, commitments, and locations for 10 mixers.
- Procured space and catering for December Holiday Mixer for members.
- Conducted email survey of members that was very successful in soliciting opinions on particular issues facing the association, with the goal of having numerous surveys used on issues throughout the year.
- Assisted members interfacing with City government.
- Provided answers to members' questions on a daily basis.

PROMOTION OF DISTRICT WITH THE ARTS:

- Board attended California Arts Council meetings with City Staff and Rhythmix staff to research potential grants for additional community arts program funding.
- In conjunction with Rhythmix, submitted a grant to secure funds to support an art program that will include an art contest to decorate vacant storefronts, abandoned building facades, and fencing; in order to improve look and feel of the overall Downtown District.
- Participated on the committee for the City of Alameda's façade improvement grant program to review applications and award grants. Announced in emails and newsletters renewal of the program with instructions and applications.
- Reviewed applications and documents related to signage additions/changes, installation of new awnings, and plans for new construction in the Downtown District. Participated on the committee for the City of Alameda's façade improvement grant program to review applications and award grants.

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Accrual Basis

Downtown Alameda Business Association

Profit & Loss Budget vs. Actual

July 2016 through February 2017

	Jul '16 - Feb...	Budget	\$ Over Bud...
Ordinary Income/Expense			
Income			
UNRESTRICTED INCOME			
Event Income			
Art & Wine Faire	159,386.00	145,000.00	14,386.00
Car Show	20,604.46	19,300.00	1,304.46
Customer Appreciation Day	800.00	700.00	100.00
Total Event Income	180,790.46	165,000.00	15,790.46
Program Income	5,100.00	7,650.00	-2,550.00
Misc. Income	32.89	600.00	-567.11
Total UNRESTRICTED INCOME	185,923.35	173,250.00	12,673.35
RESTRICTED INCOME	109,358.58	105,000.00	4,358.58
Total Income	295,281.93	278,250.00	17,031.93
Expense			
UNRESTRICTED EXPENSES			
Event Expenses	87,573.86	88,710.00	-1,136.14
Shopping Guide - Sponsored	0.00	2,250.00	-2,250.00
Executive Director's Salary	40,281.00	60,453.00	-20,172.00
Payroll Taxes	3,387.50	6,240.00	-2,852.50
Staff Benefits	4,000.00	8,000.00	-4,000.00
Meetings/Training	531.80	1,000.00	-468.20
CAMSA Conference	0.00	1,000.00	-1,000.00
Shopping Guide (Sponsored)	0.00	2,250.00	-2,250.00
Outside Service - Prog.	8,868.75	0.00	8,868.75
Other Costs - Prog.	27.57		
Total UNRESTRICTED EXPENSES	144,670.48	169,903.00	-25,232.52
RESTRICTED EXPENSES			
Utilities	1,594.11	1,680.00	-85.89
Membership	2,722.32	3,375.00	-652.68
Promotion Committee Expenses	4,208.81	8,250.00	-4,041.19
Printing/Postage	0.00	800.00	-800.00
Membership Manager Wages	21,280.52	21,215.06	65.46
Employer Taxes	1,784.85	2,200.00	-415.15
Workers Comp.	522.48	2,000.00	-1,477.52
Audit/Accounting	3,673.92	5,099.92	-1,426.00
Marketing Consultant	16,625.00	12,000.00	4,625.00
Internet/Social Media Consultan	0.00	4,000.00	-4,000.00
Liability/D&O Insurance	4,177.00	4,500.00	-323.00
Postage	235.00	0.00	235.00
Supplies	546.23	1,625.00	-1,078.77
Office Rent	10,584.00	10,584.00	0.00
Office Expenses	913.41	0.00	913.41
Total RESTRICTED EXPENSES	68,867.65	77,328.98	-8,461.33
Total Expense	213,538.13	247,231.98	-33,693.85
Net Ordinary Income	81,743.80	31,018.02	50,725.78
Net Income	81,743.80	31,018.02	50,725.78

DABA Financial Documents

- A. A copy of filed tax return
- B. A copy of annual balance sheet and income statement related to the tax return in A above and
- C. any reconciliation sheets required to tie out these to the tax return
- D. A copy of year-end detailed listing for accounts payable and accounts receivable
- E. A copy of year-end bank reconciliation and bank statement with the bank logo.

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Accrual Basis

Downtown Alameda Business Association
YTD Profit & Loss Budget vs. Actual
July 2015 through June 2016

	Jul '15 - Jun...	Budget	\$ Over Bud...
Ordinary Income/Expense			
Income			
UNRESTRICTED INCOME			
Event Income	234,269.03	242,225.00	-7,955.97
Program Income	10,400.00	9,850.00	550.00
Misc. Income	928.86	1,200.00	-271.14
Total UNRESTRICTED INCOME	245,597.89	253,275.00	-7,677.11
RESTRICTED INCOME	120,457.92	99,000.00	21,457.92
Total Income	366,055.81	352,275.00	13,780.81
Expense			
UNRESTRICTED EXPENSES			
Event Expenses	127,062.54	136,040.00	-8,977.46
Shopping Guide - Sponsored	2,174.10	2,500.00	-325.90
Executive Director's Salary	87,282.00	87,299.94	-17.94
Payroll Taxes	9,276.43	9,900.00	-623.57
Staff Benefits	12,000.00	13,200.00	-1,200.00
power box Art	2,500.00	0.00	2,500.00
Meetings/Training	2,231.82	2,000.00	231.82
Total UNRESTRICTED EXPENSES	242,526.89	250,939.94	-8,413.05
RESTRICTED EXPENSES			
Utilities	2,250.67	2,220.00	30.67
Membership	3,667.50	4,090.00	-422.50
Promotion Committee Expenses	10,140.46	11,000.00	-859.54
Maint. & Improvement Comm.-REST	13,084.79	10,000.00	3,084.79
Printing/Postage	166.62	0.00	166.62
Membership Manager Wages	28,368.00	27,209.73	1,158.27
Employer Taxes	2,813.79	2,226.00	587.79
Workers Comp.	1,631.86	2,152.00	-520.14
Audit/Accounting	7,584.43	3,996.00	3,588.43
Marketing Consultant	19,940.46	24,000.00	-4,059.54
Liability/D&O Insurance	4,132.00	3,914.00	218.00
Postage	479.90	1,200.00	-720.10
Supplies	1,604.86	1,800.00	-195.14
Office Rent	15,939.00	15,876.00	63.00
Office Expenses	562.20	0.00	562.20
Other Costs - REST	4,852.84	0.00	4,852.84
Total RESTRICTED EXPENSES	117,219.38	109,683.73	7,535.65
Total Expense	359,746.27	360,623.67	-877.40
Net Ordinary Income	6,309.54	-8,348.67	14,658.21
Other Income/Expense			
Other Expense			

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Accrual Basis

Downtown Alameda Business Association
YTD Profit & Loss Budget vs. Actual
July 2015 through June 2016

	<u>Jul '15 - Jun...</u>	<u>Budget</u>	<u>\$ Over Bud...</u>
Temp. Rest. Funds Reserve	5,107.78		
Unrestricted Funds Reserve	1,201.76		
Total Other Expense	<u>6,309.54</u>		
Net Other Income	<u>-6,309.54</u>		
Net Income	<u>0.00</u>	<u>-8,348.67</u>	<u>8,348.67</u>

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02/06/17

Accrual Basis

Downtown Alameda Business Association
Transactions by Account
As of June 30, 2016

Type	Date	Num	Name	Memo	Class	Clr	Split	Amount	Balance
Accounts Receivable									0.00
Invoice	06/30/2016	C072...	City of Alameda		Unrestri...		Uninvoiced In...	750.00	750.00
Invoice	06/30/2016	C072...	City of Alameda		Unrestri...		Uninvoiced In...	1,800.00	2,550.00
Invoice	06/30/2016	C072...	City of Alameda		Restrict...		BIA	4,000.00	6,550.00
Invoice	06/30/2016	C072...	Miscellaneous Inco...		Unrestri...		-SPLIT-	250.00	6,800.00
Total Accounts Receivable								6,800.00	6,800.00
TOTAL								6,800.00	6,800.00

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Accrual Basis

Downtown Alameda Business Association
Balance Sheet
As of June 30, 2016

	Jun 30, 16
ASSETS	
Current Assets	
Checking/Savings	
Bank of Marin Checking	17,190.72
Total Checking/Savings	17,190.72
Accounts Receivable	
Accounts Receivable	6,800.00
Total Accounts Receivable	6,800.00
Other Current Assets	
Prepaid Expenses	
Prepaid Rent	1,125.00
Prepaid Expenses - Other	5,881.94
Total Prepaid Expenses	7,006.94
Total Other Current Assets	7,006.94
Total Current Assets	30,997.66
Fixed Assets	
Computer Equipment	7,963.00
Furniture & Fixtures	2,265.00
Accumulated Depreciation	-10,142.00
Total Fixed Assets	86.00
TOTAL ASSETS	31,083.66
LIABILITIES & EQUITY	
Liabilities	
Current Liabilities	
Other Current Liabilities	
Unearned Revenue	17,328.00
Total Other Current Liabilities	17,328.00
Total Current Liabilities	17,328.00
Total Liabilities	17,328.00
Equity	
Temp. Restricted Funds	11,983.78
Unrestricted Funds	1,771.88
Total Equity	13,755.66
TOTAL LIABILITIES & EQUITY	31,083.66

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01/11/17

Accrual Basis

Downtown Alameda Business Association
Profit & Loss Detail
 July 2015 through June 2016

Type	Date	Num	Name	Memo	Class	Clr	Split	Amount	Balance
Ordinary Income/Expense									
Income									
UNRESTRICTED INCOME									
Event Income									
Spring Festival									
SF Sales									
Deposit	05/09/2016		Misc. Event Custom...	Glasses & Li...	Unrestric...		Bank of Marin ...	27,149.00	27,149.00
	Total SF Sales							27,149.00	27,149.00
Sponsorship									
General Journal	11/30/2015		Miscellaneous Inco...	Direct TV Wri...	Unrestric...		Accounts Rec...	-1,250.00	-1,250.00
Deposit	04/01/2016		Armstrong Paint & ...	Sponsorship ...	Unrestric...		Bank of Marin ...	1,500.00	250.00
Deposit	04/01/2016		Hi Def Solar	Sponsorship ...	Unrestric...		Bank of Marin ...	1,500.00	1,750.00
Deposit	04/18/2016		Comcast	SF Sponsors...	Unrestric...		Bank of Marin ...	1,000.00	2,750.00
Deposit	04/18/2016		Bath Filters	SF Sponsors...	Unrestric...		Bank of Marin ...	1,500.00	4,250.00
Deposit	04/29/2016		bladum	Deposit	Unrestric...		Bank of Marin ...	750.00	5,000.00
Deposit	05/09/2016		One Lawn	SF Sponsors...	Unrestric...		Bank of Marin ...	1,500.00	6,500.00
Deposit	05/09/2016		Provident Credit Uni...	SF Sponosrs...	Unrestric...		Bank of Marin ...	1,500.00	8,000.00
Deposit	05/09/2016		Forrest Chiropratic	Deposit	Unrestric...		Bank of Marin ...	500.00	8,500.00
Deposit	05/27/2016		Photo Association	Deposit	Unrestric...		Bank of Marin ...	125.00	8,625.00
Deposit	05/31/2016		Alameda Entertain...	Sponsorship ...	Unrestric...		Bank of Marin ...	750.00	9,375.00
Deposit	06/09/2016		Eckerstrom Product...	HP Sponsors...	Unrestric...		Bank of Marin ...	3,000.00	12,375.00
	Total Sponsorship							12,375.00	12,375.00
Sponsorship - In Kind									
General Journal	05/09/2016		ACI	GJE for In-Ki...	Unrestric...		Trash/Recycle	2,500.00	2,500.00
	Total Sponsorship - In Kind							2,500.00	2,500.00
Eckerstrom Contract Payment									
Deposit	04/29/2016		Eckerstrom Product...	Payment Prio...	Unrestric...		Bank of Marin ...	10,000.00	10,000.00
Deposit	05/09/2016		Eckerstrom Product...	Eckerstrom ...	Unrestric...		Bank of Marin ...	17,000.00	27,000.00
	Total Eckerstrom Contract Payment							27,000.00	27,000.00
Eckerstrom Additional Payment									
Deposit	06/09/2016		Eckerstrom Product...	Cable Ads, S...	Unrestric...		Bank of Marin ...	3,936.00	3,936.00
	Total Eckerstrom Additional Payment							3,936.00	3,936.00
	Total Spring Festival							72,960.00	72,960.00
Art & Wine Faire									
Sales									
Deposit	07/28/2015		Art & Wine Faire	Deposit	Unrestric...		Bank of Marin ...	49,538.03	49,538.03
Deposit	07/28/2015		Art & Wine Faire	Deposit	Unrestric...		Bank of Marin ...	90.00	49,628.03
Deposit	07/31/2015		Art & Wine Faire	Deposit	Unrestric...		Bank of Marin ...	2,380.00	52,008.03
Deposit	07/31/2015		Art & Wine Faire	Deposit	Unrestric...		Bank of Marin ...	351.00	52,359.03
	Total Sales							52,359.03	52,359.03
Sponsorship									

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Type	Date	Num	Name	Memo	Class	Clr	Split	Amount	Balance
Deposit	07/01/2015		Alameda Municipal ...	Deposit	Unrestric...		Bank of Marin ...	8,000.00	8,000.00
Deposit	07/01/2015		Red Peg	Deposit	Unrestric...		Bank of Marin ...	6,000.00	14,000.00
Deposit	07/01/2015		Armstrong Paint & ...	Deposit	Unrestric...		Bank of Marin ...	3,000.00	17,000.00
Deposit	07/01/2015		Comcast	Deposit	Unrestric...		Bank of Marin ...	1,500.00	18,500.00
Deposit	07/20/2015		Hi Def Solar	Deposit	Unrestric...		Bank of Marin ...	1,000.00	19,500.00
Deposit	07/20/2015		One Lawn	Deposit	Unrestric...		Bank of Marin ...	2,000.00	21,500.00
Deposit	07/28/2015		SG Homes	Deposit	Unrestric...		Bank of Marin ...	1,500.00	23,000.00
Deposit	07/28/2015		East Bay Municipal ...	Deposit	Unrestric...		Bank of Marin ...	1,000.00	24,000.00
Deposit	07/28/2015		Forrest Chiropratic	Deposit	Unrestric...		Bank of Marin ...	500.00	24,500.00
Deposit	07/28/2015		Harbor Bay Realty	Deposit	Unrestric...		Bank of Marin ...	2,500.00	27,000.00
Invoice	07/28/2015	072815	Hand and Stone*	Sponsorship	Unrestric...		Accounts Rec...	500.00	27,500.00
General Journal	07/31/2015		Bath Fitters	GJE for Unea...	Unrestric...		Unearned Rev...	2,500.00	30,000.00
General Journal	07/31/2015		San Francisco Chro...	GJE for Unea...	Unrestric...		Unearned Rev...	1,000.00	31,000.00
General Journal	07/31/2015		Provident Credit Uni...	GJE for Unea...	Unrestric...		Unearned Rev...	1,500.00	32,500.00
Deposit	09/23/2015		Ellis Eye	Ellis Eye	Unrestric...		Bank of Marin ...	1,500.00	34,000.00
Total Sponsorship								34,000.00	34,000.00
Sponsorship - In Kind									
General Journal	07/28/2015		ACI	GJE for In-Ki...	Unrestric...		Dumpster	2,500.00	2,500.00
General Journal	07/28/2015		Alameda Theater	GJE for In-Ki...	Unrestric...		Advertising	1,500.00	4,000.00
General Journal	07/28/2015		Rock Wall Winery	GJE for In-Ki...	Unrestric...		Advertising	5,000.00	9,000.00
Total Sponsorship - In Kind								9,000.00	9,000.00
Eckerstrom Contract Payment									
Deposit	07/28/2015		Eckerstrom Product...	Deposit	Unrestric...		Bank of Marin ...	41,000.00	41,000.00
Total Eckerstrom Contract Payment								41,000.00	41,000.00
Eckerstrom Additional Payment									
Deposit	11/05/2015		Eckerstrom Product...	Cable Ads, P...	Unrestric...		Bank of Marin ...	5,013.00	5,013.00
Total Eckerstrom Additional Payment								5,013.00	5,013.00
Total Art & Wine Faire								141,372.03	141,372.03
Car Show									
Sponsorship									
Deposit	09/23/2015		Car Show	Kelly Lux	Unrestric...		Bank of Marin ...	1,000.00	1,000.00
Deposit	09/23/2015		Rodger's Trucking	Rodger's Tru...	Unrestric...		Bank of Marin ...	1,000.00	2,000.00
Deposit	10/09/2015		Alameda Collision ...	Deposit	Unrestric...		Bank of Marin ...	2,000.00	4,000.00
Deposit	10/13/2015		F. H. Dailey	Deposit	Unrestric...		Bank of Marin ...	1,000.00	5,000.00
Deposit	10/30/2015	3104	Ole's Waffle Shop	Deposit	Unrestric...		Bank of Marin ...	500.00	5,500.00
Deposit	01/22/2016		Lee Auto	Deposit	Unrestric...		Bank of Marin ...	500.00	6,000.00
Total Sponsorship								6,000.00	6,000.00
Additional T-Shirt Sales									
Deposit	10/13/2015		Car Show	Deposit	Unrestric...		Bank of Marin ...	1,516.00	1,516.00
Deposit	03/18/2016			4 T-Shirts	Unrestric...		Bank of Marin ...	40.00	1,556.00
Total Additional T-Shirt Sales								1,556.00	1,556.00
Entry Fees									

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Type	Date	Num	Name	Memo	Class	Cir	Split	Amount	Balance
Deposit	08/14/2015		Car Show	Deposit	Unrestric...		Bank of Marin ...	1,122.00	1,122.00
Deposit	09/04/2015		Car Show	Deposit	Unrestric...		Bank of Marin ...	3,943.00	5,065.00
Deposit	09/11/2015		Car Show	Deposit	Unrestric...		Bank of Marin ...	1,033.00	6,098.00
Deposit	09/18/2015		Car Show	Deposit	Unrestric...		Bank of Marin ...	1,571.00	7,669.00
Deposit	10/09/2015		Car Show	Deposit	Unrestric...		Bank of Marin ...	2,472.00	10,141.00
Deposit	10/13/2015		Car Show	Deposit	Unrestric...		Bank of Marin ...	575.00	10,716.00
Total Entry Fees								10,716.00	10,716.00
Total Car Show								18,272.00	18,272.00
Customer Appreciation Day									
Deposit	09/18/2015		Customer Appreci...	Deposit	Unrestric...		Bank of Marin ...	1,115.00	1,115.00
Deposit	10/09/2015		Customer Appreci...	Deposit	Unrestric...		Bank of Marin ...	100.00	1,215.00
Deposit	10/30/2015	3104	Ole's Waffle Shop	Deposit	Unrestric...		Bank of Marin ...	50.00	1,265.00
Deposit	10/30/2015	3617	Alameda See Spot ...	Deposit	Unrestric...		Bank of Marin ...	50.00	1,315.00
Deposit	10/30/2015	1120	Alameda Collision ...	Deposit	Unrestric...		Bank of Marin ...	50.00	1,365.00
Deposit	10/30/2015	5861	Julie's Coffee & Tea...	Deposit	Unrestric...		Bank of Marin ...	50.00	1,415.00
Deposit	11/05/2015		Tot Tank	Deposit	Unrestric...		Bank of Marin ...	50.00	1,465.00
Deposit	11/20/2015		The Marketplace	From The Ma...	Unrestric...		Bank of Marin ...	50.00	1,515.00
Deposit	02/05/2016		Ole's Waffle Shop	Payment For ...	Unrestric...		Bank of Marin ...	100.00	1,615.00
Deposit	02/05/2016		Daisy's	Deposit	Unrestric...		Bank of Marin ...	50.00	1,665.00
Total Customer Appreciation Day								1,665.00	1,665.00
Total Event Income								234,269.03	234,269.03
Program Income									
Associate Members									
Deposit	12/23/2015		SpeedPro East Bay	Deposit	Unrestric...		Bank of Marin ...	100.00	100.00
Deposit	12/23/2015		Busestad Construct...	Deposit	Unrestric...		Bank of Marin ...	100.00	200.00
Deposit	12/23/2015		State Farm Insurance	Deposit	Unrestric...		Bank of Marin ...	100.00	300.00
Deposit	12/23/2015		Isadora Alman	Deposit	Unrestric...		Bank of Marin ...	100.00	400.00
Deposit	12/23/2015		Heavenly Stems Ac...	Deposit	Unrestric...		Bank of Marin ...	100.00	500.00
Deposit	01/14/2016		Emmanuel's Mufflers	Deposit	Unrestric...		Bank of Marin ...	100.00	600.00
Deposit	01/14/2016		Rhythmix Cultural ...	Deposit	Unrestric...		Bank of Marin ...	100.00	700.00
Deposit	01/14/2016		Lynn's of Alameda	Deposit	Unrestric...		Bank of Marin ...	100.00	800.00
Deposit	01/22/2016		Forrest Chiropratic	Deposit	Unrestric...		Bank of Marin ...	100.00	900.00
Deposit	01/22/2016		Curves	Deposit	Unrestric...		Bank of Marin ...	100.00	1,000.00
Deposit	02/05/2016		Acupuncture, Herbs...	Half Payment	Unrestric...		Bank of Marin ...	50.00	1,050.00
Deposit	02/05/2016		Hand and Stone	Deposit	Unrestric...		Bank of Marin ...	100.00	1,150.00
Deposit	04/01/2016		Tracy Zollinger	Second Pay...	Unrestric...		Bank of Marin ...	50.00	1,200.00
Deposit	04/18/2016		Child Unique Monte...	Associate Me...	Unrestric...		Bank of Marin ...	100.00	1,300.00
Total Associate Members								1,300.00	1,300.00
Trash Disposal									
General Journal	07/31/2015		City of Alameda	GJE for Mont...	Unrestric...		Uninvoiced Inc...	300.00	300.00
General Journal	08/31/2015		City of Alameda	GJE for Mont...	Unrestric...		Uninvoiced Inc...	300.00	600.00
General Journal	09/30/2015		City of Alameda	GJE for Mont...	Unrestric...		Uninvoiced Inc...	300.00	900.00
General Journal	10/31/2015		City of Alameda	GJE for Mont...	Unrestric...		Uninvoiced Inc...	300.00	1,200.00
General Journal	11/30/2015		City of Alameda	GJE for Mont...	Unrestric...		Uninvoiced Inc...	300.00	1,500.00

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Type	Date	Num	Name	Memo	Class	Clr	Split	Amount	Balance
General Journal	12/31/2015		City of Alameda	GJE for Mont...	Unrestric...		Uninvoiced Inc...	300.00	1,800.00
General Journal	01/31/2016		City of Alameda	GJE for Mont...	Unrestric...		Uninvoiced Inc...	300.00	2,100.00
General Journal	02/29/2016		City of Alameda	GJE for Mont...	Unrestric...		Uninvoiced Inc...	300.00	2,400.00
General Journal	03/31/2016		City of Alameda	GJE for Mont...	Unrestric...		Uninvoiced Inc...	300.00	2,700.00
General Journal	04/30/2016		City of Alameda	GJE for Mont...	Unrestric...		Uninvoiced Inc...	300.00	3,000.00
General Journal	05/31/2016		City of Alameda	GJE for Mont...	Unrestric...		Uninvoiced Inc...	300.00	3,300.00
General Journal	06/30/2016		City of Alameda	GJE for Mont...	Unrestric...		Uninvoiced Inc...	300.00	3,600.00
Total Trash Disposal								3,600.00	3,600.00
Muni Lot Income									
General Journal	07/31/2015		City of Alameda	GJE for Muni...	Unrestric...		Uninvoiced Inc...	250.00	250.00
General Journal	08/31/2015		City of Alameda	GJE for Muni...	Unrestric...		Uninvoiced Inc...	250.00	500.00
General Journal	09/30/2015		City of Alameda	GJE for Muni...	Unrestric...		Uninvoiced Inc...	250.00	750.00
General Journal	10/31/2015		City of Alameda	GJE for Muni...	Unrestric...		Uninvoiced Inc...	250.00	1,000.00
General Journal	11/30/2015		City of Alameda	GJE for Muni...	Unrestric...		Uninvoiced Inc...	250.00	1,250.00
General Journal	12/31/2015		City of Alameda	GJE for Muni...	Unrestric...		Uninvoiced Inc...	250.00	1,500.00
General Journal	01/31/2016		City of Alameda	GJE for Muni...	Unrestric...		Uninvoiced Inc...	250.00	1,750.00
General Journal	02/29/2016		City of Alameda	GJE for Muni...	Unrestric...		Uninvoiced Inc...	250.00	2,000.00
General Journal	03/31/2016		City of Alameda	GJE for Muni...	Unrestric...		Uninvoiced Inc...	250.00	2,250.00
General Journal	04/30/2016		City of Alameda	GJE for Muni...	Unrestric...		Uninvoiced Inc...	250.00	2,500.00
General Journal	05/31/2016		City of Alameda	GJE for Muni...	Unrestric...		Uninvoiced Inc...	250.00	2,750.00
General Journal	06/30/2016		City of Alameda	GJE for Muni...	Unrestric...		Uninvoiced Inc...	250.00	3,000.00
Total Muni Lot Income								3,000.00	3,000.00
Shopping Guide Sponsorship									
Deposit	01/22/2016		Mason Management	Deposit	Unrestric...		Bank of Marin ...	750.00	750.00
Deposit	01/22/2016		Edward Jones - Jan...	Deposit	Unrestric...		Bank of Marin ...	250.00	1,000.00
Deposit	05/20/2016		Julie's Coffee & Tea...	Deposit	Unrestric...		Bank of Marin ...	250.00	1,250.00
Deposit	05/20/2016		Alameda Collision ...	Deposit	Unrestric...		Bank of Marin ...	750.00	2,000.00
Deposit	05/27/2016		Edward Jones - De...	Recieved Fro...	Unrestric...		Bank of Marin ...	250.00	2,250.00
Invoice	06/30/2016	C072...	Miscellaneous Inco...		Unrestric...		Accounts Rec...	250.00	2,500.00
Total Shopping Guide Sponsorship								2,500.00	2,500.00
Total Program Income								10,400.00	10,400.00
Misc. Income									
General Journal	07/01/2015			Reverse of G...	Unrestric...		Petty Cash	-6.00	-6.00
Deposit	09/23/2015		Miscellaneous Inco...	EDD Refund	Unrestric...		Bank of Marin ...	30.63	24.63
Deposit	09/23/2015		U.S. Treasury	Refund	Unrestric...		Bank of Marin ...	212.23	236.86
Deposit	10/09/2015		Philadelphia Insura...	Deposit	Unrestric...		Bank of Marin ...	642.00	878.86
Deposit	04/01/2016		Bay Risk Insurance	Refund for A...	Unrestric...		Bank of Marin ...	50.00	928.86
Total Misc. Income								928.86	928.86
Total UNRESTRICTED INCOME								245,597.89	245,597.89
RESTRICTED INCOME									
BIA									
Deposit	07/01/2015		City of Alameda	Deposit	Restricte...		Bank of Marin ...	5,789.02	5,789.02
Deposit	07/20/2015		City of Alameda	Deposit	Restricte...		Bank of Marin ...	38,446.71	44,235.73

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Downtown Alameda Business Association
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 July 2015 through June 2016

Type	Date	Num	Name	Memo	Class	Clr	Split	Amount	Balance
Deposit	08/24/2015		City of Alameda	Deposit	Restrict...		Bank of Marin ...	35,369.80	79,605.53
Deposit	09/23/2015		City of Alameda	Deposit	Restrict...		Bank of Marin ...	11,313.44	90,918.97
Deposit	10/09/2015		City of Alameda	Deposit	Restrict...		Bank of Marin ...	3,216.19	94,135.16
Deposit	11/20/2015		City of Alameda	Deposit	Restrict...		Bank of Marin ...	2,226.00	96,361.16
Deposit	12/23/2015		City of Alameda	Deposit	Restrict...		Bank of Marin ...	3,996.86	100,358.02
Deposit	01/14/2016		City of Alameda	Deposit	Restrict...		Bank of Marin ...	4,114.56	104,472.58
Deposit	02/19/2016		City of Alameda	Deposit	Restrict...		Bank of Marin ...	2,659.00	107,131.58
Deposit	03/18/2016		City of Alameda	February BIA...	Restrict...		Bank of Marin ...	1,011.00	108,142.58
Deposit	04/18/2016		City of Alameda	BIA Payment	Restrict...		Bank of Marin ...	4,322.00	112,464.58
Deposit	05/09/2016		City of Alameda	BIA Payment...	Restrict...		Bank of Marin ...	2,796.34	115,260.92
Deposit	06/24/2016		City of Alameda	Deposit	Restrict...		Bank of Marin ...	1,197.00	116,457.92
Invoice	06/30/2016	C072...	City of Alameda		Restrict...		Accounts Rec...	4,000.00	120,457.92
Total BIA								120,457.92	120,457.92
Total RESTRICTED INCOME								120,457.92	120,457.92
Total Income								366,055.81	366,055.81
Expense									
UNRESTRICTED EXPENSES									
Event Expenses									
Customer Appreciation Day									
Advertising									
Check	09/22/2015	1858	Alameda Sun		Unrestric...		Bank of Marin ...	149.25	149.25
Check	10/23/2015	2006	Bay Area News Gro...		Unrestric...		Bank of Marin ...	756.00	905.25
Total Advertising								905.25	905.25
Music									
Check	09/04/2015	1839	Gary Miller		Unrestric...		Bank of Marin ...	200.00	200.00
Check	09/04/2015	1840	Greg Jenkins		Unrestric...		Bank of Marin ...	100.00	300.00
Total Music								300.00	300.00
Balloons									
Check	09/04/2015	1835	Robb Ratto		Unrestric...		Bank of Marin ...	162.06	162.06
Total Balloons								162.06	162.06
Printing									
Check	08/28/2015	1825	Alameda Printing S...		Unrestric...		Bank of Marin ...	43.80	43.80
Check	09/22/2015	1860	Alameda Printing S...		Unrestric...		Bank of Marin ...	155.49	199.29
Total Printing								199.29	199.29
CCD Banner									
Check	08/28/2015	1824	Island Print Express		Unrestric...		Bank of Marin ...	958.11	958.11
Check	09/28/2015	1829	Felicia Ann		Unrestric...		Bank of Marin ...	200.00	1,158.11
Total CCD Banner								1,158.11	1,158.11
Total Customer Appreciation Day								2,724.71	2,724.71

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July 2015 through June 2016

Type	Date	Num	Name	Memo	Class	Clr	Split	Amount	Balance
Spring Festival									
Trash/Recycle									
General Journal	05/09/2016		ACI	GJE for In-Ki...	Unrestric...		Sponsorship - ...	2,500.00	2,500.00
			Total Trash/Recycle					2,500.00	2,500.00
Poster									
Check	05/16/2016	2144	Alameda Printing S...	Spring Festiv...	Unrestric...		Bank of Marin ...	49.28	49.28
			Total Poster					49.28	49.28
Music Clearance									
Check	05/31/2016	2154	SESAC	Spring Festiv...	Unrestric...		Bank of Marin ...	148.00	148.00
			Total Music Clearance					148.00	148.00
Volunteer Tokens									
Check	05/05/2016	2118	Tucker's Ice Cream	For Volunteer...	Unrestric...		Bank of Marin ...	450.00	450.00
			Total Volunteer Tokens					450.00	450.00
Sales Tax									
Check	05/16/2016	2143	State Board of Equil...	Spring Festiv...	Unrestric...		Bank of Marin ...	2,355.00	2,355.00
			Total Sales Tax					2,355.00	2,355.00
Glasses									
Check	05/17/2016	2149	Saxco, Inc.	Spring Festiv...	Unrestric...		Bank of Marin ...	3,824.78	3,824.78
			Total Glasses					3,824.78	3,824.78
Beer									
Check	05/16/2016	2141	Alameda Island Bre...	Spring Festiv...	Unrestric...		Bank of Marin ...	3,150.00	3,150.00
			Total Beer					3,150.00	3,150.00
Wine									
Check	05/16/2016	2140	Rock Wall Winery	Spring Festiv...	Unrestric...		Bank of Marin ...	2,688.00	2,688.00
Check	05/31/2016	2161	Rock Wall Winery	Spring Festiv...	Unrestric...		Bank of Marin ...	100.00	2,788.00
			Total Wine					2,788.00	2,788.00
Cable Ad Production									
Check	05/31/2016	2159	West Advertising	Cable Ad Pro...	Unrestric...		Bank of Marin ...	1,100.00	1,100.00
			Total Cable Ad Production					1,100.00	1,100.00
Cable Ads									
Bill	05/31/2016	0003...	West Advertising		Unrestric...		Accounts Pay...	6,523.20	6,523.20
			Total Cable Ads					6,523.20	6,523.20
Banner									
Check	03/17/2016	2100	Joyce McConeghey	Cross Street ...	Unrestric...		Bank of Marin ...	88.60	88.60
			Total Banner					88.60	88.60
Permits									
Check	04/20/2016	2110	Bank of Marin	ABC Permit	Unrestric...		Bank of Marin ...	300.00	300.00

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 July 2015 through June 2016

Type	Date	Num	Name	Memo	Class	Clr	Split	Amount	Balance
Check	04/20/2016	2111	Alameda County En...	Spring Festiv...	Unrestric...		Bank of Marin ...	672.00	972.00
	Total Permits							972.00	972.00
	Drink Tickets								
Check	04/21/2016	2117	Robb Ratto	Drink Tickets	Unrestric...		Bank of Marin ...	55.11	55.11
	Total Drink Tickets							55.11	55.11
	Police								
Check	05/16/2016	2142	Alameda Police De...	Spring Festiv...	Unrestric...		Bank of Marin ...	1,632.00	1,632.00
	Total Police							1,632.00	1,632.00
	Tables/Chairs Rentals								
Check	05/31/2016	2160	Eckerstrom Product...	Tables/Chair...	Unrestric...		Bank of Marin ...	388.00	388.00
	Total Tables/Chairs Rentals							388.00	388.00
	Printing								
Check	04/21/2016	2117	Robb Ratto	Large Maps	Unrestric...		Bank of Marin ...	20.00	20.00
Check	05/09/2016	2137	Robb Ratto	Maps and Mu...	Unrestric...		Bank of Marin ...	55.03	75.03
Check	05/09/2016	2137	Robb Ratto	Maps	Unrestric...		Bank of Marin ...	7.18	82.21
	Total Printing							82.21	82.21
	Bike Parking								
Check	05/08/2016	2124	Hal Keenan	Bike Parking ...	Unrestric...		Bank of Marin ...	350.00	350.00
Check	05/08/2016	2125	Jim Weyeneth	Bike Parker	Unrestric...		Bank of Marin ...	100.00	450.00
Check	05/08/2016	2126	John Martin	Bike Parker	Unrestric...		Bank of Marin ...	100.00	550.00
	Total Bike Parking							550.00	550.00
	Electrical								
Check	05/08/2016	2123	Bill Armstrong	SF Electrician	Unrestric...	X	Bank of Marin ...	0.00	0.00
Check	05/08/2016	2127	Bill Armstrong	Spring Festiv...	Unrestric...		Bank of Marin ...	600.00	600.00
Check	05/08/2016	2128	Gerald Bashaw	Sspring Festi...	Unrestric...		Bank of Marin ...	400.00	1,000.00
	Total Electrical							1,000.00	1,000.00
	Lumpers								
Check	05/08/2016	2129	Jenifer Lipps	SF Lumper	Unrestric...		Bank of Marin ...	100.00	100.00
Check	05/08/2016	2130	Chris Swartzell	SF Lumper	Unrestric...		Bank of Marin ...	325.00	425.00
Check	05/08/2016	2131	Gabriel Johnson	SF Lumper	Unrestric...		Bank of Marin ...	325.00	750.00
Check	05/08/2016	2132	Caleb Salmon	SF Lumper	Unrestric...		Bank of Marin ...	325.00	1,075.00
Check	05/08/2016	2133	Elyse Fink	SF Lumper	Unrestric...		Bank of Marin ...	325.00	1,400.00
Check	05/08/2016	2134	Joshua Lipps	SF Lead Lum...	Unrestric...		Bank of Marin ...	500.00	1,900.00
	Total Lumpers							1,900.00	1,900.00
	Booths								
Check	05/31/2016	2160	Eckerstrom Product...	Spring Festiv...	Unrestric...		Bank of Marin ...	720.00	720.00
	Total Booths							720.00	720.00
	Truck Rental								
Check	05/09/2016	2137	Robb Ratto	Gas For Rent...	Unrestric...		Bank of Marin ...	11.05	11.05

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Type	Date	Num	Name	Memo	Class	Clr	Split	Amount	Balance
Check	05/09/2016	2137	Robb Ratto	Truck Rental	Unrestric...		Bank of Marin ...	119.43	130.48
	Total Truck Rental							130.48	130.48
	Ice								
Check	05/08/2016	2122	San Francisco Ice ...	SF Ice	Unrestric...		Bank of Marin ...	1,350.00	1,350.00
	Total Ice							1,350.00	1,350.00
	Supplies								
Check	02/26/2016	2086	Joyce McConeghey	Meetings/SF ...	Unrestric...		Bank of Marin ...	30.33	30.33
Check	04/21/2016	2114	Joyce McConeghey	OJ, zip ties, ...	Unrestric...		Bank of Marin ...	129.03	159.36
Check	04/21/2016	2117	Robb Ratto	Lamenating ...	Unrestric...		Bank of Marin ...	51.68	211.04
Check	05/09/2016	2136	Joyce McConeghey	Supplies	Restrict...		Bank of Marin ...	103.15	314.19
Check	05/09/2016	2137	Robb Ratto	Plastic Sheat...	Unrestric...		Bank of Marin ...	70.10	384.29
Check	05/09/2016	2137	Robb Ratto	Duct Tape	Unrestric...		Bank of Marin ...	32.93	417.22
	Total Supplies							417.22	417.22
	Advertising								
Check	05/17/2016	2150	Alameda Sun	Spring Festiv...	Unrestric...		Bank of Marin ...	149.00	149.00
Check	06/15/2016	2169	Bay Area News Gro...		Unrestric...		Bank of Marin ...	180.00	329.00
Check	06/15/2016	2168	San Francisco Chro...	Newspaper Ad	Unrestric...		Bank of Marin ...	1,961.00	2,290.00
	Total Advertising							2,290.00	2,290.00
	Misc.								
Check	11/03/2015	2012	Eckerstrom Product...		Unrestric...		Bank of Marin ...	299.75	299.75
Check	02/19/2016	2082	Robb Ratto	Alameda Cou...	Unrestric...		Bank of Marin ...	27.00	326.75
Check	04/21/2016	2117	Robb Ratto	Meeting with ...	Unrestric...		Bank of Marin ...	55.46	382.21
Check	05/09/2016	2137	Robb Ratto	Sand	Unrestric...		Bank of Marin ...	5.00	387.21
Check	05/09/2016	2137	Robb Ratto	Lunch with J...	Unrestric...		Bank of Marin ...	25.00	412.21
Check	05/09/2016	2137	Robb Ratto	Breakfast wit...	Unrestric...		Bank of Marin ...	68.27	480.48
Check	05/31/2016	2160	Eckerstrom Product...	Health Depar...	Unrestric...		Bank of Marin ...	105.50	585.98
Check	05/31/2016	2163	Lars G. Hansson	SF Sellers P...	Unrestric...		Bank of Marin ...	280.00	865.98
Check	06/15/2016	2171	Joyce McConeghey	Volunteer Lu...	Unrestric...		Bank of Marin ...	27.00	892.98
	Total Misc.							892.98	892.98
	Pressure Washing								
Check	05/20/2016	2151	Ultra Wash	Spring Festiv...	Unrestric...		Bank of Marin ...	2,900.00	2,900.00
	Total Pressure Washing							2,900.00	2,900.00
	Spring Festival - Other								
Bill	07/01/2015		Greenway Golf		Unrestric...		Accounts Pay...	868.53	868.53
	Total Spring Festival - Other							868.53	868.53
	Total Spring Festival							39,125.39	39,125.39
	Art & Wine Faire Expenses								
	Beer								
Check	07/31/2015	1794	Bay Area Beverage		Unrestric...		Bank of Marin ...	7,052.00	7,052.00

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Type	Date	Num	Name	Memo	Class	Clr	Split	Amount	Balance
			Total Beer					7,052.00	7,052.00
			Wine						
General Journal	07/28/2015		Rock Wall Winery	GJE for In-Ki...	Unrestric...		Advertising	5,000.00	5,000.00
Check	07/31/2015	1801	Rock Wall Winery		Unrestric...		Bank of Marin ...	3,519.47	8,519.47
			Total Wine					8,519.47	8,519.47
			Glasses						
Check	07/31/2015	1798	Saxco, Inc.		Unrestric...		Bank of Marin ...	6,551.08	6,551.08
Check	08/24/2015	1812	Saxco, Inc.		Unrestric...		Bank of Marin ...	49.79	6,600.87
			Total Glasses					6,600.87	6,600.87
			Sales Tax						
Check	08/31/2015	1827	State Board of Equil...		Unrestric...		Bank of Marin ...	4,548.00	4,548.00
			Total Sales Tax					4,548.00	4,548.00
			Tables/Chairs Rentals						
General Journal	07/28/2015		Eckerstrom Product...		Unrestric...		Other Current ...	476.50	476.50
			Total Tables/Chairs Rentals					476.50	476.50
			Sponsors Booths						
General Journal	07/28/2015		Eckerstrom Product...		Unrestric...		Other Current ...	1,250.00	1,250.00
			Total Sponsors Booths					1,250.00	1,250.00
			Lumpers						
Deposit	07/28/2015			Deposit	Unrestric...		Bank of Marin ...	3,450.00	3,450.00
			Total Lumpers					3,450.00	3,450.00
			Bike Monitors						
Deposit	07/28/2015			Deposit	Unrestric...		Bank of Marin ...	350.00	350.00
			Total Bike Monitors					350.00	350.00
			Dumpster						
General Journal	07/28/2015		ACI	GJE for In-Ki...	Unrestric...		Sponsorship - ...	2,500.00	2,500.00
			Total Dumpster					2,500.00	2,500.00
			Electician						
Deposit	07/28/2015			Deposit	Unrestric...		Bank of Marin ...	1,800.00	1,800.00
Check	07/31/2015	1802	Robb Ratto		Unrestric...		Bank of Marin ...	200.00	2,000.00
			Total Electician					2,000.00	2,000.00
			Advertising						
General Journal	07/28/2015		Alameda Theater	GJE for In-Ki...	Unrestric...		-SPLIT-	1,500.00	1,500.00
Check	08/24/2015	1815	San Francisco Chro...		Unrestric...		Bank of Marin ...	2,094.40	3,594.40
Check	08/24/2015	1818	Bay Area News Gro...		Unrestric...		Bank of Marin ...	180.00	3,774.40
Check	08/24/2015	1814	Parents Press		Unrestric...		Bank of Marin ...	2,994.00	6,768.40
Check	09/17/2015	1844	Alameda Sun		Unrestric...		Bank of Marin ...	149.25	6,917.65

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Type	Date	Num	Name	Memo	Class	Clr	Split	Amount	Balance
			Total Advertising					6,917.65	6,917.65
			Poster						
Check	07/31/2015	1800	Alameda Printing S...		Unrestric...		Bank of Marin ...	49.28	49.28
			Total Poster					49.28	49.28
			Security						
Check	07/31/2015	1796	Alameda Police De...		Unrestric...		Bank of Marin ...	1,632.00	1,632.00
			Total Security					1,632.00	1,632.00
			Rental Trucks						
Check	07/28/2015	1789	Joyce McConegley	AWF Supplies	Unrestric...		Bank of Marin ...	207.01	207.01
			Total Rental Trucks					207.01	207.01
			AWF Ice						
Check	07/28/2015	1788	San Francisco Ice ...		Unrestric...		Bank of Marin ...	1,995.00	1,995.00
			Total AWF Ice					1,995.00	1,995.00
			AWF T-Shirts						
Check	07/28/2015	1783	iPROMOTEu	Car show T-s...	Unrestric...	X	Bank of Marin ...	0.00	0.00
Check	07/28/2015	1784	Scott Balwin		Unrestric...		Bank of Marin ...	200.00	200.00
Check	08/14/2015	EFT	iPROMOTEu	Car show T-s...	Unrestric...		Bank of Marin ...	2,748.63	2,948.63
			Total AWF T-Shirts					2,948.63	2,948.63
			Misc.						
Check	07/15/2015	1778	Robb Ratto		Unrestric...		Bank of Marin ...	63.74	63.74
Check	07/20/2015	1781	Robb Ratto		Unrestric...		Bank of Marin ...	84.00	147.74
Check	07/28/2015	1785	Cresco Rental		Unrestric...		Bank of Marin ...	362.77	510.51
Check	07/28/2015	1787	Segway of Oakland		Unrestric...		Bank of Marin ...	217.91	728.42
Check	07/28/2015	1790	Tucker's Ice Cream		Unrestric...		Bank of Marin ...	75.00	803.42
Deposit	07/28/2015			Gas for Rent...	Unrestric...		Bank of Marin ...	20.00	823.42
General Journal	07/28/2015		Eckerstrom Product...		Unrestric...		Other Current ...	173.50	996.92
Check	07/31/2015	1804	SESAC		Unrestric...		Bank of Marin ...	148.00	1,144.92
Check	07/31/2015	1802	Robb Ratto		Unrestric...		Bank of Marin ...	27.00	1,171.92
Check	11/03/2015	2012	Eckerstrom Product...		Unrestric...		Bank of Marin ...	896.50	2,068.42
			Total Misc.					2,068.42	2,068.42
			Permits						
Check	07/08/2015	1771	Bank of Marin	AWF ABC Li...	Unrestric...		Bank of Marin ...	450.00	450.00
Check	07/08/2015	1772	County of Alameda ...		Unrestric...		Bank of Marin ...	720.00	1,170.00
Check	07/08/2015	1773	Alameda County En...		Unrestric...		Bank of Marin ...	240.00	1,410.00
			Total Permits					1,410.00	1,410.00
			Drink Tickets						
Check	07/01/2015	1768	Robb Ratto		Unrestric...		Bank of Marin ...	84.57	84.57
			Total Drink Tickets					84.57	84.57
			Supplies						

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Downtown Alameda Business Association
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Type	Date	Num	Name	Memo	Class	Clr	Split	Amount	Balance
Check	07/01/2015	1764	Joyce McConegley		Unrestric...		Bank of Marin ...	56.87	56.87
Check	07/15/2015	1774	Joyce McConegley	AWF Supplies	Unrestric...		Bank of Marin ...	209.93	266.80
Check	07/28/2015	1789	Joyce McConegley	AWF Supplies	Unrestric...		Bank of Marin ...	22.46	289.26
Check	08/24/2015	1813	Joyce McConegley		Unrestric...		Bank of Marin ...	12.87	302.13
Check	09/17/2015	1843	Joyce McConegley	AWF Supplies	Unrestric...		Bank of Marin ...	29.55	331.68
	Total Supplies							331.68	331.68
	Banners								
Check	07/01/2015	1763	Fast Signs		Unrestric...		Bank of Marin ...	93.08	93.08
	Total Banners							93.08	93.08
	Pressure Washing								
Check	07/31/2015	1799	Ultra Wash		Unrestric...		Bank of Marin ...	2,900.00	2,900.00
	Total Pressure Washing							2,900.00	2,900.00
	Cable Ads								
Check	09/03/2015	1831	West Advertising		Unrestric...		Bank of Marin ...	10,002.77	10,002.77
	Total Cable Ads							10,002.77	10,002.77
	Cable Ad Production								
Check	09/03/2015	1831	West Advertising		Unrestric...		Bank of Marin ...	1,100.00	1,100.00
	Total Cable Ad Production							1,100.00	1,100.00
	Total Art & Wine Faire Expenses							68,486.93	68,486.93
	Car Show								
	Cable Ad Production								
Check	10/23/2015	2007	West Advertising		Unrestric...		Bank of Marin ...	1,100.00	1,100.00
	Total Cable Ad Production							1,100.00	1,100.00
	Toilet Rental								
Check	10/08/2015	1867	National Constructi...	Car show por...	Unrestric...		Bank of Marin ...	306.60	306.60
	Total Toilet Rental							306.60	306.60
	Bike Parking								
Check	10/09/2015	1874	Hal Keenan		Unrestric...		Bank of Marin ...	240.00	240.00
	Total Bike Parking							240.00	240.00
	Cable Ads								
Check	10/09/2015	2019	West Advertising		Unrestric...		Bank of Marin ...	3,971.02	3,971.02
	Total Cable Ads							3,971.02	3,971.02
	Newspaper Ads								
Check	10/09/2015	2020	San Francisco Chro...	Newspaper Ad	Unrestric...		Bank of Marin ...	1,102.33	1,102.33
Check	10/09/2015	2021	Bay Area News Gro...		Unrestric...		Bank of Marin ...	180.00	1,282.33
Check	11/03/2015	2010	Alameda Sun		Unrestric...		Bank of Marin ...	149.50	1,431.83
	Total Newspaper Ads							1,431.83	1,431.83

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Type	Date	Num	Name	Memo	Class	Clr	Split	Amount	Balance
Music									
Check	10/09/2015	1875	Duffy Colline		Unrestric...		Bank of Marin ...	400.00	400.00
Check	10/09/2015	1876	Pete Fletcher		Unrestric...		Bank of Marin ...	400.00	800.00
Total Music								800.00	800.00
Lumpers									
Check	10/09/2015	1877	Joss Lip=s		Unrestric...		Bank of Marin ...	250.00	250.00
Check	10/09/2015	1878	Jenifer Lipps		Unrestric...		Bank of Marin ...	250.00	500.00
Total Lumpers								500.00	500.00
Poster									
Check	09/22/2015	1860	Alameda Printing S...		Unrestric...		Bank of Marin ...	49.28	49.28
Total Poster								49.28	49.28
Banner									
Check	09/22/2015	1849	Fast Signs		Unrestric...		Bank of Marin ...	93.08	93.08
Total Banner								93.08	93.08
Plates									
Check	10/12/2015	1880	iPROMOTEu	Car Show Pl...	Unrestric...		Bank of Marin ...	991.34	991.34
Total Plates								991.34	991.34
T-Shirts									
Check	09/17/2015	1842	Scott Balwin		Unrestric...		Bank of Marin ...	100.00	100.00
Check	10/12/2015	1881	iPROMOTEu	Car Show T-...	Unrestric...		Bank of Marin ...	5,708.48	5,808.48
Total T-Shirts								5,808.48	5,808.48
Misc.									
Check	09/04/2015	1835	Robb Ratto		Unrestric...		Bank of Marin ...	113.63	113.63
Check	09/22/2015	1861	Robb Ratto		Unrestric...		Bank of Marin ...	15.72	129.35
Check	09/29/2015	1863	Joyce McConegley	AWF Supplies	Unrestric...		Bank of Marin ...	181.69	311.04
Check	10/08/2015	1868	Piedmont Party Re...	Car show tab...	Unrestric...		Bank of Marin ...	148.15	459.19
Check	10/09/2015	1873	Betty Dittmer		Unrestric...		Bank of Marin ...	50.00	509.19
Check	10/09/2015	1879	Duane Watson	Donuts	Unrestric...		Bank of Marin ...	36.00	545.19
Check	10/09/2015	1879	Duane Watson	Placement M...	Unrestric...		Bank of Marin ...	30.66	575.85
Check	10/09/2015	1879	Duane Watson	Ice For Event...	Unrestric...		Bank of Marin ...	21.86	597.71
Check	10/09/2015	1879	Duane Watson	Groceries Fo...	Unrestric...		Bank of Marin ...	62.35	660.06
Check	10/09/2015	1879	Duane Watson	Meat For Eve...	Unrestric...		Bank of Marin ...	93.70	753.76
Check	10/12/2015	1882	Robb Ratto		Unrestric...		Bank of Marin ...	42.88	796.64
Check	10/23/2015	2004	SESAC		Unrestric...		Bank of Marin ...	74.00	870.64
Total Misc.								870.64	870.64
Printing									
Check	08/24/2015	1817	Alameda Printing S...		Unrestric...		Bank of Marin ...	93.08	93.08
Check	10/09/2015	1869	Alameda Printing S...		Unrestric...		Bank of Marin ...	48.00	141.08
Check	10/12/2015	1882	Robb Ratto		Unrestric...		Bank of Marin ...	35.38	176.46
Total Printing								176.46	176.46

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Type	Date	Num	Name	Memo	Class	Clr	Split	Amount	Balance
Postage									
Check	07/31/2015	1797	Joyce McConeghey		Unrestric...		Bank of Marin ...	218.43	218.43
Check	08/24/2015	1813	Joyce McConeghey		Unrestric...		Bank of Marin ...	19.60	238.03
Check	09/29/2015	1863	Joyce McConeghey	AWF Supplies	Unrestric...		Bank of Marin ...	148.75	386.78
Total Postage								386.78	386.78
Total Car Show								16,725.51	16,725.51
Total Event Expenses								127,062.54	127,062.54
Shopping Guide - Sponsored									
Check	05/16/2016	2139	Island Print Express	Shopping Gui...	Unrestric...		Bank of Marin ...	2,174.10	2,174.10
Total Shopping Guide - Sponsored								2,174.10	2,174.10
Executive Director's Salary									
Check	07/01/2015	1766	Robert S. Ratto		Unrestric...		Bank of Marin ...	3,357.00	3,357.00
Check	07/15/2015	1777	Robert S. Ratto		Unrestric...		Bank of Marin ...	3,357.00	6,714.00
Check	07/31/2015	1792	Robert S. Ratto		Unrestric...		Bank of Marin ...	3,357.00	10,071.00
Check	08/14/2015	1811	Robert S. Ratto		Unrestric...		Bank of Marin ...	3,357.00	13,428.00
Check	08/26/2015	1820	Robert S. Ratto		Unrestric...		Bank of Marin ...	3,357.00	16,785.00
Check	09/11/2015	1838	Robert S. Ratto		Unrestric...		Bank of Marin ...	3,357.00	20,142.00
Check	09/25/2015	1841	Robert S. Ratto		Unrestric...		Bank of Marin ...	3,357.00	23,499.00
Check	10/09/2015	1871	Robert S. Ratto		Unrestric...		Bank of Marin ...	3,357.00	26,856.00
Check	10/22/2015	1885	Robert S. Ratto		Unrestric...		Bank of Marin ...	3,357.00	30,213.00
Check	11/04/2015	2014	Robert S. Ratto		Unrestric...		Bank of Marin ...	3,357.00	33,570.00
Check	11/19/2015	2030	Robert S. Ratto	Gross	Unrestric...		Bank of Marin ...	3,357.00	36,927.00
Check	12/02/2015	2039	Robert S. Ratto	Gross	Unrestric...		Bank of Marin ...	3,357.00	40,284.00
Check	12/16/2015	2051	Robert S. Ratto	Gross	Unrestric...		Bank of Marin ...	3,357.00	43,641.00
General Journal	01/03/2016			Rob	Unrestric...		Membership ...	3,357.00	46,998.00
General Journal	01/17/2016			Rob	Unrestric...		Membership ...	3,357.00	50,355.00
General Journal	01/29/2016			Rob	Unrestric...		Membership ...	3,357.00	53,712.00
General Journal	02/12/2016			Rob	Unrestric...		Membership ...	3,357.00	57,069.00
General Journal	02/26/2016			Robb	Unrestric...		Membership ...	3,357.00	60,426.00
General Journal	03/11/2016			Robb	Unrestric...		Membership ...	3,357.00	63,783.00
General Journal	03/25/2016			Robb	Unrestric...		Membership ...	3,357.00	67,140.00
General Journal	04/08/2016			Robb	Unrestric...		Membership ...	3,357.00	70,497.00
General Journal	04/22/2016			Robb	Unrestric...		Membership ...	3,357.00	73,854.00
General Journal	05/06/2016			Robb	Unrestric...		Membership ...	3,357.00	77,211.00
General Journal	05/20/2016			Robb	Unrestric...		Membership ...	3,357.00	80,568.00
General Journal	06/03/2016			Robb	Unrestric...		Membership ...	3,357.00	83,925.00
General Journal	06/17/2016			Robb	Unrestric...		Membership ...	3,357.00	87,282.00
Total Executive Director's Salary								87,282.00	87,282.00
Payroll Taxes									
Check	07/01/2015	1766	Robert S. Ratto		Unrestric...		Bank of Marin ...	256.86	256.86
General Journal	07/01/2015			Reverse of G...	Unrestric...		Petty Cash	421.50	678.36
Check	07/15/2015	1777	Robert S. Ratto		Unrestric...		Bank of Marin ...	256.86	935.22
Check	07/31/2015	1792	Robert S. Ratto		Unrestric...		Bank of Marin ...	256.86	1,192.08
Check	08/14/2015	1811	Robert S. Ratto		Unrestric...		Bank of Marin ...	256.86	1,448.94

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Type	Date	Num	Name	Memo	Class	Clr	Split	Amount	Balance
Check	08/26/2015	1820	Robert S. Ratto		Unrestric...		Bank of Marin ...	256.86	1,705.80
Check	09/11/2015	1838	Robert S. Ratto		Unrestric...		Bank of Marin ...	256.86	1,962.66
Check	09/25/2015	1841	Robert S. Ratto		Unrestric...		Bank of Marin ...	256.86	2,219.52
Check	10/09/2015	1871	Robert S. Ratto		Unrestric...		Bank of Marin ...	256.86	2,476.38
Check	10/09/2015	1870	Robert S. Ratto		Unrestric...		Bank of Marin ...	76.50	2,552.88
Check	10/22/2015	1885	Robert S. Ratto		Unrestric...		Bank of Marin ...	256.81	2,809.69
Check	11/04/2015	2014	Robert S. Ratto		Unrestric...		Bank of Marin ...	342.43	3,152.12
Check	11/04/2015	2015	Robert S. Ratto		Unrestric...		Bank of Marin ...	76.50	3,228.62
Check	11/19/2015	2027	EDD		Unrestric...		Bank of Marin ...	234.55	3,463.17
Check	11/19/2015	2029	Joyce McConegley	Employer tax...	Restrict...		Bank of Marin ...	77.11	3,540.28
Check	11/19/2015	2030	Robert S. Ratto	Employer tax...	Unrestric...		Bank of Marin ...	256.81	3,797.09
Check	12/02/2015	2039	Robert S. Ratto	Employer tax...	Unrestric...		Bank of Marin ...	342.38	4,139.47
Check	12/02/2015	2038	Robert S. Ratto	Salary	Unrestric...		Bank of Marin ...	76.50	4,215.97
Check	12/16/2015	2051	Robert S. Ratto	Employer tax...	Unrestric...		Bank of Marin ...	256.81	4,472.78
General Journal	01/03/2016			Total Employ...	Unrestric...		Membership ...	629.58	5,102.36
General Journal	01/17/2016			Total Employ...	Unrestric...		Membership ...	436.54	5,538.90
General Journal	01/29/2016			Total Employ...	Unrestric...		Membership ...	256.81	5,795.71
Check	02/12/2016	2077	EDD	Payroll Taxes	Unrestric...		Bank of Marin ...	211.76	6,007.47
General Journal	02/12/2016			Total Employ...	Unrestric...		Membership ...	333.32	6,340.79
General Journal	02/26/2016			Total Employ...	Unrestric...		Membership ...	256.80	6,597.59
Check	03/11/2016	2095	EDD	EDD Payment	Unrestric...		Bank of Marin ...	1.00	6,598.59
General Journal	03/11/2016			Total Employ...	Unrestric...		Membership ...	333.31	6,931.90
General Journal	03/25/2016			Total Employ...	Unrestric...		Membership ...	256.82	7,188.72
General Journal	04/08/2016			Total Employ...	Unrestric...		Membership ...	333.30	7,522.02
Check	04/21/2016	2116	Internal Revenue S...	941 Payment	Restrict...		Bank of Marin ...	317.36	7,839.38
General Journal	04/22/2016			Total Employ...	Unrestric...		Membership ...	256.82	8,096.20
General Journal	05/06/2016			Total Employ...	Unrestric...		Membership ...	333.31	8,429.51
General Journal	05/20/2016			Total Employ...	Unrestric...		Membership ...	256.80	8,686.31
General Journal	06/03/2016			Total Employ...	Unrestric...		Membership ...	333.32	9,019.63
General Journal	06/17/2016			Total Employ...	Unrestric...		Membership ...	256.80	9,276.43
Total Payroll Taxes								9,276.43	9,276.43
Staff Benefits									
Check	07/01/2015	1767	Robert S. Ratto		Unrestric...		Bank of Marin ...	1,000.00	1,000.00
Check	08/01/2015	1793	Robb Ratto		Unrestric...		Bank of Marin ...	1,000.00	2,000.00
General Journal	09/01/2015		Robb Ratto		Unrestric...		Other Prepaid ...	1,000.00	3,000.00
Check	10/09/2015	1870	Robert S. Ratto		Unrestric...		Bank of Marin ...	1,000.00	4,000.00
Check	11/04/2015	2015	Robert S. Ratto		Unrestric...		Bank of Marin ...	1,000.00	5,000.00
Check	12/02/2015	2038	Robert S. Ratto	Salary	Unrestric...		Bank of Marin ...	1,000.00	6,000.00
General Journal	01/03/2016			Medical Reim...	Unrestric...		Membership ...	1,000.00	7,000.00
General Journal	02/12/2016			Total Employ...	Unrestric...		Membership ...	1,000.00	8,000.00
General Journal	03/11/2016			Medical Reim...	Unrestric...		Membership ...	1,000.00	9,000.00
General Journal	04/08/2016			Medical Reim...	Unrestric...		Membership ...	1,000.00	10,000.00
General Journal	05/06/2016			Medical Reim...	Unrestric...		Membership ...	1,000.00	11,000.00
General Journal	06/03/2016			Medical Reim...	Unrestric...		Membership ...	1,000.00	12,000.00
General Journal	06/17/2016			Medical Reim...	Unrestric...		Membership ...	0.00	12,000.00
Total Staff Benefits								12,000.00	12,000.00
power box Art									

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**Downtown Alameda Business Association
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July 2015 through June 2016**

Type	Date	Num	Name	Memo	Class	Clr	Split	Amount	Balance
Check	01/21/2016	2067	Rhythmix Cultural ...	For the Wate...	Unrestric...		Bank of Marin ...	2,500.00	2,500.00
Total power box Art								2,500.00	2,500.00
Meetings/Training									
Check	07/15/2015	1778	Robb Ratto		Unrestric...		Bank of Marin ...	90.80	90.80
Check	07/31/2015	1802	Robb Ratto		Unrestric...		Bank of Marin ...	47.12	137.92
Check	08/26/2015	1822	Robb Ratto		Unrestric...		Bank of Marin ...	62.65	200.57
Check	09/04/2015	1833	Robb Ratto		Unrestric...		Bank of Marin ...	79.44	280.01
Check	09/04/2015	1835	Robb Ratto		Unrestric...		Bank of Marin ...	25.00	305.01
Check	09/17/2015	1843	Joyce McConegley	AWF Supplies	Unrestric...		Bank of Marin ...	22.91	327.92
Check	09/22/2015	1861	Robb Ratto		Unrestric...		Bank of Marin ...	36.74	364.66
Check	09/30/2015	1865	R&J Catering		Unrestric...		Bank of Marin ...	200.00	564.66
Check	10/12/2015	1882	Robb Ratto		Unrestric...		Bank of Marin ...	101.83	666.49
Check	11/05/2015	2017	Robb Ratto		Unrestric...		Bank of Marin ...	85.05	751.54
Check	11/19/2015	2026	Joyce McConegley		Unrestric...		Bank of Marin ...	22.71	774.25
Check	11/20/2015	2033	Robb Ratto		Unrestric...		Bank of Marin ...	64.83	839.08
Check	12/02/2015	2037	Robb Ratto		Unrestric...		Bank of Marin ...	56.51	895.59
Check	12/17/2015	2052	Robb Ratto	Supplies/Mee...	Unrestric...		Bank of Marin ...	64.83	960.42
Check	12/29/2015	2055	Robb Ratto	Supplies/Mee...	Unrestric...		Bank of Marin ...	73.10	1,033.52
Check	01/15/2016	2066	Robb Ratto	Meeting with ...	Restrict...		Bank of Marin ...	31.27	1,064.79
Check	01/22/2016	2069	Robb Ratto	Meetins & Mi...	Unrestric...		Bank of Marin ...	138.87	1,203.66
Check	01/29/2016	2073	Robb Ratto	Supplies/Mee...	Unrestric...		Bank of Marin ...	128.64	1,332.30
Check	02/12/2016	2081	Robb Ratto	Meetings	Unrestric...		Bank of Marin ...	45.81	1,378.11
Check	02/19/2016	2082	Robb Ratto	Meeting with ...	Unrestric...		Bank of Marin ...	29.33	1,407.44
Check	02/26/2016	2084	Robb Ratto	Void Check	Unrestric...	X	Bank of Marin ...	0.00	1,407.44
Check	02/26/2016	2085	California Main Stre...	Conference f...	Unrestric...		Bank of Marin ...	450.00	1,857.44
Check	02/26/2016	2086	Joyce McConeghey	Meetings/SF ...	Unrestric...		Bank of Marin ...	9.98	1,867.42
Check	03/04/2016	2089	Robb Ratto	VOID: Meetin...	Unrestric...	X	Bank of Marin ...	0.00	1,867.42
Check	03/05/2016	2091	Robb Ratto	Meetings	Unrestric...		Bank of Marin ...	30.83	1,898.25
Check	03/11/2016	2096	Robb Ratto	Meetings	Unrestric...		Bank of Marin ...	45.68	1,943.93
Check	03/17/2016	2101	Robb Ratto	Meetings	Unrestric...		Bank of Marin ...	55.49	1,999.42
Check	03/31/2016	2108	Robb Ratto	March Board ...	Unrestric...		Bank of Marin ...	9.58	2,009.00
Check	04/21/2016	2117	Robb Ratto	Court House ...	Unrestric...		Bank of Marin ...	70.04	2,079.04
Check	05/09/2016	2137	Robb Ratto	Meetings	Unrestric...		Bank of Marin ...	14.45	2,093.49
Check	05/31/2016	2164	Robb Ratto	Meetings	Unrestric...		Bank of Marin ...	84.44	2,177.93
Check	06/15/2016	2171	Joyce McConeghey	Meeting Food	Unrestric...		Bank of Marin ...	48.41	2,226.34
Check	06/30/2016	2177	Robb Ratto	Brd Meeting	Unrestric...		Bank of Marin ...	5.48	2,231.82
Total Meetings/Training								2,231.82	2,231.82
Total UNRESTRICTED EXPENSES								242,526.89	242,526.89
RESTRICTED EXPENSES									
Utilities									
Phone/Internet									
Check	08/14/2015	EFT	Comcast		Restrict...		Bank of Marin ...	154.61	154.61
Check	08/14/2015	EFT	Comcast		Restrict...		Bank of Marin ...	154.53	309.14
Check	09/15/2015	EFT	Comcast		Restrict...		Bank of Marin ...	152.89	462.03
Check	10/15/2015	EFT	Comcast		Restrict...		Bank of Marin ...	157.64	619.67
Check	11/17/2015	EFT	Comcast		Unrestric...		Bank of Marin ...	153.70	773.37

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Downtown Alameda Business Association
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Type	Date	Num	Name	Memo	Class	Clr	Split	Amount	Balance
Check	12/17/2015	EFT	Comcast		Unrestric...		Bank of Marin ...	158.45	931.82
Check	01/07/2016	EFT	Comcast		Unrestric...		Bank of Marin ...	161.92	1,093.74
Check	02/12/2016	EFT	Comcast	Internet/Phone	Unrestric...		Bank of Marin ...	159.62	1,253.36
Check	03/17/2016	EFT	Comcast	Internet/Phone	Unrestric...		Bank of Marin ...	159.62	1,412.98
Check	04/18/2016	EFT	Comcast	Internet/Phone	Unrestric...		Bank of Marin ...	164.37	1,577.35
Check	05/12/2016	EFT	Comcast	Internet/Phone	Unrestric...		Bank of Marin ...	164.34	1,741.69
Check	06/10/2016	EFT	Comcast	Internet/Phone	Unrestric...		Bank of Marin ...	159.59	1,901.28
Total Phone/Internet								1,901.28	1,901.28
Office Water									
Check	07/31/2015	1808	Arrowhead Water		Restrict...		Bank of Marin ...	57.63	57.63
Check	09/17/2015	1848	Arrowhead Water		Restrict...		Bank of Marin ...	54.48	112.11
Check	11/03/2015	2011	Ready Refresh		Unrestric...		Bank of Marin ...	34.49	146.60
Check	12/02/2015	2036	Ready Refresh	Expenses	Unrestric...		Bank of Marin ...	26.61	173.21
Check	12/29/2015	2056	Ready Refresh	Expenses	Unrestric...		Bank of Marin ...	14.78	187.99
Check	01/29/2016	2071	Ready Refresh	Meetins & Mi...	Unrestric...		Bank of Marin ...	34.49	222.48
Check	02/26/2016	2087	Ready Refresh	Office Water	Unrestric...		Bank of Marin ...	36.71	259.19
Check	03/31/2016	2106	Ready Refresh	April Water B...	Unrestric...		Bank of Marin ...	37.71	296.90
Bill	04/14/2016	16D5...	Ready Refresh		Unrestric...		Accounts Pay...	14.78	311.68
Check	06/15/2016	2170	Ready Refresh	April Water B...	Unrestric...		Bank of Marin ...	37.71	349.39
Total Office Water								349.39	349.39
Total Utilities								2,250.67	2,250.67
Membership									
Administration Expenses									
Check	11/05/2015	2016	Maureen Weaver		Restrict...		Bank of Marin ...	129.87	129.87
Check	11/19/2015	2026	Joyce McConegley		Restrict...		Bank of Marin ...	46.84	176.71
Check	12/29/2015	2055	Robb Ratto	Supplies/Mee...	Restrict...		Bank of Marin ...	35.00	211.71
Check	01/05/2016	2080	Robb Ratto	Supplies/Mee...	Restrict...		Bank of Marin ...	40.00	251.71
Check	01/15/2016	2065	Joyce McConegley	Stamps/Mem...	Restrict...		Bank of Marin ...	46.16	297.87
Check	02/26/2016	2086	Joyce McConegley	Meetings/SF ...	Restrict...		Bank of Marin ...	55.14	353.01
Total Administration Expenses								353.01	353.01
Holiday/Awards Dinner Expenses									
Check	09/30/2015	1864	Elks Lodge	Bar Tenders	Restrict...		Bank of Marin ...	100.00	100.00
Check	11/20/2015	2032	Alameda Best Cate...		Restrict...		Bank of Marin ...	2,100.00	2,200.00
Check	12/03/2015	2040	Elks Lodge		Restrict...		Bank of Marin ...	150.00	2,350.00
Check	12/03/2015	2041	Robb Ratto		Restrict...		Bank of Marin ...	150.00	2,500.00
Check	12/03/2015	2041	Robb Ratto		Restrict...		Bank of Marin ...	100.00	2,600.00
Check	12/04/2015	2043	Robb Ratto	Holiday Party	Restrict...		Bank of Marin ...	100.00	2,700.00
Total Holiday/Awards Dinner Expenses								2,700.00	2,700.00
Mixer Expenses									
Check	07/15/2015	1774	Joyce McConegley	AWF Supplies	Restrict...		Bank of Marin ...	53.98	53.98
Check	08/24/2015	1813	Joyce McConegley		Restrict...		Bank of Marin ...	58.68	112.66
Check	09/04/2015	1834	Joyce McConegley	AWF Supplies	Restrict...		Bank of Marin ...	55.82	168.48
Check	09/04/2015	1835	Robb Ratto		Restrict...		Bank of Marin ...	60.00	228.48
Check	10/12/2015	1883	Joyce McConegley	AWF Supplies	Restrict...		Bank of Marin ...	48.09	276.57

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Downtown Alameda Business Association
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Type	Date	Num	Name	Memo	Class	Clr	Split	Amount	Balance
Check	11/20/2015	2033	Robb Ratto		Restrict...		Bank of Marin ...	9.95	286.52
Check	12/08/2015	2046	Scott Erwin	Mixer Tip	Restrict...		Bank of Marin ...	60.00	346.52
Check	01/22/2016	2069	Robb Ratto	Meetins & Mi...	Restrict...		Bank of Marin ...	60.00	406.52
Check	03/17/2016	2100	Joyce McConeghey	Committee M...	Restrict...		Bank of Marin ...	68.14	474.66
Check	04/21/2016	2114	Joyce McConeghey	Committee M...	Restrict...		Bank of Marin ...	64.33	538.99
Total Mixer Expenses								538.99	538.99
New Member Packet Expenses									
Check	10/09/2015	2022	Alameda Printing S...		Restrict...		Bank of Marin ...	26.28	26.28
Check	04/21/2016	2113	Alameda Printing S...	VOID: Welco...	Restrict...	X	Bank of Marin ...	0.00	26.28
Total New Member Packet Expenses								26.28	26.28
Recognition Awards									
Check	12/02/2015	2037	Robb Ratto		Restrict...		Bank of Marin ...	49.22	49.22
Total Recognition Awards								49.22	49.22
Total Membership								3,667.50	3,667.50
Promotion Committee Expenses									
Theatre Ad									
Check	11/19/2015	2025	Alameda Entertain...		Restrict...		Bank of Marin ...	1,800.00	1,800.00
Total Theatre Ad								1,800.00	1,800.00
Website									
Check	07/15/2015	1779	Jiva Creative		Restrict...		Bank of Marin ...	90.00	90.00
Check	11/19/2015	2028	LocalOn Inc.		Restrict...		Bank of Marin ...	995.00	1,085.00
Check	11/19/2015	2031	LocalOn Inc.		Restrict...		Bank of Marin ...	205.00	1,290.00
Check	01/15/2016	2062	Jiva Creative	Web Hosting	Restrict...		Bank of Marin ...	90.00	1,380.00
Check	01/15/2016	2063	West Advertising	Quarterly Fe...	Restrict...		Bank of Marin ...	12.99	1,392.99
Check	01/15/2016	2063	West Advertising	Quarterly Fe...	Restrict...		Bank of Marin ...	247.50	1,640.49
Check	03/31/2016	2108	Robb Ratto	Meeting With...	Restrict...		Bank of Marin ...	54.24	1,694.73
Check	05/16/2016	2147	Stephanie L. Prothero	New Email A...	Restrict...		Bank of Marin ...	95.88	1,790.61
Check	05/31/2016	2159	West Advertising	Park Street d...	Restrict...		Bank of Marin ...	50.00	1,840.61
Total Website								1,840.61	1,840.61
Shopping Guide									
Check	09/22/2015	1859	Alameda Printing S...		Restrict...		Bank of Marin ...	739.13	739.13
Check	12/29/2015	2057	Ona Lorraine		Restrict...		Bank of Marin ...	150.00	889.13
Check	03/04/2016	2090	Ona Lorraine	VOID: Shopp...	Restrict...	X	Bank of Marin ...	0.00	889.13
Check	03/05/2016	2093	Ona Lorraine	Shopping Gui...	Restrict...		Bank of Marin ...	540.00	1,429.13
Check	03/23/2016	2104	Ona Lorraine	Shopping Gui...	Restrict...		Bank of Marin ...	200.00	1,629.13
Total Shopping Guide								1,629.13	1,629.13
Merchant Events									
Check	12/02/2015	2034	Alameda Printing S...	Small Busins...	Restrict...		Bank of Marin ...	32.85	32.85
Check	01/04/2016	2058	Betty Dittmer	Parking Mete...	Restrict...		Bank of Marin ...	150.00	182.85
Check	06/21/2016	2173	Jessica Warren	2nd Friday M...	Restrict...		Bank of Marin ...	125.00	307.85
Total Merchant Events								307.85	307.85

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Downtown Alameda Business Association

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Type	Date	Num	Name	Memo	Class	Clr	Split	Amount	Balance
Ad Agency Costs									
Check	07/31/2015	1807	West Advertising		Restrict...		Bank of Marin ...	500.00	500.00
Check	09/03/2015	1831	West Advertising		Restrict...		Bank of Marin ...	852.50	1,352.50
Check	09/22/2015	1857	West Advertising		Restrict...		Bank of Marin ...	412.50	1,765.00
Check	10/09/2015	2019	West Advertising		Restrict...		Bank of Marin ...	220.00	1,985.00
Check	10/23/2015	2007	West Advertising		Restrict...		Bank of Marin ...	110.00	2,095.00
Check	10/23/2015	2007	West Advertising		Restrict...		Bank of Marin ...	330.00	2,425.00
Check	10/23/2015	2007	West Advertising		Restrict...		Bank of Marin ...	165.00	2,590.00
Check	10/23/2015	2007	West Advertising		Restrict...		Bank of Marin ...	500.00	3,090.00
Check	01/15/2016	2063	West Advertising	Quarterly Fe...	Restrict...		Bank of Marin ...	500.00	3,590.00
Check	05/31/2016	2159	West Advertising	2nd quarter P...	Restrict...		Bank of Marin ...	500.00	4,090.00
Check	05/31/2016	2159	West Advertising	Quarterly Fe...	Restrict...		Bank of Marin ...	472.87	4,562.87
Total Ad Agency Costs								4,562.87	4,562.87
Total Promotion Committee Expenses								10,140.46	10,140.46
Maint. & Improvement Comm.-REST									
Check	09/28/2015	1830	Felicia Ann		Restrict...		Bank of Marin ...	2,500.00	2,500.00
Check	09/28/2015	1830	Felicia Ann		Restrict...		Bank of Marin ...	3,000.00	5,500.00
Check	04/21/2016	2115	Artistic Collectables		Restrict...		Bank of Marin ...	2,272.25	7,772.25
Check	06/03/2016	2165	Artistic Collectables	Banners - 2n...	Restrict...		Bank of Marin ...	2,269.00	10,041.25
Check	06/30/2016	2178	Reece's Installation	Banner Instal...	Restrict...		Bank of Marin ...	3,043.54	13,084.79
Total Maint. & Improvement Comm.-REST								13,084.79	13,084.79
Printing/Postage									
Check	10/09/2015	1869	Alameda Printing S...		Restrict...		Bank of Marin ...	131.58	131.58
Check	05/09/2016	2137	Robb Ratto	Spring Festiv...	Restrict...		Bank of Marin ...	24.64	156.22
Check	05/16/2016	2144	Alameda Printing S...	Board Packet	Restrict...		Bank of Marin ...	10.40	166.62
Total Printing/Postage								166.62	166.62
Membership Manager Wages									
Check	07/01/2015	1765	Joyce McConeghey		Restrict...		Bank of Marin ...	960.00	960.00
Check	07/15/2015	1776	Joyce McConeghey		Restrict...		Bank of Marin ...	960.00	1,920.00
Check	07/31/2015	1791	Joyce McConeghey		Restrict...		Bank of Marin ...	960.00	2,880.00
Check	08/24/2015	1810	Joyce McConeghey		Restrict...		Bank of Marin ...	960.00	3,840.00
Check	08/28/2015	1828	Joyce McConeghey		Restrict...		Bank of Marin ...	960.00	4,800.00
Check	09/04/2015	1836	Joyce McConeghey		Restrict...		Bank of Marin ...	1,008.00	5,808.00
Check	09/22/2015	1862	Joyce McConeghey		Restrict...		Bank of Marin ...	1,008.00	6,816.00
Check	10/09/2015	1872	Joyce McConeghey		Restrict...		Bank of Marin ...	1,008.00	7,824.00
Check	10/22/2015	1884	Joyce McConeghey		Restrict...		Bank of Marin ...	1,008.00	8,832.00
Check	11/04/2015	2013	Joyce McConeghey		Restrict...		Bank of Marin ...	1,008.00	9,840.00
Check	11/19/2015	2029	Joyce McConegley	gross	Restrict...		Bank of Marin ...	1,008.00	10,848.00
Check	12/02/2015	2035	Joyce McConeghey	Salary	Restrict...		Bank of Marin ...	1,008.00	11,856.00
Check	12/16/2015	2049	Joyce McConeghey	Salary	Restrict...		Bank of Marin ...	1,008.00	12,864.00
General Journal	01/03/2016		Joyce	Joyce	Restrict...		-SPLIT-	1,108.00	13,972.00
General Journal	01/17/2016		Joyce	Joyce	Restrict...		-SPLIT-	1,108.00	15,080.00
General Journal	01/29/2016		Joyce	Joyce	Restrict...		-SPLIT-	1,108.00	16,188.00
General Journal	02/12/2016		Joyce	Joyce	Restrict...		-SPLIT-	1,108.00	17,296.00
General Journal	02/26/2016		Joyce	Joyce	Restrict...		-SPLIT-	1,108.00	18,404.00

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Downtown Alameda Business Association
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 July 2015 through June 2016

Type	Date	Num	Name	Memo	Class	Cir	Split	Amount	Balance
General Journal	03/11/2016			Joyce	Restrict...		-SPLIT-	2,008.00	20,412.00
General Journal	03/25/2016			Joyce	Restrict...		-SPLIT-	1,108.00	21,520.00
General Journal	04/08/2016			Joyce	Restrict...		-SPLIT-	1,158.00	22,678.00
General Journal	04/22/2016			Joyce	Restrict...		-SPLIT-	1,158.00	23,836.00
General Journal	05/06/2016			Joyce	Restrict...		-SPLIT-	1,158.00	24,994.00
General Journal	05/20/2016			Joyce	Restrict...		-SPLIT-	1,158.00	26,152.00
General Journal	06/03/2016			Joyce	Restrict...		-SPLIT-	1,108.00	27,260.00
General Journal	06/17/2016			Joyce	Restrict...		-SPLIT-	1,108.00	28,368.00
Total Membership Manager Wages								28,368.00	28,368.00
Employer Taxes									
Check	07/01/2015	1765	Joyce McConeghey		Restrict...		Bank of Marin ...	73.44	73.44
Check	07/15/2015	1776	Joyce McConeghey		Restrict...		Bank of Marin ...	73.44	146.88
Check	07/31/2015	1791	Joyce McConeghey		Restrict...		Bank of Marin ...	73.44	220.32
Check	08/24/2015	1810	Joyce McConeghey		Restrict...		Bank of Marin ...	73.44	293.76
Check	08/28/2015	1828	Joyce McConeghey		Restrict...		Bank of Marin ...	73.44	367.20
Check	09/04/2015	1836	Joyce McConeghey		Restrict...		Bank of Marin ...	77.11	444.31
Check	09/22/2015	1862	Joyce McConeghey		Restrict...		Bank of Marin ...	77.11	521.42
Check	10/09/2015	1872	Joyce McConeghey		Restrict...		Bank of Marin ...	77.11	598.53
Check	10/22/2015	1884	Joyce McConeghey		Restrict...		Bank of Marin ...	77.11	675.64
Check	11/04/2015	2013	Joyce McConeghey		Restrict...		Bank of Marin ...	77.11	752.75
Check	12/02/2015	2035	Joyce McConeghey	Salary	Restrict...		Bank of Marin ...	77.11	829.86
Check	12/16/2015	2049	Joyce McConeghey	Salary	Restrict...		Bank of Marin ...	77.11	906.97
Check	12/17/2015	2053	Internal Revenue S...	941 payment	Unrestrict...		Bank of Marin ...	244.76	1,151.73
General Journal	01/03/2016			Total Employ...	Restrict...		Membership ...	160.12	1,311.85
General Journal	01/17/2016			Total Employ...	Restrict...		Membership ...	160.09	1,471.94
General Journal	01/29/2016			Total Employ...	Restrict...		Membership ...	160.11	1,632.05
General Journal	02/12/2016			Total Employ...	Restrict...		Membership ...	160.09	1,792.14
General Journal	02/26/2016			Total Employ...	Restrict...		Membership ...	160.12	1,952.26
General Journal	03/11/2016			Total Employ...	Restrict...		Membership ...	252.90	2,205.16
General Journal	03/25/2016			Total Employ...	Restrict...		Membership ...	84.75	2,289.91
General Journal	04/08/2016			Total Employ...	Restrict...		Membership ...	88.59	2,378.50
General Journal	04/22/2016			Total Employ...	Restrict...		Membership ...	88.58	2,467.08
General Journal	05/06/2016			Total Employ...	Restrict...		Membership ...	88.60	2,555.68
General Journal	05/20/2016			Total Employ...	Restrict...		Membership ...	88.59	2,644.27
General Journal	06/03/2016			Total Employ...	Restrict...		Membership ...	84.75	2,729.02
General Journal	06/17/2016			Total Employ...	Restrict...		Membership ...	84.77	2,813.79
Total Employer Taxes								2,813.79	2,813.79
Workers Comp.									
Check	12/11/2015	2048	State Fund	Workers Co...	Restrict...		Bank of Marin ...	366.86	366.86
Check	12/29/2015	EFT	State Fund	Workers Co...	Restrict...		Bank of Marin ...	994.05	1,360.91
Check	02/01/2016	2075	State Fund		Restrict...		Bank of Marin ...	270.95	1,631.86
Total Workers Comp.								1,631.86	1,631.86
Audit/Accounting Tax/Audit									
Check	07/31/2015	1806	Lars G. Hansson		Restrict...		Bank of Marin ...	135.00	135.00
Check	08/24/2015	1816	Lars G. Hansson		Restrict...		Bank of Marin ...	540.00	675.00

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Accrual Basis

Downtown Alameda Business Association
Profit & Loss Detail
 July 2015 through June 2016

Type	Date	Num	Name	Memo	Class	Clr	Split	Amount	Balance
Check	09/04/2015	1832	Donald R. White, T...		Unrestrict...		Bank of Marin ...	24.45	699.45
Check	09/17/2015	1846	Lars G. Hansson		Restrict...		Bank of Marin ...	135.00	834.45
Check	09/30/2015	EFT	Bank of Marin		Restrict...		Bank of Marin ...	22.60	857.05
Check	10/09/2015	2024	Lars G. Hansson		Restrict...		Bank of Marin ...	270.00	1,127.05
Check	10/23/2015	2005	Alameda County Ta...		Restrict...		Bank of Marin ...	52.44	1,179.49
Check	02/12/2016	2080	Lars G. Hansson	End of Year ...	Restrict...		Bank of Marin ...	2,025.00	3,204.49
Check	05/31/2016	2155	Lars G. Hansson	Preparation o...	Restrict...		Bank of Marin ...	560.00	3,764.49
Total Tax/Audit								3,764.49	3,764.49
Accounting/Bookkeeping									
Check	08/24/2015	1809	Tamara Powell		Restrict...		Bank of Marin ...	100.00	100.00
Check	08/24/2015	1819	Hilliard Managemen...		Restrict...		Bank of Marin ...	180.00	280.00
Check	10/09/2015	2023	Hilliard Managemen...		Restrict...		Bank of Marin ...	675.00	955.00
Check	10/12/2015	1886	Hilliard Managemen...		Restrict...		Bank of Marin ...	765.00	1,720.00
Check	12/03/2015	2042	Hilliard Managemen...	Quick Books ...	Restrict...		Bank of Marin ...	315.00	2,035.00
Check	01/15/2016	2061	Hilliard Managemen...	Quick Books ...	Restrict...		Bank of Marin ...	225.00	2,260.00
Check	02/05/2016	2076	Hilliard Managemen...	Quick Books ...	Restrict...	X	Bank of Marin ...	0.00	2,260.00
Check	03/11/2016	2097	Hilliard Managemen...	Quick Books ...	Restrict...		Bank of Marin ...	495.00	2,755.00
Check	03/23/2016	2105	Hilliard Managemen...	Quick Books ...	Restrict...	X	Bank of Marin ...	0.00	2,755.00
Check	03/31/2016	2107	Hilliard Managemen...	Quick Books ...	Restrict...		Bank of Marin ...	157.50	2,912.50
Bill	04/30/2016		Hilliard Managemen...		Restrict...		Accounts Pay...	247.50	3,160.00
Check	05/31/2016	2156	Hilliard Managemen...	Quick Books ...	Restrict...	X	Bank of Marin ...	0.00	3,160.00
Check	05/31/2016	2157	Hilliard Managemen...	Quick Books ...	Restrict...		Bank of Marin ...	180.00	3,340.00
Check	06/30/2016	2182	Hilliard Managemen...	Quick Books ...	Restrict...		Bank of Marin ...	180.00	3,520.00
Total Accounting/Bookkeeping								3,520.00	3,520.00
Payroll Fees									
Check	01/05/2016	EFT	Bank of Marin Payroll		Unrestrict...		Bank of Marin ...	49.99	49.99
Check	02/03/2016	EFT	Bank of Marin		Restrict...		Bank of Marin ...	49.99	99.98
Check	03/02/2016	EFT	Bank of Marin		Restrict...		Bank of Marin ...	49.99	149.97
Check	04/04/2016	eft	Bank of Marin Payroll	April Payroll ...	Restrict...		Bank of Marin ...	49.99	199.96
Check	05/05/2016	eft	Bank of Marin	Payroll Fees	Restrict...		Bank of Marin ...	49.99	249.95
Check	06/03/2016	EFT	Bank of Marin	Payroll Fee	Restrict...		Bank of Marin ...	49.99	299.94
Total Payroll Fees								299.94	299.94
Total Audit/Accounting								7,584.43	7,584.43
Marketing Consultant									
Check	09/22/2015	1850	Stephanie L. Prothero		Restrict...		Bank of Marin ...	875.00	875.00
Check	09/22/2015	1851	Stephanie L. Prothero		Restrict...		Bank of Marin ...	475.00	1,350.00
Check	09/22/2015	1852	Stephanie L. Prothero		Restrict...		Bank of Marin ...	525.00	1,875.00
Check	09/22/2015	1853	Stephanie L. Prothero		Restrict...		Bank of Marin ...	800.00	2,675.00
Check	09/22/2015	1854	Stephanie L. Prothero		Restrict...		Bank of Marin ...	1,000.00	3,675.00
Check	09/22/2015	1855	Stephanie L. Prothero		Restrict...		Bank of Marin ...	975.00	4,650.00
Check	09/22/2015	1856	Stephanie L. Prothero		Restrict...		Bank of Marin ...	115.46	4,765.46
Check	10/23/2015	2009	Stephanie L. Prothero	September 1...	Restrict...		Bank of Marin ...	825.00	5,590.46
Bill	11/01/2015		Stephanie L. Prothero	October	Restrict...		Accounts Pay...	164.46	5,754.92
Bill	11/01/2015		Stephanie L. Prothero		Restrict...		Accounts Pay...	1,285.54	7,040.46
Bill	11/30/2015		Stephanie L. Prothero		Restrict...		Accounts Pay...	1,750.00	8,790.46

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Accrual Basis

Downtown Alameda Business Association
Profit & Loss Detail
 July 2015 through June 2016

Type	Date	Num	Name	Memo	Class	Cir	Split	Amount	Balance
Check	01/15/2016	2064	Stephanie L. Prothero	December Bil...	Restrict...		Bank of Marin ...	650.00	9,440.46
Check	01/15/2016	2064	Stephanie L. Prothero	November In...	Restrict...		Bank of Marin ...	750.00	10,190.46
Check	02/12/2016	2078	Stephanie L. Prothero	January Billing	Restrict...		Bank of Marin ...	850.00	11,040.46
Check	02/12/2016	2079	Stephanie L. Prothero	January Billing	Restrict...		Bank of Marin ...	775.00	11,815.46
Check	03/11/2016	2098	Stephanie L. Prothero	February Billing	Restrict...		Bank of Marin ...	900.00	12,715.46
Check	03/11/2016	2099	Stephanie L. Prothero	February Billing	Restrict...		Bank of Marin ...	1,025.00	13,740.46
Bill	04/30/2016	043016	Stephanie L. Prothero		Restrict...		Accounts Pay...	1,900.00	15,640.46
Check	05/20/2016	2153	Stephanie L. Prothero	April Invoices	Restrict...		Bank of Marin ...	1,475.00	17,115.46
Check	05/31/2016	2158	Stephanie L. Prothero	Spring Festiv...	Restrict...		Bank of Marin ...	1,200.00	18,315.46
Check	06/15/2016	2172	Stephanie L. Prothero	End of May I...	Restrict...		Bank of Marin ...	750.00	19,065.46
Bill	06/30/2016		Stephanie L. Prothero		Restrict...		Accounts Pay...	875.00	19,940.46
Total Marketing Consultant								19,940.46	19,940.46
Liability/D&O Insurance									
Check	07/20/2015	1782	Bay Risk Insurance		Restrict...		Bank of Marin ...	3,914.00	3,914.00
Check	09/17/2015	1847	Bay Risk Insurance		Restrict...		Bank of Marin ...	50.00	3,964.00
Check	05/05/2016	2120	Brown & Brown Ins...	New Insuran...	Restrict...		Bank of Marin ...	168.00	4,132.00
Total Liability/D&O Insurance								4,132.00	4,132.00
Postage									
Check	09/29/2015	1863	Joyce McConegley	AWF Supplies	Restrict...		Bank of Marin ...	245.00	245.00
Check	10/12/2015	1883	Joyce McConegley	AWF Supplies	Restrict...		Bank of Marin ...	49.00	294.00
Check	11/19/2015	2026	Joyce McConegley		Restrict...		Bank of Marin ...	49.00	343.00
Check	12/02/2015	2037	Robb Ratto		Restrict...		Bank of Marin ...	83.00	426.00
Check	01/15/2016	2065	Joyce McConegley	Stamps/Mem...	Restrict...		Bank of Marin ...	49.00	475.00
Check	04/21/2016	2114	Joyce McConegley	Stamps	Restrict...		Bank of Marin ...	1.31	476.31
Check	06/15/2016	2171	Joyce McConegley	Postage	Restrict...		Bank of Marin ...	3.59	479.90
Total Postage								479.90	479.90
Supplies									
Check	07/15/2015	1775	Quill.Com	Coffee Cups	Restrict...		Bank of Marin ...	24.91	24.91
Check	07/31/2015	1802	Robb Ratto		Restrict...		Bank of Marin ...	107.80	132.71
Check	08/26/2015	1822	Robb Ratto		Restrict...		Bank of Marin ...	36.11	168.82
Check	09/04/2015	1835	Robb Ratto		Restrict...		Bank of Marin ...	39.95	208.77
Check	09/04/2015	1837	Joyce McConegley		Restrict...		Bank of Marin ...	219.48	428.25
Check	09/22/2015	1861	Robb Ratto		Restrict...		Bank of Marin ...	135.36	563.61
Check	10/12/2015	1883	Joyce McConegley	AWF Supplies	Restrict...		Bank of Marin ...	72.23	635.84
Check	11/05/2015	2017	Robb Ratto		Restrict...		Bank of Marin ...	11.69	647.53
Check	11/19/2015	2026	Joyce McConegley		Restrict...		Bank of Marin ...	75.54	723.07
Check	11/20/2015	2033	Robb Ratto		Restrict...		Bank of Marin ...	123.30	846.37
Check	12/16/2015	2050	Joyce McConegley	Salary	Restrict...		Bank of Marin ...	53.62	899.99
Check	12/17/2015	2052	Robb Ratto	Supplies/Mee...	Restrict...		Bank of Marin ...	123.30	1,023.29
Check	12/29/2015	2055	Robb Ratto	Supplies/Mee...	Restrict...		Bank of Marin ...	98.07	1,121.36
Check	01/29/2016	2073	Robb Ratto	Supplies	Restrict...		Bank of Marin ...	22.68	1,144.04
Check	02/19/2016	2082	Robb Ratto	Mounting Ta...	Restrict...		Bank of Marin ...	8.00	1,152.04
Check	02/19/2016	2083	Island Print Express	New Office Si...	Restrict...		Bank of Marin ...	21.90	1,173.94
Check	03/04/2016	2089	Robb Ratto	Ink Cartridges	Restrict...	X	Bank of Marin ...	0.00	1,173.94
Check	03/05/2016	2092	Robb Ratto	Ink Cartridges	Restrict...		Bank of Marin ...	59.11	1,233.05
Check	03/17/2016	2100	Joyce McConegley	Office Supplies	Restrict...		Bank of Marin ...	87.04	1,320.09

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Accrual Basis

**Downtown Alameda Business Association
Profit & Loss Detail
July 2015 through June 2016**

Type	Date	Num	Name	Memo	Class	Clr	Split	Amount	Balance
Check	05/12/2016	EFT	deluxe business sys...		Restrict...		Bank of Marin ...	199.43	1,519.52
Check	05/31/2016	2162	Quill.Com	One Case of ...	Restrict...		Bank of Marin ...	56.89	1,576.41
Check	06/15/2016	2171	Joyce McConeghy	Supplies	Restrict...		Bank of Marin ...	28.45	1,604.86
Total Supplies								1,604.86	1,604.86
Office Rent									
Check	07/07/2015	1769	Mason Management	Rent Check	Restrict...		Bank of Marin ...	1,323.00	1,323.00
Check	08/01/2015	1795	Mason Management		Restrict...		Bank of Marin ...	1,323.00	2,646.00
Check	08/28/2015	1826	Mason Management		Restrict...		Bank of Marin ...	63.00	2,709.00
Check	09/04/2015	1823	Mason Management		Restrict...		Bank of Marin ...	1,323.00	4,032.00
Check	10/05/2015	1866	Mason Management		Restrict...		Bank of Marin ...	1,323.00	5,355.00
Check	11/05/2015	2018	Mason Management		Restrict...		Bank of Marin ...	1,323.00	6,678.00
Check	12/11/2015	2047	Mason Management		Restrict...		Bank of Marin ...	1,323.00	8,001.00
Check	01/05/2016	2059	Mason Management		Restrict...		Bank of Marin ...	1,323.00	9,324.00
Check	02/01/2016	2072	Mason Management	VOID:	Restrict...	X	Bank of Marin ...	0.00	9,324.00
Check	02/01/2016	2074	Mason Management	Office Rent	Restrict...		Bank of Marin ...	1,260.00	10,584.00
Check	03/04/2016	2088	Mason Management	Office Rent +...	Restrict...		Bank of Marin ...	1,386.00	11,970.00
Check	04/08/2016	2109	Mason Management	April Rent Ch...	Restrict...		Bank of Marin ...	1,323.00	13,293.00
Check	05/05/2016	2121	Mason Management	May Office R...	Restrict...		Bank of Marin ...	1,323.00	14,616.00
Check	06/07/2016	2167	Mason Management	June Office R...	Restrict...		Bank of Marin ...	1,323.00	15,939.00
Total Office Rent								15,939.00	15,939.00
Office Expenses									
Computer Repair									
Check	07/31/2015	1805	Alameda Business ...		Unrestric...		Bank of Marin ...	227.20	227.20
Check	09/17/2015	1845	Alameda Business ...		Unrestric...		Bank of Marin ...	190.00	417.20
Total Computer Repair								417.20	417.20
Other Costs - Office									
Check	03/11/2016	2094	Franchise Tax Board	Filing Fee	Unrestric...		Bank of Marin ...	10.00	10.00
Check	03/17/2016	2102	Clerk of the Court	VOID: Small ...	Restrict...	X	Bank of Marin ...	0.00	10.00
Check	03/23/2016	2103	Clerk of the Court	VOID: Small ...	Restrict...	X	Bank of Marin ...	0.00	10.00
Check	03/31/2016	2108	Robb Ratto	Court House ...	Restrict...		Bank of Marin ...	5.00	15.00
Check	04/21/2016	2112	Registry of Charitab...		Restrict...		Bank of Marin ...	50.00	65.00
Total Other Costs - Office								65.00	65.00
Office Expenses - Other									
Check	05/09/2016	2138	Payless Repair Ser...	Copier	Unrestric...		Bank of Marin ...	80.00	80.00
Total Office Expenses - Other								80.00	80.00
Total Office Expenses								562.20	562.20
Other Costs - REST									
Check	07/20/2015	1770	All Good Living	Logo deposit	Restrict...		Bank of Marin ...	250.00	250.00
Check	03/17/2016	2101	Robb Ratto	New Ink Jet ...	Restrict...		Bank of Marin ...	125.48	375.48
Check	04/21/2016	2117	Robb Ratto	Battery Shipp...	Unrestric...		Bank of Marin ...	82.39	457.87
Check	05/08/2016	2135	Robb Ratto	Segway Batt...	Restrict...		Bank of Marin ...	680.36	1,138.23
Check	06/06/2016	2166	Equipone	Konica/Minolt...	Restrict...		Bank of Marin ...	766.50	1,904.73
Check	06/21/2016	2174	FASTHAUL	Haul away ol...	Restrict...		Bank of Marin ...	175.00	2,079.73

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Accrual Basis

Downtown Alameda Business Association
Profit & Loss Detail
July 2015 through June 2016

Type	Date	Num	Name	Memo	Class	Clr	Split	Amount	Balance
Check	06/24/2016	2175	Clerk of the Court	VOID:	Restrict...	X	Bank of Marin ...	0.00	2,079.73
Check	06/30/2016	2177	Robb Ratto	Filing Fee	Restrict...		Bank of Marin ...	20.00	2,099.73
Check	06/30/2016	2179	Alameda Business ...	New Comput...	Restrict...		Bank of Marin ...	2,708.11	4,807.84
Check	06/30/2016	2181	Clerk of the Court		Restrict...		Bank of Marin ...	45.00	4,852.84
Total Other Costs - REST								4,852.84	4,852.84
Total RESTRICTED EXPENSES								117,219.38	117,219.38
Total Expense								359,746.27	359,746.27
Net Ordinary Income								6,309.54	6,309.54
Other Income/Expense									
Other Expense									
Temp. Rest. Funds Reserve									
General Journal	06/30/2016			GJE for EOY...			-SPLIT-	5,107.78	5,107.78
Total Temp. Rest. Funds Reserve								5,107.78	5,107.78
Unrestricted Funds Reserve									
General Journal	06/30/2016			GJE for EOY...			Temp. Rest. F...	1,201.76	1,201.76
Total Unrestricted Funds Reserve								1,201.76	1,201.76
Total Other Expense								6,309.54	6,309.54
Net Other Income								-6,309.54	-6,309.54
Net Income								0.00	0.00

Forms 990 / 990-EZ Return SummaryFor calendar year 2015, or tax year beginning **07/01/15**, and ending **06/30/16****PARK STREET BUSINESS ASSOCIATION, IN****Net Asset / Fund Balance at Beginning of Year** **7,446****Revenue**

Contributions	<u>121,387</u>	
Program service revenue	<u>30,337</u>	
Investment income		
Capital gain / loss		
Fundraising / Gaming:		
Gross revenue	<u>214,332</u>	
Direct expenses	<u>107,613</u>	
Net income	<u>106,719</u>	
Other income	<u>0</u>	
Total revenue		<u>258,443</u>

Expenses

Program services	<u>104,755</u>	
Management and general	<u>147,464</u>	
Fundraising		
Total expenses		<u>252,219</u>
Excess / (deficit)		<u>6,224</u>

Changes

Net Asset / Fund Balance at End of Year **13,670****Reconciliation of Revenue**

Total revenue per financial statements	
Less:	
Unrealized gains	
Donated services	
Recoveries	
Other	
Plus:	
Investment expenses	
Other	
Total revenue per return	<u><u>258,443</u></u>

Reconciliation of Expenses

Total expenses per financial statements	
Less:	
Donated services	
Prior year adjustments	
Losses	
Other	
Plus:	
Investment expenses	
Other	
Total expenses per return	<u><u>252,219</u></u>

Balance Sheet

	Beginning	Ending	Differences
Assets	<u>15,550</u>	<u>30,998</u>	
Liabilities	<u>8,104</u>	<u>17,328</u>	
Net assets	<u><u>7,446</u></u>	<u><u>13,670</u></u>	<u><u>6,224</u></u>

Miscellaneous Information

Amended return

Return / extended due date **02/15/17**

Failure to file penalty

Form **8879-EO****IRS e-file Signature Authorization
for an Exempt Organization**

OMB No. 1545-1878

Department of the Treasury
Internal Revenue Service
Name of exempt organizationFor calendar year 2015, or fiscal year beginning 7/01, 2015, and ending 6/30, 20 16

▶ Do not send to the IRS. Keep for your records.

▶ Information about Form 8879-EO and its instructions is at www.irs.gov/form8879eo.**2015**Name and title of officer
PARK STREET BUSINESS ASSOCIATION, IN
DONNA LAYBURN
PRESIDENTEmployer identification number
[REDACTED]**Part I Type of Return and Return Information (Whole Dollars Only)**

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, 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 1 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>258,443</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 VI, line 5)	4b _____
5a Form 8868 check here ▶ <input type="checkbox"/>	b Balance Due (Form 8868, Part I, line 3c or Part II, line 8c)	5b _____

Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2015 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 organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's 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 organization's 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 organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's 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 organization's tax year 2015 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 of the organization, I will enter my PIN as my signature on the organization's tax year 2015 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.

Officer's signature ▶

Date ▶ 11/30/16**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.

[REDACTED]
do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2015 electronically filed return for the organization 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 VALERDate ▶ 11/30/16**ERO Must Retain This Form—See Instructions****Do Not Submit This Form To the IRS Unless Requested To Do So**

For Paperwork Reduction Act Notice, see back of form.

Form **8879-EO** (2015)

Form **990**Department of the Treasury
Internal Revenue Service**Return of Organization Exempt From Income Tax**

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

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

▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2015
Open to Public
Inspection**A** For the 2015 calendar year, or tax year beginning **07/01/15**, and ending **06/30/16**

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	C Name of organization PARK STREET BUSINESS ASSOCIATION, IN		D Employer identification number <div style="background-color: black; width: 100px; height: 1.2em;"></div>
	Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite 2447 SANTA CLARA AVENUE SUITE 302		E Telephone number <div style="background-color: black; width: 100px; height: 1.2em;"></div>
	City or town, state or province, country, and ZIP or foreign postal code ALAMEDA CA 94501		G Gross receipts \$ 366,056
	F Name and address of principal officer: DONNA LAYBURN		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)
	I Tax-exempt status: <input type="checkbox"/> 501(c)(3) <input checked="" type="checkbox"/> 501(c) (6) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(c) Group exemption number ▶
J Website: ▶ HTTP://DOWNTOWNALAMEDA.COM/			
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: 1990 M State of legal domicile: CA	

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: SEE SCHEDULE O				
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.				
	3 Number of voting members of the governing body (Part VI, line 1a)	3	12		
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	12		
	5 Total number of individuals employed in calendar year 2015 (Part V, line 2a)	5	2		
	6 Total number of volunteers (estimate if necessary)	6	60		
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a		0	
	7b Net unrelated business taxable income from Form 990-T, line 34	7b		0	
	Revenue			Prior Year	Current Year
		8 Contributions and grants (Part VIII, line 1h)			121,387
9 Program service revenue (Part VIII, line 2g)				30,337	
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)				0	
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)				106,719	
12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)				258,443	
Expenses					
	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)			0	
	14 Benefits paid to or for members (Part IX, column (A), line 4)			0	
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)			138,732	
	16a Professional fundraising fees (Part IX, column (A), line 11e)			0	
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 0				
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)			113,487	
Net Assets or Fund Balances	18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)			252,219	
	19 Revenue less expenses. Subtract line 18 from line 12			6,224	
			Beginning of Current Year	End of Year	
	20 Total assets (Part X, line 16)		15,550	30,998	
21 Total liabilities (Part X, line 26)		8,104	17,328		
22 Net assets or fund balances. Subtract line 21 from line 20		7,446	13,670		

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.

Sign Here	Signature of officer		Date	
	DONNA LAYBURN Type or print name and title		PRESIDENT	
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input checked="" type="checkbox"/> if PTIN self-employed
	RYAN VAN VALER		01/20/17	P00619416
	Firm's name ▶ RYAN VAN VALER, E.A.	Firm's EIN ▶ <div style="background-color: black; width: 100px; height: 1.2em;"></div>		
	Firm's address ▶ 2447 SANTA CLARA AVENUE SUITE 300 ALAMEDA, CA 94501	Phone no. 510-521-0252		

May the IRS discuss this return with the preparer shown above? (see instructions) ☐ Yes ☐ NoFor Paperwork Reduction Act Notice, see the separate instructions.
DAAForm **990** (2015)

Form 990 (2015) **PARK STREET BUSINESS ASSOCIATION, IN**Page **2****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 \$)
PROMOTE HISTORICAL BUSINESS AREA TO THE GENERAL PUBLIC AND BUSINESS INTEREST OF MEMBERS BY NEWSLETTERS AND OTHER EVENTS.

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)
N/A

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)
N/A

4d Other program services (Describe in 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 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II		
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? 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 temporarily restricted endowments, permanent endowments, or 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

Part IV Checklist of Required Schedules (continued)

	Yes	No
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
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III		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? If "Yes," complete Schedule J	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? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a		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 Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV		X
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		X
34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, or IV, and Part V, line 1		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)? If "Yes," complete Schedule R, Part V, line 2		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	X	

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V ☐

	Yes	No
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 8	
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0	
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	X
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a 2	
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	X
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X
b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	X
b If "Yes," enter the name of the foreign country: ► See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	X
c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a	X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	
7 Organizations that may receive deductible contributions under section 170(c).		
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	
b If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	
d If "Yes," indicate the number of Forms 8282 filed during the year	7d	
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8	
9 Sponsoring organizations maintaining donor advised funds.		
a Did the sponsoring organization make any taxable distributions under section 4966?	9a	
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	
10 Section 501(c)(7) organizations. Enter:		
a Initiation fees and capital contributions included on Part VIII, line 12	10a	
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11 Section 501(c)(12) organizations. Enter:		
a Gross income from members or shareholders	11a	
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13 Section 501(c)(29) qualified nonprofit health insurance issuers.		
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	13a	
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	13b	
c Enter the amount of reserves on hand	13c	
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a	X
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI ☒

Section A. Governing Body and Management

	1a	12		Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.					
b Enter the number of voting members included in line 1a, above, who are independent					
2 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?			2		X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?			3		X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?			4		X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?			5		X
6 Did the organization have members or stockholders?			6		X
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?			7a		X
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?			7b		X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:					
a The governing body?			8a	X	
b Each committee with authority to act on behalf of the governing body?			8b	X	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		X

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

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

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 (or 1024 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 in Schedule O)

19 Describe in 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: ►
DONNA LAYBURN **2447 SANTA CLARA AVE.**
ALAMEDA **CA 94501** **510-523-1392**

Form 990 (2015) **PARK STREET BUSINESS ASSOCIATION, IN**

Page 7

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck 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 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

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

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

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

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

(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)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(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) DONNA LAYBURN	10.00									
PRESIDENT	0.00	X		X				0	0	0
(2) STEVE BUSSE	10.00									
VICE PRESIDENT	0.00	X		X				0	0	0
(3) DEB KNOWLES	10.00									
SECRETARY	0.00	X		X				0	0	0
(4) DUANE WATSON	10.00									
TREASURER	0.00	X		X				0	0	0
(5) JULIE BARON	2.00									
DIRECTOR	0.00	X						0	0	0
(6) RICH KRINKS	2.00									
DIRECTOR	0.00	X						0	0	0
(7) KYLE CONNER	2.00									
DIRECTOR	0.00	X						0	0	0
(8) KATE PRYOR	2.00									
DIRECTOR	0.00	X						0	0	0
(9) CINDY KAHL	2.00									
DIRECTOR	0.00	X						0	0	0
(10) TERRI MITCHELL	2.00									
DIRECTOR	0.00	X						0	0	0
(11) RON MOONEY	2.00									
DIRECTOR	0.00	X						0	0	0

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)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(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) ARTHUR MERCADO	2.00									
DIRECTOR	0.00	X						0	0	0
(13) ROBB RATTO	40.00									
EXECUTIVE DIRECTOR	0.00						X	87,282	0	0
1b Sub-total								87,282		
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								87,282		

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**

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

	Yes	No
3	X	
4		X
5		X

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**

Form 990 (2015) **PARK STREET BUSINESS ASSOCIATION, IN**Page **9****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
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a				
	b Membership dues	1b	120,458			
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	929			
	g Noncash contributions included in lines 1a-1f: \$					
	h Total. Add lines 1a-1f		121,387			
Program Service Revenue	2a CAR SHOW	Busn. Code	18,272	18,272		
	b TRASH DISPOSAL		3,600	3,600		
	c MUNI LOT		3,000	3,000		
	d SHOPPING GUIDE		2,500	2,500		
	e CUSTOMER APPRECIATION DAY		1,665	1,665		
	f All other program service revenue		1,300	1,300		
	g Total. Add lines 2a-2f		30,337			
	Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)				
4 Income from investment of tax-exempt bond proceeds						
5 Royalties						
		(i) Real (ii) Personal				
6a Gross rents						
b Less: rental exps.						
c Rental inc. or (loss)						
d Net rental income or (loss)						
7a Gross amount from sales of assets other than inventory		(i) Securities (ii) Other				
b Less: cost or other basis & sales exps.						
c Gain or (loss)						
d Net gain or (loss)						
8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18		a	214,332			
b Less: direct expenses		b	107,613			
c Net income or (loss) from fundraising events			106,719			
9a Gross income from gaming activities. See Part IV, line 19		a				
b Less: direct expenses		b				
c Net income or (loss) from gaming activities						
10a Gross sales of inventory, less returns and allowances	a					
b Less: cost of goods sold	b					
c Net income or (loss) from sales of inventory						
Miscellaneous Revenue		Busn. Code				
11a						
b						
c						
d All other revenue						
e Total. Add lines 11a-11d						
12 Total revenue. See instructions.		258,443	30,337	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
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	114,642	57,321	57,321	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	12,000		12,000	
10 Payroll taxes	12,090		12,090	
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	7,584		7,584	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	20,948		20,948	
12 Advertising and promotion	3,437	3,437		
13 Office expenses	4,690	2,373	2,317	
14 Information technology	497		497	
15 Royalties				
16 Occupancy	18,190		18,190	
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	2,232		2,232	
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	86	86		
23 Insurance	5,764		5,764	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a MAINT. & IMPROVEMENT COMM	13,085	13,085		
b PROMOTION COMMITTEE	10,140	10,140		
c T-SHIRTS	5,808	5,808		
d OTHER- REST	4,853		4,853	
e All other expenses	16,173	12,505	3,668	
25 Total functional expenses. Add lines 1 through 24e	252,219	104,755	147,464	0
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part X ☐

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest bearing	10,414	1	17,191
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net	2,550	3	
	4 Accounts receivable, net	1,375	4	6,800
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	1,125	9	7,007
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 10,228		
	b Less: accumulated depreciation	10b 10,228	86	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		15	
16 Total assets. Add lines 1 through 15 (must equal line 34)	15,550	16	30,998	
Liabilities	17 Accounts payable and accrued expenses		17	
	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 current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		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	8,104	25	17,328
	26 Total liabilities. Add lines 17 through 25	8,104	26	17,328
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	570	27	1,686
	28 Temporarily restricted net assets	6,876	28	11,984
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	7,446	33	13,670
34 Total liabilities and net assets/fund balances	15,550	34	30,998	

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response or note to any line in this Part XI ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	258,443
2	Total expenses (must equal Part IX, column (A), line 25)	2	252,219
3	Revenue less expenses. Subtract line 2 from line 1	3	6,224
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	7,446
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	13,670

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII ☐

	Yes	No
1 Accounting method used to prepare the Form 990: <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 in Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were 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		X
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		X
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.		
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		

**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.▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2015Open to Public
Inspection

Name of the organization

Employer identification number

PARK STREET BUSINESS ASSOCIATION, IN**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.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? <input type="checkbox"/> Yes <input type="checkbox"/> No		
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? <input type="checkbox"/> Yes <input type="checkbox"/> No		

Part II Conservation Easements.

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of a historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶

4 Number of states where property subject to conservation easement is located ▶

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

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

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

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1 ▶ \$

(ii) Assets included in Form 990, Part X ▶ \$

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenue included on Form 990, Part VIII, line 1 ▶ \$

b Assets included in Form 990, Part X ▶ \$

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 are a 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 programs
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
1c Beginning balance	
1d Additions during the year	
1e Distributions during the year	
1f Ending balance	

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

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 Temporarily restricted 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
 (ii) related organizations

	Yes	No
3a(i)		
3a(ii)		
3b		

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?

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		10,228	10,228	

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

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)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ►		

Part VIII Investments—Program Related.

Complete if the organization answered "Yes" on Form 990, Part 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)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ►		

Part IX Other Assets.

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

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

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) UNEARNED REVENUE	17,328
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ►	17,328

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

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.

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

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.

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

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.

Part XIII Supplemental Information (continued)

**SCHEDULE G
(Form 990 or 990-EZ)**Department of the Treasury
Internal Revenue Service**Supplemental Information Regarding Fundraising or Gaming Activities**

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

▶ Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2015Open to Public
Inspection

Name of the organization

Employer identification number

PARK STREET BUSINESS ASSOCIATION, IN**Part I Fundraising Activities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 17.
Form 990-EZ filers are not required to complete this part.**1** Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a ☐ Mail solicitations
 b ☐ Internet and email solicitations
 c ☐ Phone solicitations
 d ☐ In-person solicitations
 e ☐ Solicitation of non-government grants
 f ☐ Solicitation of government grants
 g ☐ Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?☐ Yes ☐ No**b** If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total						

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

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

		(a) Event #1 ART & WINE FAIR (event type)	(b) Event #2 SPRING FESTIVAL (event type)	(c) Other events NONE (total number)	(d) Total events (add col. (a) through col. (c))
Revenue	1 Gross receipts	141,372	72,960		214,332
	2 Less: Contributions				
	3 Gross income (line 1 minus line 2)	141,372	72,960		214,332
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	68,488	39,125		107,613
	10 Direct expense summary. Add lines 4 through 9 in column (d)				107,613
	11 Net income summary. Subtract line 10 from line 3, column (d)				106,719

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

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
6 Volunteer labor	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No		
7 Direct expense summary. Add lines 2 through 5 in column (d)					
8 Net gaming income summary. Subtract line 7 from line 1, column (d)					

9 Enter the state(s) in which the organization conducts gaming activities:

a Is the organization licensed to conduct gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain:

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain:

Schedule G (Form 990 or 990-EZ) 2015

PARK STREET BUSINESS ASSOCIATION, INPage **3**

- 11** Does the organization conduct gaming activities with nonmembers? ☐ Yes ☐ No
- 12** Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No
- 13** Indicate the percentage of gaming activity conducted in:
- | | | |
|--------------------------------------|------------|---|
| a The organization's facility | 13a | % |
| b An outside facility | 13b | % |
- 14** Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶

Address ▶

- 15a** Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ Yes ☐ No
- b** If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$
- c** If "Yes," enter name and address of the third party:

Name ▶

Address ▶

16 Gaming manager information:

Name ▶

Gaming manager compensation ▶ \$

Description of services provided ▶

☐ Director/officer ☐ Employee ☐ Independent contractor
17 Mandatory distributions:

- a** Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No
- b** Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).

SCHEDULE J
(Form 990)Department of the Treasury
Internal Revenue Service**Compensation Information**For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees

- Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
 ► Attach to Form 990.

► Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2015Open to Public
Inspection

Name of the organization

PARK STREET BUSINESS ASSOCIATION, IN

Employer identification number

Part I Questions Regarding Compensation**1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain**2** Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?**3** Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|--|--|
| <input type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment? **4a**
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan? **4b**
- c** Participate in, or receive payment from, an equity-based compensation arrangement? **4c**

If "Yes" to any of lines 4a–c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5–9.**5** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:**a** The organization? **5a****b** Any related organization? **5b**

If "Yes" to line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:**a** The organization? **6a****b** Any related organization? **6b**

If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described on lines 5 and 6? If "Yes," describe in Part III**8** Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III**9** If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

Yes No

1b

2

4a

4b

4c

5a

5b

6a

6b

7

8

9

X

X

X

Schedule J (Form 990) 2015

PARK STREET BUSINESS ASSOCIATION, INPage **2****Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use duplicate copies if additional space is needed.

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)–(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
ROBB RATO	(i)	87,282	0	0	0	0	87,282	0
1 EXECUTIVE DIRECTOR	(ii)	0	0	0	0	0	0	0
2	(i)							
	(ii)							
3	(i)							
	(ii)							
4	(i)							
	(ii)							
5	(i)							
	(ii)							
6	(i)							
	(ii)							
7	(i)							
	(ii)							
8	(i)							
	(ii)							
9	(i)							
	(ii)							
10	(i)							
	(ii)							
11	(i)							
	(ii)							
12	(i)							
	(ii)							
13	(i)							
	(ii)							
14	(i)							
	(ii)							
15	(i)							
	(ii)							
16	(i)							
	(ii)							

Schedule J (Form 990) 2015

Part III Supplemental Information

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

SCHEDULE O
(Form 990 or 990-EZ)Department of the Treasury
Internal Revenue Service

Name of the organization

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

▶ Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2015**Open to Public
Inspection**

Employer identification number

PARK STREET BUSINESS ASSOCIATION, IN**FORM 990 - ORGANIZATION'S MISSION**

THE PARK STREET BUSINESS ASSOCIATION COVERS THE DOWNTOWN ALAMEDA BUSINESSES
AND WAS FIRST FORMED IN 1981. WE SERVE AS A SUPPORT NETWORK FOR THE 450+
BUSINESSES LOCATED WITHIN ALAMEDA'S PARK STREET BUSINESS IMPROVEMENT AREA.
THE DOWNTOWN ASSOCIATION'S GOAL IS TO DEVELOP AN ECONOMICALLY PROSPEROUS
BUSINESS DISTRICT THROUGH A UNITED EFFORT OF ITS MEMBERS.

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

Form **4562**Department of the Treasury
Internal Revenue Service (99)**Depreciation and Amortization**
(Including Information on Listed Property)

▶ Attach to your tax return.

▶ Information about Form 4562 and its separate instructions is at www.irs.gov/form4562.

OMB No. 1545-0172

2015Attachment
Sequence No. **179**

Name(s) shown on return

PARK STREET BUSINESS ASSOCIATION, IN

Business or activity to which this form relates

INDIRECT DEPRECIATION**Part I Election To Expense Certain Property Under Section 179****Note:** If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	500,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	2,000,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2014 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2016. Add lines 9 and 10, less line 12	13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.**Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.)**

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)**Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2015	17	86
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here		

Section B—Assets Placed in Service During 2015 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
i Nonresidential real property			39 yrs.	MM	S/L	

Section C—Assets Placed in Service During 2015 Tax Year Using the Alternative Depreciation System

20a Class life				S/L	
b 12-year			12 yrs.	S/L	
c 40-year			40 yrs.	MM	S/L

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions	22	86
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

Form **4562** (2015)

DAA

THERE ARE NO AMOUNTS FOR PAGE 2

Federal Asset Report

FYE: 6/30/2016

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per Conv Meth	Prior	Current
Prior MACRS:									
1	Furnishings and Equipment	6/30/06	10,228			10,228	10 HY 200DB	10,142	86
			<u>10,228</u>			<u>10,228</u>		<u>10,142</u>	<u>86</u>
	Grand Totals		10,228			10,228		10,142	86
	Less: Dispositions and Transfers		0			0		0	0
	Less: Start-up/Org Expense		<u>0</u>			<u>0</u>		<u>0</u>	<u>0</u>
	Net Grand Totals		<u>10,228</u>			<u>10,228</u>		<u>10,142</u>	<u>86</u>

CA Asset Report

FYE: 6/30/2016

Form 990, Page 1

Asset	Description	Date In Service	Cost	Basis for Depr	CA Prior	CA Current	Federal Current	Difference Fed - CA
Prior MACRS:								
1	Furnishings and Equipment	6/30/06	10,228	10,228	10,142	86	86	0
			<u>10,228</u>	<u>10,228</u>	<u>10,142</u>	<u>86</u>	<u>86</u>	<u>0</u>
Grand Totals			10,228	10,228	10,142	86	86	0
Less: Dispositions			0	0	0	0	0	0
Less: Start-up/Org Expense			0	0	0	0	0	0
Net Grand Totals			<u>10,228</u>	<u>10,228</u>	<u>10,142</u>	<u>86</u>	<u>86</u>	<u>0</u>

AMT Asset Report

FYE: 6/30/2016

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per Conv Meth	Prior	Current
Prior MACRS:									
1	Furnishings and Equipment	6/30/06	10,228			10,228	10 HY 150DB	10,142	86
			<u>10,228</u>			<u>10,228</u>		<u>10,142</u>	<u>86</u>
Grand Totals			10,228			10,228		10,142	86
Less: Dispositions and Transfers			<u>0</u>			<u>0</u>		<u>0</u>	<u>0</u>
Net Grand Totals			<u>10,228</u>			<u>10,228</u>		<u>10,142</u>	<u>86</u>

Depreciation Adjustment Report

FYE: 6/30/2016

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>
<u>MACRS Adjustments:</u>						
Page 1	1	1	Furnishings and Equipment	86	86	0
				86	86	0

Future Depreciation Report**FYE: 6/30/17**

FYE: 6/30/2016

Form 990, Page 1

<u>Asset</u>	<u>Description</u>	<u>Date In Service</u>	<u>Cost</u>	<u>Tax</u>	<u>AMT</u>
<u>Prior MACRS:</u>					
1	Furnishings and Equipment	6/30/06	10,228	0	0
			<u>10,228</u>	<u>0</u>	<u>0</u>
Grand Totals			<u>10,228</u>	<u>0</u>	<u>0</u>

CA Future Depreciation Report**FYE: 6/30/17**

FYE: 6/30/2016

Form 990, Page 1

<u>Asset</u>	<u>Description</u>	<u>Date In Service</u>	<u>Cost</u>	<u>CA</u>
<u>Prior MACRS:</u>				
1	Furnishings and Equipment	6/30/06	10,228	0
			<u>10,228</u>	<u>0</u>
	Grand Totals		<u>10,228</u>	<u>0</u>

Federal Statements

FYE: 6/30/2016

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

Description	Total Expenses	Program Service	Management & General	Fund Raising
MARKETING	\$ 20,948	\$	\$ 20,948	\$
TOTAL	\$ 20,948	\$ 0	\$ 20,948	\$ 0

Form 990. Part IX. Line 24e - All Other Expenses

Description	Total Expenses	Program Service	Management & General	Fund Raising
CABLE ADS	\$ 3,971	\$ 3,971		\$
MEMBERSHIP	3,668		3,668	
POWER BOX ART	2,500	2,500		
CCD BANNER	1,158	1,158		
PLATES	991	991		
MISC.	871	871		
MUSIC	800	800		
LUMPERS	500	500		
POSTAGE	387	387		
TOILET RENTAL	307	307		
MUSIC	300	300		
BIKE PARKING	240	240		
PRINTING	176	176		
BALLOONS	162	162		
BANNER	93	93		
POSTER	49	49		
TOTAL	\$ 16,173	\$ 12,505	\$ 3,668	\$ 0

Form 199 Return SummaryFor calendar year 2015, or tax year beginning **07/01/2015** , and ending **06/30/2016****PARK STREET BUSINESS ASSOCIATION, IN**

Gross sales / receipts	<u>244,669</u>	
Dues from members	<u></u>	
Contributions / grants	<u>121,387</u>	
Total costs	<u></u>	
Expenses	<u>359,832</u>	
Excess / (deficit)		<u><u>6,224</u></u>

Filing fee	<u>10</u>
Total payments	<u></u>
Penalties and interest	<u></u>
Use tax	<u></u>

Balance due	<u>10</u>
Refund	<u><u></u></u>

	Balance Sheet		
	Beginning	Ending	Differences
Assets	<u>15,550</u>	<u>30,998</u>	
Liabilities	<u>8,104</u>	<u>17,328</u>	
Net assets	<u>7,446</u>	<u>13,670</u>	<u><u>6,224</u></u>

Miscellaneous Information

Amended return

Return / extended due date 06/15/17

MAIL TO:

Registry of Charitable Trusts
P.O. Box 903447
Sacramento, CA 94203-4470
Telephone: (916) 445-2021

WEB SITE ADDRESS:

<http://ag.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, 311 and 312

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 as defined in Government Code section 12586.1. IRS extensions will be honored.

State Charity Registration Number _____ PARK STREET BUSINESS ASSOCIATION, IN Name of Organization 2447 SANTA CLARA AVENUE SUITE 302 Address (Number and Street) ALAMEDA CA 94501 City or Town, State and ZIP Code		Check if: <input type="checkbox"/> Change of address <input type="checkbox"/> Amended report Corporate or Organization No. _____ Federal Employer I.D. No. _____	
ANNUAL REGISTRATION RENEWAL FEE SCHEDULE (11 Cal. Code Regs. sections 301-307, 311 and 312) Make Check Payable to Attorney General's Registry of Charitable Trusts			
<u>Gross Annual Revenue</u>	<u>Fee</u>	<u>Gross Annual Revenue</u>	<u>Fee</u>
Less than \$25,000	0	Between \$100,001 and \$250,000	\$50
Between \$25,000 and \$100,000	\$25	Between \$250,001 and \$1 million	\$75
		<u>Gross Annual Revenue</u>	<u>Fee</u>
		Between \$1,000,001 and \$10 million	\$150
		Between \$10,000,001 and \$50 million	\$225
		Greater than \$50 million	\$300
PART A - ACTIVITIES			
For your most recent full accounting period (beginning <u>07/01/15</u> ending <u>06/30/16</u>) list: Gross annual revenue \$ <u>258,443</u> Total assets \$ <u>30,998</u>			
PART B - STATEMENTS REGARDING ORGANIZATION DURING THE PERIOD OF THIS REPORT			
Note: If you answer "yes" to any of the questions below, you must attach a separate sheet 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?		X	
2. During this reporting period, was there any theft, embezzlement, diversion or misuse of the organization's charitable prop. or funds?		X	
3. During this reporting period, did non-program expenditures exceed 50% of gross revenues?		X	
4. During this reporting period, were any organization funds used to pay any penalty, fine or judgment? If you filed a Form 4720 with the Internal Revenue Service, attach a copy.		X	
5. During this reporting period, were the services of a commercial fundraiser or fundraising counsel for charitable purposes used? If "yes," provide an attachment listing the name, address, and telephone number of the service provider.		X	
6. During this reporting period, did the organization receive any governmental funding? If so, provide an attachment listing the name of the agency, mailing address, contact person, and telephone number.		X	
7. During this reporting period, did the organization hold a raffle for charitable purposes? If "yes," provide an attachment indicating the number of raffles and the date(s) they occurred.		X	
8. Does the organization conduct a vehicle donation program? If "yes," provide an attachment indicating whether the program is operated by the charity or whether the organization contracts with a commercial fundraiser for charitable purposes.		X	
9. Did your organization have prepared an audited financial statement in accordance with generally accepted accounting principles for this reporting period?		X	
Organization's area code and telephone number _____ Organization's e-mail address <u>RON@RONMOONEY.NET</u>			
I declare under penalty of perjury that I have examined this report, including accompanying documents, and to the best of my knowledge and belief, it is true, correct and complete.			
_____ Signature of authorized officer	DONNA LAYBURN Printed Name	PRESIDENT Title	_____ Date

Form **990**Department of the Treasury
Internal Revenue Service**Return of Organization Exempt From Income Tax**

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

▶ Do not enter social security numbers on this form as it may be made public.
▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2015
Open to Public
Inspection**A** For the 2015 calendar year, or tax year beginning **07/01/15**, and ending **06/30/16**

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	C Name of organization PARK STREET BUSINESS ASSOCIATION, IN		D Employer identification number [REDACTED]
	Doing business as		
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number
	2447 SANTA CLARA AVENUE SUITE 302		
	City or town, state or province, country, and ZIP or foreign postal code ALAMEDA CA 94501		G Gross receipts \$ 366,056
F Name and address of principal officer: DONNA LAYBURN			H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)
I Tax-exempt status: <input type="checkbox"/> 501(c)(3) <input checked="" type="checkbox"/> 501(c) (6) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			
J Website: HTTP://DOWNTOWNALAMEDA.COM/			
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other			L Year of formation: 1990 M State of legal domicile: CA

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: SEE SCHEDULE O		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	12
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	12
	5 Total number of individuals employed in calendar year 2015 (Part V, line 2a)	5	2
	6 Total number of volunteers (estimate if necessary)	6	60
	7a Total unrelated business revenue from Part VIII, column (C), line 12		0
	b Net unrelated business taxable income from Form 990-T, line 34	7b	0
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)		121,387
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		30,337
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		106,719
			258,443
	Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	
14 Benefits paid to or for members (Part IX, column (A), line 4)			0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)			138,732
16a Professional fundraising fees (Part IX, column (A), line 11e)			0
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 0			0
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)			113,487
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)			252,219
Net Assets or Fund Balances	19 Revenue less expenses. Subtract line 18 from line 12		6,224
		Beginning of Current Year	End of Year
	20 Total assets (Part X, line 16)	15,550	30,998
	21 Total liabilities (Part X, line 26)	8,104	17,328
	22 Net assets or fund balances. Subtract line 21 from line 20	7,446	13,670

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.

Sign Here	Signature of officer DONNA LAYBURN		Date	
	Type or print name and title PRESIDENT			
Paid Preparer Use Only	Print/Type preparer's name RYAN VAN VALER	Preparer's signature	Date 01/20/17	Check <input checked="" type="checkbox"/> if self-employed PTIN [REDACTED]
	Firm's name ▶ RYAN VAN VALER, E.A.	Firm's EIN ▶ [REDACTED]		
	Firm's address ▶ 2447 SANTA CLARA AVENUE SUITE 300	Phone no. 510-521-0252		
	ALAMEDA, CA 94501			

May the IRS discuss this return with the preparer shown above? (see instructions) ☐ Yes ☒ NoFor Paperwork Reduction Act Notice, see the separate instructions.
DAAForm **990** (2015)

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 \$)
PROMOTE HISTORICAL BUSINESS AREA TO THE GENERAL PUBLIC AND BUSINESS INTEREST OF MEMBERS BY NEWSLETTERS AND OTHER EVENTS.

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)
N/A

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)
N/A

4d Other program services (Describe in 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 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II		
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? 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 temporarily restricted endowments, permanent endowments, or 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

Part IV Checklist of Required Schedules (continued)

	Yes	No
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
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III		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? If "Yes," complete Schedule J	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? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a		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 Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV		X
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		X
34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, or IV, and Part V, line 1		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)? If "Yes," complete Schedule R, Part V, line 2		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	X	

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V ☐

		Yes	No
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 8		
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		X
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a 2		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b		X
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b If "Yes," enter the name of the foreign country: ▶ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7 Organizations that may receive deductible contributions under section 170(c).			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
b If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
d If "Yes," indicate the number of Forms 8282 filed during the year	7d		
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9 Sponsoring organizations maintaining donor advised funds.			
a Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10 Section 501(c)(7) organizations. Enter:			
a Initiation fees and capital contributions included on Part VIII, line 12	10a		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		
11 Section 501(c)(12) organizations. Enter:			
a Gross income from members or shareholders	11a		
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b		
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	13a		
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	13b		
c Enter the amount of reserves on hand	13c		
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI ☒

Section A. Governing Body and Management

	1a	12	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.				
b Enter the number of voting members included in line 1a, above, who are independent	1b	12		
2 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?			2	X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?			3	X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?			4	X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?			5	X
6 Did the organization have members or stockholders?			6	X
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?			7a	X
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?			7b	X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a The governing body?			8a	X
b Each committee with authority to act on behalf of the governing body?			8b	X
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9	X

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

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

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 (or 1024 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 in Schedule O)

19 Describe in 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: **▶**
DONNA LAYBURN
2447 SANTA CLARA AVE.
ALAMEDA CA 94501 510-523-1392

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck 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 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
 - List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
 - List all of the organization's **former** directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.
- List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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

(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)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(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) DONNA LAYBURN	10.00									
PRESIDENT	0.00	X		X				0	0	0
(2) STEVE BUSSE	10.00									
VICE PRESIDENT	0.00	X		X				0	0	0
(3) DEB KNOWLES	10.00									
SECRETARY	0.00	X		X				0	0	0
(4) DUANE WATSON	10.00									
TREASURER	0.00	X		X				0	0	0
(5) JULIE BARON	2.00									
DIRECTOR	0.00	X						0	0	0
(6) RICH KRINKS	2.00									
DIRECTOR	0.00	X						0	0	0
(7) KYLE CONNER	2.00									
DIRECTOR	0.00	X						0	0	0
(8) KATE PRYOR	2.00									
DIRECTOR	0.00	X						0	0	0
(9) CINDY KAHL	2.00									
DIRECTOR	0.00	X						0	0	0
(10) TERRI MITCHELL	2.00									
DIRECTOR	0.00	X						0	0	0
(11) RON MOONEY	2.00									
DIRECTOR	0.00	X						0	0	0

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)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(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) ARTHUR MERCADO	2.00									
DIRECTOR	0.00	X						0	0	0
(13) ROBB RATTO	40.00									
EXECUTIVE DIRECTOR	0.00						X	87,282	0	0
1b Sub-total								87,282		
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								87,282		

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**

3 Did the organization list any **former** officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual

	Yes	No
3	X	

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual

4		X
----------	--	---

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

5		X
----------	--	---

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 RevenueCheck 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
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a				
	b Membership dues	1b	120,458			
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	929			
	g Noncash contributions included in lines 1a-1f: \$					
	h Total. Add lines 1a-1f.		121,387			
Program Service Revenue	2a CAR SHOW	Busn. Code	18,272	18,272		
	b TRASH DISPOSAL		3,600	3,600		
	c MUNI LOT		3,000	3,000		
	d SHOPPING GUIDE		2,500	2,500		
	e CUSTOMER APPRECIATION DAY		1,665	1,665		
	f All other program service revenue		1,300	1,300		
	g Total. Add lines 2a-2f.		30,337			
	Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)				
4 Income from investment of tax-exempt bond proceeds						
5 Royalties						
		(i) Real (ii) Personal				
6a Gross rents						
b Less: rental exps.						
c Rental inc. or (loss)						
d Net rental income or (loss)						
7a Gross amount from sales of assets other than inventory		(i) Securities (ii) Other				
b Less: cost or other basis & sales exps.						
c Gain or (loss)						
d Net gain or (loss)						
8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18		a	214,332			
b Less: direct expenses		b	107,613			
c Net income or (loss) from fundraising events			106,719			
9a Gross income from gaming activities. See Part IV, line 19		a				
b Less: direct expenses		b				
c Net income or (loss) from gaming activities						
10a Gross sales of inventory, less returns and allowances	a					
b Less: cost of goods sold	b					
c Net income or (loss) from sales of inventory						
Miscellaneous Revenue	11a	Busn. Code				
	b					
	c					
	d All other revenue					
	e Total. Add lines 11a-11d					
	12 Total revenue. See instructions.		258,443	30,337	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
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	114,642	57,321	57,321	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	12,000		12,000	
10 Payroll taxes	12,090		12,090	
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	7,584		7,584	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	20,948		20,948	
12 Advertising and promotion	3,437	3,437		
13 Office expenses	4,690	2,373	2,317	
14 Information technology	497		497	
15 Royalties				
16 Occupancy	18,190		18,190	
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	2,232		2,232	
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	86	86		
23 Insurance	5,764		5,764	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a MAINT. & IMPROVEMENT COMM	13,085	13,085		
b PROMOTION COMMITTEE	10,140	10,140		
c T-SHIRTS	5,808	5,808		
d OTHER- REST	4,853		4,853	
e All other expenses	16,173	12,505	3,668	
25 Total functional expenses. Add lines 1 through 24e	252,219	104,755	147,464	0
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part X ☐

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest bearing	10,414	1	17,191
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net	2,550	3	
	4 Accounts receivable, net	1,375	4	6,800
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	1,125	9	7,007
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 10,228		
	b Less: accumulated depreciation	10b 10,228	86	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		15	
16 Total assets. Add lines 1 through 15 (must equal line 34)	15,550	16	30,998	
Liabilities	17 Accounts payable and accrued expenses		17	
	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 current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		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	8,104	25	17,328
	26 Total liabilities. Add lines 17 through 25	8,104	26	17,328
	Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.		
27 Unrestricted net assets		570	27	1,686
28 Temporarily restricted net assets		6,876	28	11,984
29 Permanently restricted net assets			29	
Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.				
30 Capital stock or trust principal, or current funds			30	
31 Paid-in or capital surplus, or land, building, or equipment fund			31	
32 Retained earnings, endowment, accumulated income, or other funds			32	
33 Total net assets or fund balances		7,446	33	13,670
34 Total liabilities and net assets/fund balances		15,550	34	30,998

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response or note to any line in this Part XI ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	258,443
2	Total expenses (must equal Part IX, column (A), line 25)	2	252,219
3	Revenue less expenses. Subtract line 2 from line 1	3	6,224
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	7,446
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	13,670

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII ☐

	Yes	No
1 Accounting method used to prepare the Form 990: <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 in Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were 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		X
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		X
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.		
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		

**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.

▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

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Inspection

Name of the organization

Employer identification number

PARK STREET BUSINESS ASSOCIATION, IN**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.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? <input type="checkbox"/> Yes <input type="checkbox"/> No		
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? <input type="checkbox"/> Yes <input type="checkbox"/> No		

Part II Conservation Easements.

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of a historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶

4 Number of states where property subject to conservation easement is located ▶

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

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

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

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1	▶ \$
(ii) Assets included in Form 990, Part X	▶ \$

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenue included on Form 990, Part VIII, line 1	▶ \$
b Assets included in Form 990, Part X	▶ \$

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 are a 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 programs

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:

c Beginning balance

d Additions during the year

e Distributions during the year

f Ending balance

	Amount
1c	
1d	
1e	
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

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 Temporarily restricted 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

(ii) related organizations

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?

	Yes	No
3a(i)		
3a(ii)		
3b		

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		10,228	10,228	

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

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)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

Part VIII Investments—Program Related.

Complete if the organization answered "Yes" on Form 990, Part 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)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

Part IX Other Assets.

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

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

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) UNEARNED REVENUE	17,328
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	17,328

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

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.

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

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.

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

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.

Part XIII Supplemental Information (continued)

**SCHEDULE G
(Form 990 or 990-EZ)**Department of the Treasury
Internal Revenue Service**Supplemental Information Regarding Fundraising or Gaming Activities**

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

▶ Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

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Name of the organization

PARK STREET BUSINESS ASSOCIATION, IN

Employer identification number

Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17.
Form 990-EZ filers are not required to complete this part.**1** Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a ☐ Mail solicitations
 b ☐ Internet and email solicitations
 c ☐ Phone solicitations
 d ☐ In-person solicitations
 e ☐ Solicitation of non-government grants
 f ☐ Solicitation of government grants
 g ☐ Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ Yes ☐ No**b** If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total						

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		ART & WINE FAIR (event type)	SPRING FESTIVAL (event type)	NONE (total number)	(add col. (a) through col. (c))
Revenue	1 Gross receipts	141,372	72,960		214,332
	2 Less: Contributions				
	3 Gross income (line 1 minus line 2)	141,372	72,960		214,332
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	68,488	39,125		107,613
	10 Direct expense summary. Add lines 4 through 9 in column (d)				107,613
11 Net income summary. Subtract line 10 from line 3, column (d)				106,719	

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

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
		1 Gross revenue			
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
6 Volunteer labor	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No		
7 Direct expense summary. Add lines 2 through 5 in column (d)					
8 Net gaming income summary. Subtract line 7 from line 1, column (d)					

9 Enter the state(s) in which the organization conducts gaming activities:

a Is the organization licensed to conduct gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain:

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain:

Schedule G (Form 990 or 990-EZ) 2015

PARK STREET BUSINESS ASSOCIATION, INC.Page **3**

- 11** Does the organization conduct gaming activities with nonmembers? ☐ Yes ☐ No
- 12** Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No
- 13** Indicate the percentage of gaming activity conducted in:
- | | | |
|--------------------------------------|------------|---|
| a The organization's facility | 13a | % |
| b An outside facility | 13b | % |
- 14** Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶

Address ▶

- 15a** Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ Yes ☐ No
- b** If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$
- c** If "Yes," enter name and address of the third party:

Name ▶

Address ▶

16 Gaming manager information:

Name ▶

Gaming manager compensation ▶ \$

Description of services provided ▶

☐ Director/officer
☐ Employee
☐ Independent contractor
17 Mandatory distributions:

- a** Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No
- b** Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$

Part IV **Supplemental Information.** Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).

SCHEDULE J
(Form 990)Department of the Treasury
Internal Revenue Service

Name of the organization

Compensation InformationFor certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees

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

▶ Attach to Form 990.

▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

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Employer identification number

PARK STREET BUSINESS ASSOCIATION, IN**Part I Questions Regarding Compensation****1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain**2** Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?**3** Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|--|--|
| <input type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment? **4a** ☒
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan? **4b** ☒
- c** Participate in, or receive payment from, an equity-based compensation arrangement? **4c** ☒

If "Yes" to any of lines 4a–c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5–9.**5** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization? **5a**
- b** Any related organization? **5b**
- If "Yes" to line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization? **6a**
- b** Any related organization? **6b**
- If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described on lines 5 and 6? If "Yes," describe in Part III**8** Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III**9** If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

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

Schedule J (Form 990) 2015

Schedule J (Form 990) 2015

PARK STREET BUSINESS ASSOCIATION, INPage **2****Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use duplicate copies if additional space is needed.

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)–(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
ROBB RATTO	(i)	87,282	0	0	0	0	87,282	0
1 EXECUTIVE DIRECTOR	(ii)	0	0	0	0	0	0	0
2	(i)							
	(ii)							
3	(i)							
	(ii)							
4	(i)							
	(ii)							
5	(i)							
	(ii)							
6	(i)							
	(ii)							
7	(i)							
	(ii)							
8	(i)							
	(ii)							
9	(i)							
	(ii)							
10	(i)							
	(ii)							
11	(i)							
	(ii)							
12	(i)							
	(ii)							
13	(i)							
	(ii)							
14	(i)							
	(ii)							
15	(i)							
	(ii)							
16	(i)							
	(ii)							

Schedule J (Form 990) 2015

Part III Supplemental Information

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

SCHEDULE O
(Form 990 or 990-EZ)Department of the Treasury
Internal Revenue Service

Name of the organization

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

▶ Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2015**Open to Public
Inspection**

Employer identification number

PARK STREET BUSINESS ASSOCIATION, IN**FORM 990 - ORGANIZATION'S MISSION**

THE PARK STREET BUSINESS ASSOCIATION COVERS THE DOWNTOWN ALAMEDA BUSINESSES
AND WAS FIRST FORMED IN 1981. WE SERVE AS A SUPPORT NETWORK FOR THE 450+
BUSINESSES LOCATED WITHIN ALAMEDA'S PARK STREET BUSINESS IMPROVEMENT AREA.
THE DOWNTOWN ASSOCIATION'S GOAL IS TO DEVELOP AN ECONOMICALLY PROSPEROUS
BUSINESS DISTRICT THROUGH A UNITED EFFORT OF ITS MEMBERS.

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

034

Date Accepted _____

DO NOT MAIL THIS FORM TO THE FTB

TAXABLE YEAR
2015**California e-file Return Authorization for
Exempt Organizations**FORM
8453-EO

Exempt Organization name

PARK STREET BUSINESS ASSOCIATION, IN

Identifying number

Part I Electronic Return Information (whole dollars only)

1	Total gross receipts (Form 199, line 4)	1	366,056
2	Total gross income (Form 199, line 8)	2	366,056
3	Total expenses and disbursements (Form 199, Line 9)	3	359,832

Part II Settle Your Account Electronically for Taxable Year 2015

4	<input type="checkbox"/> Electronic funds withdrawal	4a Amount	4b Withdrawal date (mm/dd/yyyy)
---	--	-----------	---------------------------------

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

5	Routing number	7	Type of account: <input type="checkbox"/> Checking <input type="checkbox"/> Savings
6	Account number		

Part IV Declaration of Officer

I authorize the exempt organization's account to be settled as designated in Part II. If I check Part II, Box 4, I authorize an electronic funds withdrawal for the amount listed on line 4a.

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 2015 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 fee liability, the exempt organization will remain liable for the fee 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.

Sign
Here

Signature of officer

11/30/16

Date

**PRESIDENT**

Title

Part V 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, 2015 e-file 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
SignERO's
signature

Date

Check if
also paid
preparerCheck
if self-
employed☒

ERO's PTIN

FEIN

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

 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
SignPaid
preparer's
signature

Date

01/20/17Check
if self-
employed☒

Paid preparer's PTIN

FEIN

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

 ZIP code
94501

Voucher at bottom of page.

**DO NOT MAIL A PAPER COPY OF THE CORPORATE OR EXEMPT ORGANIZATION TAX RETURN
WITH THE PAYMENT VOUCHER.**

If the amount of payment is zero, do not mail this voucher.

WHERE TO FILE:

Using black or blue ink, make check or money order payable to the "Franchise Tax Board." Write the corporation number or FEIN and "2015 FTB 3586" on the check or money order. Detach voucher below. Enclose, but **do not** staple, payment with voucher and mail to:

**FRANCHISE TAX BOARD
PO BOX 942857
SACRAMENTO CA 94257-0531**

Make all checks or money orders payable in U.S. dollars and drawn against a U.S. financial institution.

WHEN TO FILE:

Fiscal year – See instructions.

Calendar year corporations – File and Pay by March 15, 2016.

**Calendar year exempt organizations – File and Pay by
May 16, 2016.**

When the due date falls on a weekend or holiday, the deadline to file and pay without penalty is extended to the next business day.

Due to the Emancipation Day holiday on April 16, 2016, tax returns filed and payments mailed or submitted on April 18, 2016, will be considered timely.

ONLINE SERVICES:

Corporations can make payments online with Web Pay for Businesses. After a one-time online registration, corporations can make an immediate payment or schedule payments up to a year in advance. Go to ftb.ca.gov for more information.

DETACH HERE

IF NO PAYMENT IS DUE, DO NOT MAIL THIS VOUCHER

DETACH HERE

CAUTION: You may be required to pay electronically, see instructions.

TAXABLE YEAR

**Payment Voucher for Corporations and Exempt
Organizations e-filed Returns**

CALIFORNIA FORM

2015

3586 (e-file)

[REDACTED] PARK [REDACTED] 000000000000 15 FORM 3
 TYB 07-01-2015 TYE 06-30-2016
 PARK STREET BUSINESS ASSOCIATIONIN
 2447 SANTA CLARA AVENUE STE 302
 ALAMEDA CA 94501

Amount of Payment 10.

034

6181156

FTB 3586 2015

TAXABLE YEAR **California Exempt Organization**
2015 Annual Information Return

FORM

199Calendar Year 2015 or fiscal year beginning (mm/dd/yyyy) **07/01/2015**, and ending (mm/dd/yyyy) **06/30/2016**

Corporation/Organization name

PARK STREET BUSINESS ASSOCIATION, IN

California corporation number

FEIN

Street address (suite or room)

2447 SANTA CLARA AVENUE SUITE 302

PMB no.

City

ALAMEDA

State

CA

Zip code

94501

Foreign country name

Foreign province/state/county

Foreign postal code

- A** First Return ☐ Yes ☒ No
- B** Amended Return ☐ Yes ☒ No
- C** IRC Section 4947(a)(1) trust ☐ Yes ☒ No
- D** Final Information Return?
☐ Dissolved ☐ Surrendered (Withdrawn) ☐ Merged/Reorganized
 Enter date: (mm/dd/yyyy) •
- E** Check accounting method: (1) ☐ Cash (2) ☒ Accrual (3) ☐ Other
- F** Federal return filed? (1) ☐ 990T (2) ☐ 990-PF (3) ☐ Sch H (990)
 (4) ☐ Other 990 series
- G** Is this a group filing? See instructions ☐ Yes ☒ No
- H** Is this organization in a group exemption? ☐ Yes ☒ No
 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 ☒ 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 ☒ No
 If "Yes," enter the gross receipts from nonmember sources. \$
- L** If organization is exempt under R&TC Section 23701d and meets the filing fee exception, check box.
 No filing fee is required ☐
- M** Is the organization a Limited Liability Company? ☐ Yes ☒ No
- N** Did the organization file Form 100 or Form 109 to report taxable income? ☐ Yes ☒ No
- O** Is the organization under audit by the IRS or has the IRS audited in a prior year? ☐ Yes ☒ No
- P** Is federal Form 1023/1024 pending? ☐ Yes ☒ No
 Date filed with IRS

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

Receipts and Revenues	1	Gross sales or receipts from other sources. From Side 2, Part II, line 8	1	244,669	00
	2	Gross dues and assessments from members and affiliates	2		00
	3	Gross contributions, gifts, grants, and similar amounts received	3	121,387	00
	4	Total gross receipts for filing requirement test. Add line 1 through line 3. This line must be completed. If the result is less than \$50,000, see General Instruction B	4	366,056	00
	5	Cost of goods sold	5		00
	6	Cost or other basis, and sales expenses of assets sold	6		00
	7	Total costs. Add line 5 and line 6	7		00
	8	Total gross income. Subtract line 7 from line 4	8	366,056	00
Expenses	9	Total expenses and disbursements. From Side 2, Part II, line 18	9	359,832	00
	10	Excess of receipts over expenses and disbursements. Subtract line 9 from line 8	10	6,224	00
Filing Fee	11	Total payments	11		00
	12	Use tax. See General Instruction K	12		00
	13	Payment balance. If line 11 is more than line 12, subtract line 12 from line 11	13		00
	14	Use tax balance. If line 12 is more than line 11, subtract line 11 from line 12	14		00
	15	Filing fee \$10 or \$25. See General Instruction F	15	10	00
	16	Penalties and Interest. See General Instruction J	16		00
	17	Balance due. Add line 12, line 15, and line 16. Then subtract line 11 from the result	17	10	00
Sign Here	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 taxpayer) is based on all information of which preparer has any knowledge.				
Paid Preparer's Use Only	Signature of officer	Title PRESIDENT	Date 01/20/2017	Check if self-employed <input checked="" type="checkbox"/>	Telephone PTIN FEIN Telephone 510-521-0252
	Preparer's signature				
	Firm's name (or yours, if self-employed) and address	RYAN VAN VALER, E.A. 2447 SANTA CLARA AVENUE SUITE 300 ALAMEDA, CA 94501			
	May the FTB discuss this return with the preparer shown above? See instructions <input type="checkbox"/> Yes <input type="checkbox"/> No				

PARK STREET BUSINESS ASSOCIATION, IN**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.**

Receipts from Other Sources	1	Gross sales or receipts from all business activities. See instructions	•	1	30,337	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 SEE STATEMENT 1	•	7	214,332	00
	8	Total gross sales or receipts from other sources. Add line 1 through line 7. Enter here and on Side 1, Part I, line 1		8	244,669	00
Expenses and Disbursements	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 SEE STATEMENT 2	•	11		00
	12	Other salaries and wages	•	12	114,642	00
	13	Interest	•	13		00
	14	Taxes	•	14		00
	15	Rents	•	15	18,190	00
	16	Depreciation and depletion (See instructions)	•	16	86	00
	17	Other Expenses and Disbursements. Attach schedule. SEE STATEMENT 3	•	17	226,914	00
	18	Total expenses and disbursements. Add line 9 through line 17. Enter here and on Side 1, Part I, line 9		18	359,832	00

Schedule L Balance Sheets		Beginning of taxable year		End of taxable year	
		(a)	(b)	(c)	(d)
Assets					
1	Cash		10,414	•	17,191
2	Net accounts receivable		3,925	•	6,800
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	26,262		10,228	
	b Less accumulated depreciation	(26,176)	86	(10,228)	
11	Land			•	
12	Other assets. STMT 4		1,125	•	7,007
13	Total assets		15,550		30,998
Liabilities and net worth					
14	Accounts payable			•	
15	Contributions, gifts, or grants payable			•	
16	Bonds and notes payable			•	
17	Mortgages payable			•	
18	Other liabilities. STMT 5		8,104		17,328
19	Capital stock or principal fund			•	
20	Paid-in or capital surplus. Attach reconciliation			•	
21	Retained earnings or income fund		7,446	•	13,670
22	Total liabilities and net worth		15,550		30,998

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	•	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	Total. 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	
5	Expenses recorded on books this year not deducted in this return. Attach schedule	•			
6	Total. Add line 1 through line 5				

California Statements

FYE: 6/30/2016

Statement 1 - Form 199, Part II, Line 7 - Other Income

<u>Description</u>	<u>Amount</u>
ART & WINE FAIRE	\$ 141,372
SPRING FESTIVAL	72,960
TOTAL	<u>\$ 214,332</u>

FYE: 6/30/2016

Statement 2 - Form 199, Part II, Line 11 - Officer Compensation

Name	Address	Avg Hrs	Compensation Amount
City	State Zip		
DONNA LAYBURN	PRESIDENT	10.00	
STEVE BUSSE	VICE PRESIDENT	10.00	
DEB KNOWLES	SECRETARY	10.00	
DUANE WATSON	TREASURER	10.00	
JULIE BARON	DIRECTOR	2.00	
RICH KRINKS	DIRECTOR	2.00	
KYLE CONNER	DIRECTOR	2.00	
KATE PRYOR	DIRECTOR	2.00	
CINDY KAHL	DIRECTOR	2.00	
TERRI MITCHELL	DIRECTOR	2.00	
RON MOONEY	DIRECTOR	2.00	
ARTHUR MERCADO	DIRECTOR	2.00	
TOTAL			<u>0</u>

California Statements

FYE: 6/30/2016

Statement 3 - Form 199, Part II, Line 17 - Other Expenses

Description	Amount
ART & WINE FAIRE	\$ 11,103
BEER	7,052
WINE	8,519
GLASSES	6,601
SALES TAX	4,548
TABLES/CHAIRS RENTALS	477
SPONSORS BOOTHS	1,250
LUMPERS	3,450
BIKE MONITORS	350
DUMPSTER	2,500
ELECTICIAN	2,000
ADVERTISING	6,918
POSTER	49
SECURITY	1,632
RENTAL TRUCKS	207
AWF ICE	1,995
AWF T-SHIRTS	2,949
MISC.	2,068
PERMITS	1,410
DRINK TICKETS	85
SUPPLIES	332
BANNERS	93
PRESSURE WASHING	2,900
SPRING FESTIVAL	2,290
TRASH/RECYCLE	2,500
POSTER	49
MUSIC CLEARANCE	148
VOLUNTEER TOKENS	450
SALES TAX	2,355
GLASSES	3,825
BEER	3,150
WINE	2,788
CABLE AD PRODUCTION	1,100
CABLE ADS	6,523
BANNER	89
PERMITS	972
DRINK TICKETS	55
POLICE	1,632
TABLES/CHAIRS RENTALS	388
PRINTING	82
BIKE PARKING	550
ELECTRICAL	1,000
LUMPERS	1,900
BOOTHES	720
TRUCK RENTAL	130
ICE	1,350
SUJPPPLIES	417
MISC.	893
PRESSURE WASHING	2,900
SPRING FESTIVAL - OTHER	869

California Statements

FYE: 6/30/2016

Statement 3 - Form 199, Part II, Line 17 - Other Expenses (continued)

Description	Amount
CAR SHOW	\$
TOILET RENTAL	2,532
BIKE PARKING	307
CABLE ADS	240
MUSIC	3,971
LUMPERS	800
POSTER	500
BANNER	49
PLATES	93
T-SHIRTS	991
MISC.	5,808
PRINTING	871
POSTAGE	176
	387
CUSTOMER APPRECIATION DAY	
	199
	905
MUSIC	300
BALLOONS	162
CCD BANNER	1,158
OTHER EMPLOYEE BENEFITS	12,000
PAYROLL TAXES	12,090
ACCOUNTING	7,584
MARKETING	20,948
SHOPPING GUIDES	2,174
PRINTING	167
POSTAGE	480
CONFERENCES, MEETINGS	2,232
POWER BOX ART	2,500
MEMBERSHIP	3,668
PROMOTION COMMITTEE	10,140
MAINT. & IMPROVEMENT COMM	13,085
OTHER- REST	4,853
SUPPLIES	1,605
OTHER	65
COMPUTER REPAIR	497
WORKERS COMP	1,632
LIABILITY/ D&O	4,132
TOTAL	\$ 226,914

Statement 4 - Form 199, Schedule L, Line 12 - Other Assets

Description	Beginning of Year	End of Year
PREPAID EXPENSES	\$ 1,125	\$ 7,007
TOTAL	\$ 1,125	\$ 7,007

California Statements

FYE: 6/30/2016

Statement 5 - Form 199, Schedule L, Line 18 - Other Liabilities

<u>Description</u>	<u>Beginning of Year</u>	<u>End of Year</u>
UNEARNED REVENUE	\$ 8,104	\$ 17,328
TOTAL	<u>\$ 8,104</u>	<u>\$ 17,328</u>

TAXABLE YEAR

2015**Corporation Depreciation
and Amortization**

CALIFORNIA FORM

3885Attach to Form 100 or Form 100W. **FORM 199**

Corporation name

California corporation number

PARK STREET BUSINESS ASSOCIATION, IN**Part I Election To Expense Certain Property Under IRC Section 179**

1	Maximum deduction under IRC Section 179 for California	1	
2	Total cost of IRC Section 179 property placed in service	2	
3	Threshold cost of IRC Section 179 property before reduction in limitation	3	
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for taxable year. Subtract line 4 from line 1. If zero or less, enter -0-	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property (elected IRC Section 179 cost)	7	
8	Total elected cost of IRC Section 179 property. Add amounts in column (c), line 6 and line 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from prior taxable years	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5	11	
12	IRC Section 179 expense deduction. Add line 9 and line 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2016. Add line 9 and line 10, less line 12	13	

Part II Depreciation and Election of Additional First Year Depreciation Deduction Under R&TC Section 24356

(a) Description of property	(b) Date acquired (mm/dd/yyyy)	(c) Cost or other basis	(d) Depreciation allowed or allowable in earlier years	(e) Depreciation method	(f) Life or rate	(g) Depreciation for this year	(h) Additional first year depreciation
14	SEE STATEMENT 1	1				86	
15	Add the amounts in column (g) and column (h). The total of column (h) may not exceed \$2,000. See instructions for line 14, column (h)	15				86	

Part III Summary

16	Total: If the corporation is electing: IRC Section 179 expense, add the amount on line 12 and line 15, column (g) or Additional first year depreciation under R&TC Section 24356, add the amounts on line 15, columns (g) and (h) or Depreciation (if no election is made), enter the amount from line 15, column (g)	16	86
17	Total depreciation claimed for federal purposes from federal Form 4562, line 22	17	
18	Depreciation adjustment. If line 17 is greater than line 16, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 17 is less than line 16, enter the difference here and on Form 100 or Form 100W, Side 2, line 12. (If California depreciation amounts are used to determine net income before state adjustments on Form 100 or Form 100W, no adjustment is necessary.)	18	

Part IV Amortization

(a) Description of property	(b) Date acquired (mm/dd/yyyy)	(c) Cost or other basis	(d) Amortization allowed or allowable in earlier years	(e) R&TC section (see instructions)	(f) Period or percentage	(g) Amortization for this year
19						
20	Total. Add the amounts in column (g)	20				
21	Total amortization claimed for federal purposes from federal Form 4562, line 44	21				
22	Amortization adjustment. If line 21 is greater than line 20, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 21 is less than line 20, enter the difference here and on Form 100 or Form 100W, Side 2, line 12	22				

FYE: 6/30/2016

Indirect Depreciation

Statement 1 - Form 3885, Part II, Line 14 - Depreciation Detail Information

Description	Date Acquired	Cost / Basis	Accum Depr	Method	Life / Rate	Current Depr	Add'l 1st Year
FURNISHINGS AND EQUIPMENT	6/30/06	\$ 10,228	\$ 10,142	MACRS	10	\$ 86	\$
TOTAL		<u>\$ 10,228</u>	<u>\$ 10,142</u>			<u>\$ 86</u>	<u>\$ 0</u>



Bank of Marin

PO Box 2039
Novato, CA 94948-2039

PARK STREET BUSINESS ASSOC
2447 SANTA CLARA AVE #302
ALAMEDA CA 94501-4579

Account Number: [REDACTED]
Statement Period: 05/31/16 - 06/30/16
Page: 1 of 4

Customer Service Information

Branch:
Mon-Fri 10am-6pm 510-748-8425
Touch Tone Banking: 800-654-5111

Lost or Stolen Card:
Mon-Fri 9am-6pm 415-884-4551
After Hours 800-236-2442

Written Inquiries:
1416 PARK STREET
ALAMEDA, CA 94501

Visit us Online: www.bankofmarin.com

Account Summary for CHECKING ACCOUNT [REDACTED]

Beginning Balance as of 05/31/16	\$40,163.57
(+) Deposits and Credits (2)	25,461.00
(-) Withdrawals and Debits (27)	33,401.52
Ending Balance as of 06/30/16	\$32,223.05
Enclosures	22

Checks Posted

* Skip in check sequence

Number	Date	Amount	Number	Date	Amount	Number	Date	Amount
2138	06/01	80.00	2161	06/21	100.00	2168	06/21	1,961.00
2151*	06/02	2,900.00	2162	06/21	56.89	2169	06/20	180.00
2154*	06/07	148.00	2163	06/09	280.00	2170	06/22	37.71
2155	06/03	560.00	2164	06/06	84.44	2171	06/17	107.45
2157*	06/09	180.00	2165	06/06	2,269.00	2172	06/22	750.00
2158	06/22	1,200.00	2166	06/08	766.50	2173	06/24	125.00
2159	06/08	2,122.87	2167	06/09	1,323.00	2174	06/24	175.00
2160	06/13	1,213.50						

Debits

Date	Description	Subtractions
06/02	Preauthorized Debit BUSONLINE P/R PR MO FEE 160602	49.99
06/02	Preauthorized Debit PAYROLL SERVICE 5B4S 160602 5B4S 5B4S	5,883.07
06/10	Preauthorized Debit COMCAST CABLE 160610	159.59
06/16	Preauthorized Debit PAYROLL SERVICE 5B4S 160616 5B4S 5B4S	4,806.57
06/30	Preauthorized Debit PAYROLL SERVICE 5B4S 160630 5B4S 5B4S	5,881.94



Checks Outstanding

[illegible]

1 Check off (✓) checks appearing on your statement. Those checks not checked off (✓) should be recorded in the checks outstanding column

Enter your checkbook balance		
Add any credit made to your account through transfers, interest, etc. as shown on this statement. (Be sure to enter these in your checkbook.)		
Subtract any debits made to your account through transfers, account fees, etc. as shown on this statement. (Be sure to enter these in your checkbook.)		
Adjusted checkbook balance		

3		
Bank Balance shown on this statement.		
Add deposits shown in your checkbook, but not shown on this statement, because they were made and received after date of this statement		
Subtotal		
Subtract checks outstanding		
Adjusted bank balance		

Your checkbook is in balance if line **A** agrees with line **B**.

The following notices apply to your account if it is maintained primarily for personal, family or household purposes. Electronic Fund Transfer transactions (EFT transactions) are transactions processed electronically. ATM transactions and transactions processed through the Automated Clearing House Association, such as direct deposit of Social Security benefits are EFT transactions.

Telephone us at 866.626-6004 to report lost/stolen cards or to reach your branch office for all other EFT issues. Write to us at Bank of Marin, ATTN: Central Operations, PO Box 2039, Novato, CA 94948-2039, as soon as you can, if you think your statement or receipt is wrong or if you need more information about a transfer listed on the statement or receipt. We must hear from you no later than 60 days after we send you the first statement on which the problem or error appeared.

- (1) Tell us your name and account number
- (2) Describe the error or the transfer you are unsure about, and explain as clearly as you can why you believe it is an error or why you need more information.

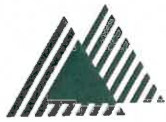
- (3) Tell us the dollar amount of the suspected error.

If you tell us orally, we may require that you send us your complaint or question in writing within 10 business days.

We will tell you the results of our investigation within 10 or 5 (VISA® Check Card) business days after we hear from you and will correct any error promptly. If we need more time, however, we may take up to 45 days (or in some cases, up to 90 days) to investigate your complaint or questions. If we decide to do this, we will credit your account within 10 or 5 (VISA® Check Card) business days for the amount you think is in error, so that you will have use of the money during the time it takes us to complete our investigation. If we ask you to put your complaint or question in writing and do not receive it within 10 business days, we may not credit your account.

If we decide that there was no error, we will send you a written explanation within 3 business days after we finish our investigation. You may ask for copies of the documents that we used in our investigation.

(R 09/15)



Bank of Marin

Account Number: [REDACTED]
Statement Period: 05/31/16 - 06/30/16
Page: 2 of 4

CHECKING ACCOUNT (continued) Account [REDACTED]

Credits

Date	Description	Additions
06/09	Deposit	6,936.00
06/24	Deposit	18,525.00

Daily Balances

Date	Amount	Date	Amount	Date	Amount
05/31	40,163.57	06/08	25,299.70	06/20	23,985.59
06/01	40,083.57	06/09	30,452.70	06/21	21,867.70
06/02	31,250.51	06/10	30,293.11	06/22	19,879.99
06/03	30,690.51	06/13	29,079.61	06/24	38,104.99
06/06	28,337.07	06/16	24,273.04	06/30	32,223.05
06/07	28,189.07	06/17	24,165.59		

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





Account Number: [REDACTED]
Statement Period: 05/31/16 - 06/30/16
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PARK STREET BUSINESS ASSOCIATION
P.O. BOX 1282
2447 SANTA CLARA AVE #202
ALAMEDA, CA 94601-4578

BANK OF MARIN
ALAMEDA, CA 94601
90-41871211

5/30/2016

PAY TO THE ORDER OF: Fastless Repair Service

\$ 80.00

Eighty and 00/100*****

MEMO: Invoice # 2355
Copper Cables Repair

Quana Lito
Russell

Check # 2138, Posted 06/01/16, Amount 80.00

**PARK STREET BUSINESS ASSOC
DBA DOWNTOWN ALAMEDA BUSINESS ASSOC**
P.O. BOX 1282
2447 SANTA CLARA AVE #202
ALAMEDA, CA 94601-4578

BANK OF MARIN
ALAMEDA, CA 94601
90-41871211

5/31/2016

PAY TO THE ORDER OF: West Advertising

\$ 2,122.87

Two Thousand One Hundred Twenty-Two and 87/100*****

MEMO: Quarterly Fee, TV Ad Prep, Print Ad Prep

Quana Lito
Russell

Check # 2159, Posted 06/08/16, Amount 2,122.87

PARK STREET BUSINESS ASSOCIATION
P.O. BOX 1282
2447 SANTA CLARA AVE #202
ALAMEDA, CA 94601-4578

BANK OF MARIN
ALAMEDA, CA 94601
90-41871211

5/20/2016

PAY TO THE ORDER OF: Ultra Wash

\$ 2,900.00

Two Thousand Nine Hundred and 00/100*****

MEMO: Spring Festival Pressure Washing

Quana Lito
Russell

Check # 2151, Posted 06/02/16, Amount 2,900.00

**PARK STREET BUSINESS ASSOC
DBA DOWNTOWN ALAMEDA BUSINESS ASSOC**
P.O. BOX 1282
2447 SANTA CLARA AVE #202
ALAMEDA, CA 94601-4578

BANK OF MARIN
ALAMEDA, CA 94601
90-41871211

5/31/2016

PAY TO THE ORDER OF: Eckstrom Productions

\$ 1,213.50

One Thousand Two Hundred Thirteen and 50/100*****

MEMO: Eckstrom Productions
Boat/Trip/Chair - SP

Quana Lito
Russell

Check # 2160, Posted 06/13/16, Amount 1,213.50

**PARK STREET BUSINESS ASSOC
DBA DOWNTOWN ALAMEDA BUSINESS ASSOC**
P.O. BOX 1282
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ALAMEDA, CA 94601-4578

BANK OF MARIN
ALAMEDA, CA 94601
90-41871211

5/31/2016

PAY TO THE ORDER OF: SESAC

\$ 148.00

One Hundred Forty-Eight and 00/100*****

MEMO: Spring Festival Music Clearance

Quana Lito
Russell

Check # 2154, Posted 06/07/16, Amount 148.00

**PARK STREET BUSINESS ASSOC
DBA DOWNTOWN ALAMEDA BUSINESS ASSOC**
P.O. BOX 1282
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ALAMEDA, CA 94601-4578

BANK OF MARIN
ALAMEDA, CA 94601
90-41871211

5/31/2016

PAY TO THE ORDER OF: Rock Wall Winery

\$ 100.00

One Hundred and 00/100*****

MEMO: Spring Festival Wine Delivery

Quana Lito
Russell

Check # 2161, Posted 06/21/16, Amount 100.00

**PARK STREET BUSINESS ASSOC
DBA DOWNTOWN ALAMEDA BUSINESS ASSOC**
P.O. BOX 1282
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ALAMEDA, CA 94601-4578

BANK OF MARIN
ALAMEDA, CA 94601
90-41871211

5/31/2016

PAY TO THE ORDER OF: Lars G. Hansson

\$ 560.00

Five Hundred Sixty and 00/100*****

MEMO: Preparation of 990 Tax Return

Quana Lito
Russell

Check # 2155, Posted 06/03/16, Amount 560.00

**PARK STREET BUSINESS ASSOC
DBA DOWNTOWN ALAMEDA BUSINESS ASSOC**
P.O. BOX 1282
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ALAMEDA, CA 94601-4578

BANK OF MARIN
ALAMEDA, CA 94601
90-41871211

5/31/2016

PAY TO THE ORDER OF: Quill.Com

\$ 56.89

Fifty-Six and 89/100*****

Account # C7276993

MEMO: Coffee Cups & One Case of Paper

Quana Lito
Russell

Check # 2162, Posted 06/21/16, Amount 56.89

**PARK STREET BUSINESS ASSOC
DBA DOWNTOWN ALAMEDA BUSINESS ASSOC**
P.O. BOX 1282
2447 SANTA CLARA AVE #202
ALAMEDA, CA 94601-4578

BANK OF MARIN
ALAMEDA, CA 94601
90-41871211

5/31/2016

PAY TO THE ORDER OF: Hillland Management

\$ 180.00

One Hundred Eighty and 00/100*****

MEMO: May Consulting

Quana Lito
Russell

Check # 2157, Posted 06/09/16, Amount 180.00

**PARK STREET BUSINESS ASSOC
DBA DOWNTOWN ALAMEDA BUSINESS ASSOC**
P.O. BOX 1282
2447 SANTA CLARA AVE #202
ALAMEDA, CA 94601-4578

BANK OF MARIN
ALAMEDA, CA 94601
90-41871211

5/31/2016

PAY TO THE ORDER OF: Lars G. Hansson

\$ 280.00

Two Hundred Eighty and 00/100*****

MEMO: Spring Festival Sellers Permit/Report

Quana Lito
Russell

Check # 2163, Posted 06/09/16, Amount 280.00

**PARK STREET BUSINESS ASSOC
DBA DOWNTOWN ALAMEDA BUSINESS ASSOC**
P.O. BOX 1282
2447 SANTA CLARA AVE #202
ALAMEDA, CA 94601-4578

BANK OF MARIN
ALAMEDA, CA 94601
90-41871211

5/31/2016

PAY TO THE ORDER OF: Stephanie L. Prothero

\$ 1,200.00

One Thousand Two Hundred and 00/100*****

MEMO: Spring Festival First May Invoice

Quana Lito
Russell

Check # 2158, Posted 06/22/16, Amount 1,200.00

**PARK STREET BUSINESS ASSOC
DBA DOWNTOWN ALAMEDA BUSINESS ASSOC**
P.O. BOX 1282
2447 SANTA CLARA AVE #202
ALAMEDA, CA 94601-4578

BANK OF MARIN
ALAMEDA, CA 94601
90-41871211

5/31/2016

PAY TO THE ORDER OF: Robb Ratto

\$ 84.44

Eighty-Four and 44/100*****

MEMO: Meetings

Quana Lito
Russell

Check # 2164, Posted 06/06/16, Amount 84.44



Account Number: [REDACTED]
Statement Period: 05/31/16 - 06/30/16
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2165
PARK STREET BUSINESS ASSOC
DBA DOWNTOWN ALAMEDA BUSINESS ASSOC
P.O. BOX 1282
2447 SANTA CLARA AVE #202
ALAMEDA, CA 94601-4879
BANK OF MARIN
ALAMEDA, CA 94601
90-41871211
6/3/2016
PAY TO THE ORDER OF Artistic Collectables \$ 2,269.00
Two Thousand Two Hundred Sixty-Nine and 00/100*****
Artistic Collectables
MEMO Street Banners

Check # 2165, Posted 06/06/16, Amount 2,269.00

2170
PARK STREET BUSINESS ASSOC
DBA DOWNTOWN ALAMEDA BUSINESS ASSOC
P.O. BOX 1282
2447 SANTA CLARA AVE #202
ALAMEDA, CA 94601-4879
BANK OF MARIN
ALAMEDA, CA 94601
90-41871211
6/15/2016
PAY TO THE ORDER OF Ready Refresh \$ 37.71
Thirty-Seven and 71/100
MEMO 5797 852000
Office Water For May

Check # 2170, Posted 06/22/16, Amount 37.71

2166
PARK STREET BUSINESS ASSOC
DBA DOWNTOWN ALAMEDA BUSINESS ASSOC
P.O. BOX 1282
2447 SANTA CLARA AVE #202
ALAMEDA, CA 94601-4879
BANK OF MARIN
ALAMEDA, CA 94601
90-41871211
6/6/2016
PAY TO THE ORDER OF Equipose \$ 766.50
Seven Hundred Sixty-Six and 50/100*****
Office Cooler
MEMO Office Cooler

Check # 2166, Posted 06/08/16, Amount 766.50

2171
PARK STREET BUSINESS ASSOC
DBA DOWNTOWN ALAMEDA BUSINESS ASSOC
P.O. BOX 1282
2447 SANTA CLARA AVE #202
ALAMEDA, CA 94601-4879
BANK OF MARIN
ALAMEDA, CA 94601
90-41871211
6/15/2016
PAY TO THE ORDER OF Joyce McConaghey \$ 107.48
One Hundred Seven and 48/100
MEMO Supplies/Meeting/RSF Mac

Check # 2171, Posted 06/17/16, Amount 107.45

2167
PARK STREET BUSINESS ASSOC
DBA DOWNTOWN ALAMEDA BUSINESS ASSOC
P.O. BOX 1282
2447 SANTA CLARA AVE #202
ALAMEDA, CA 94601-4879
BANK OF MARIN
ALAMEDA, CA 94601
90-41871211
6/7/2016
PAY TO THE ORDER OF Mason Management \$ 1,323.00
One Thousand Three Hundred Twenty-Three and 00/100*****
June Office Rent
MEMO June Office Rent

Check # 2167, Posted 06/09/16, Amount 1,323.00

2172
PARK STREET BUSINESS ASSOC
DBA DOWNTOWN ALAMEDA BUSINESS ASSOC
P.O. BOX 1282
2447 SANTA CLARA AVE #202
ALAMEDA, CA 94601-4879
BANK OF MARIN
ALAMEDA, CA 94601
90-41871211
6/15/2016
PAY TO THE ORDER OF Stephanie L. Prothro \$ 750.00
Seven Hundred Fifty and 00/100
MEMO Second May Invoice

Check # 2172, Posted 06/22/16, Amount 750.00

2168
PARK STREET BUSINESS ASSOC
DBA DOWNTOWN ALAMEDA BUSINESS ASSOC
P.O. BOX 1282
2447 SANTA CLARA AVE #202
ALAMEDA, CA 94601-4879
BANK OF MARIN
ALAMEDA, CA 94601
90-41871211
6/15/2016
PAY TO THE ORDER OF San Francisco Chronicle \$ 1,961.00
One Thousand Nine Hundred Sixty-One and 00/100*****
Spring Fes
MEMO Spring Fes
10/5/16

Check # 2168, Posted 06/21/16, Amount 1,961.00

2173
PARK STREET BUSINESS ASSOC
DBA DOWNTOWN ALAMEDA BUSINESS ASSOC
P.O. BOX 1282
2447 SANTA CLARA AVE #202
ALAMEDA, CA 94601-4879
BANK OF MARIN
ALAMEDA, CA 94601
90-41871211
6/21/2016
PAY TO THE ORDER OF Jessica Warren \$ 125.00
One Hundred Twenty-Five and 00/100
MEMO Each d Friday slap AD

Check # 2173, Posted 06/24/16, Amount 125.00

2169
PARK STREET BUSINESS ASSOC
DBA DOWNTOWN ALAMEDA BUSINESS ASSOC
P.O. BOX 1282
2447 SANTA CLARA AVE #202
ALAMEDA, CA 94601-4879
BANK OF MARIN
ALAMEDA, CA 94601
90-41871211
6/15/2016
PAY TO THE ORDER OF Bay Area News Group \$ 180.00
One Hundred Eighty and 00/100
MEMO 22014699

Check # 2169, Posted 06/20/16, Amount 180.00

2174
PARK STREET BUSINESS ASSOC
DBA DOWNTOWN ALAMEDA BUSINESS ASSOC
P.O. BOX 1282
2447 SANTA CLARA AVE #202
ALAMEDA, CA 94601-4879
BANK OF MARIN
ALAMEDA, CA 94601
90-41871211
6/21/2016
PAY TO THE ORDER OF ARTS/HA \$ 175.00
One Hundred Seventy-Five and 00/100
MEMO CH Copier Take Away

Check # 2174, Posted 06/24/16, Amount 175.00



