Exhibit 1

DOWNTOWN ALAMEDA BUSINESS ASSOCIATION

February 28, 2019

Debbie Potter
Base ReUse and Community Development Manager
950 West Mall Square, 2nd Floor
Alameda, CA 94501

Dear Ms. Potter:

As President of the Downtown Alameda Business Association, I am pleased to submit the attached BIA Report, accompanying 2019/20 actual year-to-date budget for our association, our committees' Work Plans, and a listing of the current Board of Directors.

In 2019/20 we plan to complete our expansion plan adding Park Street Landing to the downtown Business Improvement Area finalizing its critical role in the future of our downtown "Gateway" district. We have implemented a year-long outreach campaign by which in-person invitations were made to these merchants for mixers and district events. One joined as an Associate Member and another has stated their approval of this expansion project. We have personally canvassed each of the 14 businesses to inform them of the expansion plans, the approval process, and the benefits of being part of the BIA. We will conduct at least one more wave of outreach before we present our annual report to City Council.

Also in 2019/20, we will continue the campaign to secure a successful vote of property owners for the Landscape and Lighting Special District (L&L) assessment increase. Our association, along with its consultant, has been working with Liam Garland and Liz Acord to ensure an affirmative vote. The current assessment fees have not changed since the 1990's and simply do not come close to covering the needs for our growing downtown. Public Works reports that these funds have been consistently exhausted by the start of each summer.

Attached we have provided a description of the activities and accomplishments for FY 2018/19 and proposed goals and work plans for FY 2019/20 as well as our Board approved 2019/20 budget.

Sincerely,

Steve Busse, Board President
Downtown Alameda Business Association

Downtown Alameda Business Association • 2447 Santa Clara Ave, Suite #302, Alameda CA 94501
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DOWNTOWN ALAMEDA BUSINESS ASSOCIATION

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

PROPOSED ASSESSMENT FOR BUSINESS IMPROVEMENT AREA
FISCAL YEAR 2019/20

INTRODUCTION:

The Downtown Alameda Business Association is recommending a BIA budget of one hundred twenty-two thousand ($122,000) in restricted funds for the Downtown Alameda Business Association for fiscal year 2019/2020. This recommendation is based on the actual income derived from the BIA assessment in fiscal 2018/19.

The Board and its committees met throughout the fall of 2018 and again in January 2019 to set our strategic goals and activities. The Board approved these plans on February 27, 2019.

BUDGET:

The BIA provides one of two sources of funding for the entire scope of the activities proposed in this report. The other source of income comes from funds raised by the Downtown Association special events. The Downtown Association will continue its current schedule of street events for the calendar year 2019, which are under contract. We have extended the existing contract for the street events through 2020.

BOUNDARIES:

As mentioned in the cover letter, we are currently working with city staff to expand the Business Improvement Area (BIA) territories to include Park Street Landing which further align the business district boundaries with the Landscape and Lighting (L&L) boundaries. Reasons for the expansion include:

1. To support development in and facilitate a connection between the waterfront, the North of Lincoln Gateway District, and the remainder of the downtown historic district by advocating for waterfront development that could include water taxis and kayak docks.
2. Work with Park Street Landing businesses on a Gateway Arch Project for the continuation of the streetscape and landscaping.

MEMBERSHIP PROFILE:

Over 470 merchants comprise the current boundaries of the downtown district including 110 popular restaurants, bars, and casual eateries. We are proud to report that *100 of these businesses have been in operation for more than 25 years!* The breakdown is as follows:

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

ACTIVITIES:

Our event strategies include the continuation of the street closure events (Spring Festival, Art & Wine Faire, and Classic Car Show), the opportunity to launch incubator events inside the street closure

events such as the Local Alameda Stage to create new excitement for these long-standing events. We will also continue to develop non-street closure activities and promotions including the wildly popular Downtown Strolls, Hot Cocoa Crawl, Shop Late Thursdays, Easter Egg Hunt, Holiday Window Contest, and Small Business Saturday.

These activities are designed to improve the pedestrian-friendly look of the downtown district, improve the vitality, increase sales for our businesses and sales tax revenues for the City, promote individual member businesses and the district as a whole, attract new businesses, and increase the overall business atmosphere in Downtown Alameda.

The creation of our Block Captain program this past year has greatly increased our communications and presence "on the street" with our member businesses. We have 20+ dedicated Block Captains who hit the streets each month sharing information, opportunities, and ideas for all.

FINANCIAL HEALTH:

The Downtown Association is in a healthy financial position for a combination of reasons including conservative financial planning, introduction of new events, and increases in our sponsorships of major events. This year we are again meeting or exceeding our financial goals while expanding service to our membership.

To help ensure long-term health, the Board has implemented policies that require having six months of operation funds in reserve. The policy also provides for regular review and maintenance of the funds, with specific Board approval required for any expenditure made from these funds.

Since 2016, the Downtown Association has moved from a cash basis to accrual accounting basis and implemented regular review of our monthly financial reporting (QuickBooks) by outside accounting management. We also have increased oversight by our Treasurer and Executive Committee of banking, financial planning, and financial obligations of the Downtown Association.

REPORTING:

We have provided a list of identified target activities for all our committees and expanded said committees' responsibilities and accountability with updated work plans that are reviewed at the monthly meetings.

A final financial summary including the Board-approved budget will be forwarded at the end of the 2018/19 fiscal year.

LEADERSHIP:

The Downtown Association's second full year under the leadership of its Executive Director, Janet Magleby, has been marvelously fruitful.

Janet has successfully worked with nearly every department at City Hall serving on committees such as Climate Action Plan, Facade Grant Committee, Carnegie Restoration, Mini Maker Faire Core Leadership. She has also been indispensable in helping kickstart important projects and events like Alameda Restaurant Week, new bicycle rack installation plan, homeless meter program, updated lease and code of conduct for Paul's Newsstand, Foodware Revolution Ordinance, and ReThink Disposables Grant.

Janet and our Board have been tireless advocates for issues like Minimum Wage and Sales Tax increases, Flavored Tobacco Ban, BIA Expansion, L&L Assessment increase, and important developments coming to the district like Park Esquina and the Park Street Hotel.

Additionally, the Downtown Association is enjoying its best relationship with community partners as Janet was an integral part of founding a supportive and collaborative coalition of business associations (C.A.B.A.), has doubled down efforts for 2nd Friday Art Walks, and Love Our Island Art Walks, and even partnered with PHOENIX to submit a joint application to the City's Art Fund grant program.

The Downtown Association's strong financial position under its current leadership has given us the monies to hire our first full-time Membership & Events Coordinator, Aviva Kellman. Aviva's focus is to add to the energy and community spirit that has been noticeable over the last year and a half, as well as to implement member benefits and create new opportunities.

Additionally, Janet and the Board of Directors founded the Clean, Green and Safe Fund and have raised over $38,000 which allowed us to start a Clean Sidewalk Grant program to benefit district members.

Since our last report, 23 new businesses have opened with much fanfare in the district and 18 businesses have joined as new Associate Members. These businesses have enjoyed the fruits of the success we've had with our new website visits and social media followers which have increased by 43% and 35% since the end of 2017, respectively.

The Advisory Committee that we created last year held its 2nd in a series of L&L Campaign meetings for property owners at the Alameda Theatre. All attendees were in favor of the proposed increases and were enlisted to assist with future outreach which has resulted in nearly 15 signed pledge cards.

Overall, member enthusiasm and involvement is at the highest it's been in years, with more people serving on our Board, committees, and as Block Captains; hosting mixers; and attending other association or city-led meetings. We've now outgrown our venue for our annual Holiday Party & Awards Ceremony and mixers regularly have over 50 attendees.

These highlights and more that are detailed in the Committee work plans represent a strong, vital Downtown Association looking to the future. Downtown Alameda is an exciting destination for visitors and residents alike

CONCLUSION:

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

Downtown Alameda Business Association
Approved 2019/20 Budget

BUDGET Item	2019-2020	2018-2019
INCOME:	Board Approved Feb 2019	Sept 2018 Revisions
Unrestricted		
Misc. Income (Assoc Members, P Lot, other misc)	6,000	6,000
Art & Wine Faire (Net)	90,000	96,000
Car Show (Net)	15,000	15,000
Spring Festival (Net)	55,000	55,000
Stroll Events (3-4 events) (2 in 18/19)	40,000	30,000
Unrestricted Income Sub Total	**206,000**	**202,000**
BIA Payments	$ 122,000	$ 122,000
Restricted Income Sub Total	**$ 122,000**	**$ 122,000**
Income Grand Total	**328,000**	**324,000**
EXPENSES:		
Unrestricted	**19/20 Budget**	**18/19 Budget**
Event - Art & Wine (net above breakout for QB)		
Event Car Show (net above breakout for QB)		
Event - Spring Fair (net above breakout for QB)		
Event - Stroll (net above breakout for QB)		
Take Pride /CGS/Maint & Improvement	5,000	5,000
Clean Green & Safe Fund	20,000	15,000
L&L Campaign (May 30 Board action)	0	20,000
Business Promotion (Suggestions)	6,000	6,000
Executive Director Salary	95,000	90,000
Employer Taxes & WC	13,200	11,000
Meetings/Trainings	3,000	3,000
Outside Services - Programs	5,000	5,000
Board Authorized Reserve	5,000	5,000
Event Director Salary (incld tax, wc w Member Serv 2/3 Total)	36,500	36,500
Advisory Committee Program	1,500	2,500
Transfer to Restricted Programs (initiatives & support)	0	0
Sub Total	**$190,200**	**$199,000**

Restricted		
Utilities	2,000	2,000
Membership Program	6,000	5,500
Membership Director - wages (split w/ Event 1/3 Total)	18,500	18,500
Employer Taxes & Workers Comp	1,500	2,350
	0	0
Promotions Program	17,000	17,000
Accounting / Tax Prep	5,000	5,000
Postage/Printing	1,500	3,000
Supplies	1,000	2,000
Marketing Consultant/Internet Media	31,200	31,200
Liability/D&O Insurance	3,500	3,500
Office Rent	25,200	24,000
Other Office Costs	2,000	2,000
Econ-Gov Relations Program	1,000	1,000
Website - Maint. & Email & online programs	1,900	3,000
CAMSA Conference	1,200	1,200
Sub Total	118,500	121,250
Expenses Grand Totals	**308,700**	**320,250**
Reserve to be Budgeted (reduction)*	19,300	3,750
Restricted Change	3,500	**750**
Unrestricted Change	15,800	3,000
IT Needs (from Reserve)	**2,000**	
*** To be allocated after YE close and adj (9/19)**		

Membership Committee
2019/2020 Work Plan

Purpose:

Ensure that members are informed of the latest news pertaining to the District and apprised of marketing and educational opportunities available to the membership. Create regular opportunities for all to meet, mix, and learn.

SIGNIFICANT ACCOMPLISHMENTS - 2018/2019

- Launched Block Captain Program with 20 participants that enhance in-person merchant visits.
- Launched Translation Program with representation in eight languages.
- Recruited 26 new Associate Members.
- Conducted post event surveys to gauge member input; eg. Clean, Green, & Safe Fund; Holiday Campaign; and Downtown Strolls.
- Recognized Green businesses with America Recycles Day city proclamation.
- Changed up mixers to include more education and recognition. Conducted first-ever service project mixer.
- Engaged more service and retail businesses in hosting Mixers by pairing them with wineries and/or restaurants.
- Continued multi-channel communications including revitalization of private Google Group.
- Held Block Captain Thank You Party.
- Launched milestone anniversary recognition program with wine deliveries.
- Planned and conducted a successful Holiday Party. Improved entertainment and business recognition. Moved event date to increase attendance.

WORK PLAN OBJECTIVES - 2019/2020

1. Develop Associate Member retention program.
2. Outreach for new Associate Members (e.g., Historic Stations).
3. Develop new pricing structure for Associate Member program.
4. Work with City to host a Minimum Wage Workshop for restaurants.
5. Work with City to host other business workshops as requested by membership.
6. Experiment with late night mixers.
7. Host "Welcome to the District" reception for Park Street Landing merchants.
8. Continue successful mixers that create networking opportunities, time to share collective knowledge and highlight member businesses.

Take Pride Committee
2019/2020 Work Plan

Purpose:

A new and improved emphasis for committee work to include not only maintenance of the district but also improving accessibility, walkability, and personality. Conceptualize and research fundraising for Clean, Green & Safe Fund and administer the use of these funds. Continue work towards successful Landscape & Lighting District assessment increase vote.

SIGNIFICANT ACCOMPLISHMENTS - 2018/2019

- Raised nearly $40,000 for Clean, Green & Safe Fund.
- Developed Clean Sidewalk Grant Program using allocated Clean, Green & Safe funds.
- Began discussions with City Engineer for blanket encroachment permit for new Planter Grant program.
- Acted as lead committee for Landscape & Lighting discussions and outreach with property owners.
- Changed name to Take Pride Committee to reflect the objective of the committee's work.
- Promoted member use of the SeeClickFix app.
- Coordinated with Public Works the purchase of new 4th of July flags.
- Began work with City and Bike Walk Alameda for installation of twelve new bike racks.
- Acted as ambassador for ReThink Disposable Grant program.
- Recruited new members for committee.
- Created Public Works spreadsheet to better track and share maintenance issues and progress.

WORK PLAN OBJECTIVES - 2019/2020

1. Continue to successfully fundraise and manage Clean, Green, and Safe Fund.
2. Complete installation of new bike racks.
3. Research new funding sources for purchase of additional 3-Stream receptacles and/or other needed trash enclosures for entire district.
4. Continue goal to remove or repair unsightly newspaper racks.
5. Promote and award Sidewalk Cleaning Grants.
6. Continue to assist association with Landscape & Lighting campaign.
7. Create subcommittee to research year round decorative light program and/or holiday decor redesign.
8. Investigate collaboration with Alameda Garden Club and Public Works for bulb out upgrade and/or Planter Grant Program.

Economic & Government Relations Committee
2019/2020 Work Plan

Purpose:

Recognize how critical future development of the North of Lincoln 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 city staff and officials. Embrace property owners in communication about the district on regular basis.

SIGNIFICANT ACCOMPLISHMENTS - 2018/2019

- Created a special committee to work on Gateway Arch Project and applied for Arts Fund Grant.
- Created a special committee to work on outreach for Park Street Landing BIA expansion.
- E.D. and Chairperson gave regular district update to community organizations and membership.
- Held 2nd in a series of L&L Campaign meetings with property owners at the Alameda Theatre.
- Continued work on Facade Grant Program.
- Worked with City property management to create code of conduct at Paul's Newsstand.
- Recruited new committee members.
- Held regular meetings with City Officials and Staff.
- Committee worked in tandem with Advisory Committee on Landscape & Lighting campaign.
- Supported development of a new hotel on Park Street.
- Supported Park Esquina development on Park Street.

WORK PLAN OBJECTIVES - 2019/2020

1. Work to create ordinances for and enforcement of vacant, burned out and/or blighted buildings/storefronts.
2. Continue work on code enforcement for temporary signs through recommendations of Facade Grant program.
3. Develop member surveys to get ideas and referrals for outreach to potential new business.
4. Create a special committee to work on pilot program to close Alameda Avenue.
5. Support the Carnegie Innovation Hall project.
6. Continue work on BIA expansion at Park Street Landing.
7. Advocate for Landscape & Lighting Assessment Increase and work with City for a successful vote.
8. Advocate for Gateway District amenities including; Gateway Arch, water taxi, kayak docks or other waterfront connections.

Promotions Committee
2019/2020 Work Plan

Purpose:

Committee and its members to concentrate efforts on event operations, promoting the business district, and enhancing its visibility through publicity and community-based promotions all the while looking for ways to reimagine events for viability and ultimate success.

SIGNIFICANT ACCOMPLISHMENTS - 2018/2019

- With the challenges of the new Fire Department festival lay-out requirements, produced the most financially successful Spring Festival and Art & Wine Faire in association's history.
- Collaborated on increasing visibility for the arts by working with Rhythmix Cultural Works on special "Love Our Island" event in conjunction with Spirits Stroll
- Applied for Public Art Fund Grant for 2nd Friday ArtWalk in conjunction with PHOENIX.
- Conducted second year of successful holiday events with nearly 100 businesses participating in Shop Late Thursdays, Hot Cocoa Crawl, Holiday Window Contest, and Santa Visits.
- Enhanced all advertising and marketing efforts and results by working closely with West Advertising for both members and the district at large.

WORK PLAN OBJECTIVES - 2019/2020

1. Event Operations:
   - Develop volunteer recruitment and retention program that includes training and benefits plan.
   - Create operational plan for each event with a checklist for post event evaluation.
   - Assist with day of event operations.
   - Create sub-committees for events.

2. Events Analysis and Maximization:
   - Create and use event analysis similar to key performance indicators.
   - District events are to benefit the membership as a whole and raise funds to keep the association financially stable.
   - Community events to focus on bringing neighbors and off-island visitors together in the district to build our community spirit.
   - Business-focused events that specifically create income and recurring patronage.

3. Encourage district visitor interaction with activities and merchants by development of district map, district app, and enhanced social media.

Downtown Alameda Business Association
2019 Board of Directors, Committee Chairs, and Staff

Officers:

President
Steve Busse
Park Centre Animal Hospital
510.521.1700

President-Elect
Otto Wright
The Local
510.523.2116

Immediate Past President
Donna Layburn
Marketplace
510.865.1500

Secretary
Krizten Delossantos
West Wind School
510.523.2000

Treasurer
Ron Mooney
Daisy's
510.522.6443

At Large Directors:

Joe LoParo
ReMax/Tribute
510.813.5273

Eric Olney
Shum Financial
510.748.7462

Cindy Kahl
Speisekammer
510.522.1300

Jason Tsang
Habanas Cuban Cuisine
510.305.3794

Director Emeritus:

Kyle Conner
Alameda Theatre & Cineplex
510.769.2160

Committee Chairs:

Economic & Government Relations
Rich Krinks
Berkshire Hathaway HomeServices

Take Pride
Cindy Kahl
Speisekammer

Membership
Krizten Delossantos
West Wind School

Promotions
Otto Wright
The Local

Advisory Committee
Kyle Conner
Alameda Theatre & Cineplex

Staff:

Executive Director
Janet Magleby
janet@downtownalameda.com
510.523.1392

Membership & Events Coordinator
Aviva Kellman
aviva@downtownalameda.com

Marketing & Communications
Stephanie Prothero
stephanie@downtownalameda.com

Downtown Alameda Business Association
Balance Sheet
As of June 30, 2018

	Jun 30, 18
ASSETS	
Current Assets	
Checking/Savings	
Bank of Marin Checking	2,461.46
Money Market - B Marin	167,566.42
Paypal	96.80
Petty Cash	150.00
Total Checking/Savings	170,274.68
Accounts Receivable	
Accounts Receivable	1,850.00
Total Accounts Receivable	1,850.00
Other Current Assets	
Prepaid Expenses	
Prepaid Event Expenses	2,710.19
Prepaid Insurance	3,808.33
Other Prepaid Expenses	500.00
Total Prepaid Expenses	7,018.52
Total Other Current Assets	7,018.52
Total Current Assets	179,143.20
Fixed Assets	
Computer Equipment	7,963.00
Furniture & Fixtures	2,265.00
Accumulated Depreciation	-10,228.00
Total Fixed Assets	0.00
Other Assets	
Security Deposits	3,475.40
Total Other Assets	3,475.40
TOTAL ASSETS	**182,618.60**
LIABILITIES & EQUITY	
Liabilities	
Current Liabilities	
Accounts Payable	
Accounts Payable	6,721.26
Total Accounts Payable	6,721.26
Credit Cards	
Bank of Marin Visa - 2056	3,149.65
Total Credit Cards	3,149.65
Other Current Liabilities	
Accrued Payroll	3,465.55
Payroll Taxes Payable	1,221.88
Unearned Revenue	43,811.00
Total Other Current Liabilities	48,498.43
Total Current Liabilities	58,369.34
Total Liabilities	58,369.34
Equity	
Temp. Restricted Funds	8,110.61
Unrestricted Funds	116,138.65
Total Equity	124,249.26
TOTAL LIABILITIES & EQUITY	**182,618.60**

Downtown Alameda Business Association
YTD Profit & Loss Budget vs. Actual
July 2017 through June 2018

	Jul '17 - Jun...	Budget	$ Over Bud...
Ordinary Income/Expense			
Income			
UNRESTRICTED INCOME			
Event Income			
Stroll Events			
Participants	16,325.00		
Sponsors - Strolls	3,525.00		
Ticket Sales - Stroll	40.00		
Total Stroll Events	19,890.00	0.00	19,890.00
Spring Festival			
SF Sales	50,054.00	77,000.00	-26,946.00
Sponsorship	29,523.00	0.00	29,523.00
Sponsorship - In Kind	4,000.00	0.00	4,000.00
Eckerstrom Contract Payment	30,000.00	0.00	30,000.00
Eckerstron Additional Payment	2,493.70	0.00	2,493.70
Total Spring Festival	116,070.70	77,000.00	39,070.70
Art & Wine Faire			
Sales	69,458.13	150,000.00	-80,541.87
Sponsorship	33,500.00	0.00	33,500.00
Sponsorship - In Kind	9,000.00	0.00	9,000.00
Eckerstrom Contract Payment	41,000.00	0.00	41,000.00
Eckerstrom Additonal Payment	3,158.50	0.00	3,158.50
Total Art & Wine Faire	156,116.63	150,000.00	6,116.63
Car Show			
Sponsorship	9,500.00	20,000.00	-10,500.00
Additional T-Shirt Sales	2,293.00	0.00	2,293.00
Entry Fees	12,942.00	0.00	12,942.00
Total Car Show	24,735.00	20,000.00	4,735.00
Total Event Income	316,812.33	247,000.00	69,812.33
Program Income			
Associate Members	2,500.00	1,200.00	1,300.00
Muni Lot Income	3,000.00	3,000.00	0.00
Total Program Income	5,500.00	4,200.00	1,300.00
Misc. Income	1,456.84	3,800.04	-2,343.20
Total UNRESTRICTED INCOME	323,769.17	255,000.04	68,769.13
RESTRICTED INCOME			
BIA Restricted Income	120,626.39	115,000.00	5,626.39
Total RESTRICTED INCOME	120,626.39	115,000.00	5,626.39
Total Income	444,395.56	370,000.04	74,395.52
Gross Profit	444,395.56	370,000.04	74,395.52
Expense			
UNRESTRICTED EXPENSES			
Event Expenses			
Stroll Events			
Insurance - Stroll	434.70		
Glassware / customer SWAG	1,436.81		
Other Expenses	600.83		
Permit & Licenses	35.42		
Advertsing / Marketing	4,787.38		
Stroll Events - Other	800.00	0.00	800.00
Total Stroll Events	8,095.14	0.00	8,095.14

Downtown Alameda Business Association
YTD Profit & Loss Budget vs. Actual
July 2017 through June 2018

	Jul '17 - Jun...	Budget	$ Over Bud...
Spring Festival			
Stage Rental	2,430.00		
Event Management	3,957.50		
Trash/Recycle	2,500.00	0.00	2,500.00
Music Clearance	154.00	0.00	154.00
Volunteer Tokens	500.00	0.00	500.00
Glasses	8,793.08	0.00	8,793.08
Beer	4,800.00	0.00	4,800.00
Wine	4,720.00	0.00	4,720.00
Cable Ad Production	1,100.00	0.00	1,100.00
Cable Ads	6,516.99	0.00	6,516.99
Banner	65.00	0.00	65.00
Permits	479.00	0.00	479.00
Drink Tickets	73.49	0.00	73.49
Police	872.00	0.00	872.00
Bike Parking	800.00	0.00	800.00
Electrical	1,262.35	0.00	1,262.35
Lumpers	2,960.00	0.00	2,960.00
Truck Rental	199.33	0.00	199.33
Ice	502.36	0.00	502.36
Supplies	506.59	0.00	506.59
Advertising	3,867.92	0.00	3,867.92
Misc.	436.01	0.00	436.01
Pressure Washing	3,750.00	0.00	3,750.00
Spring Festival - Other	0.00	37,000.00	-37,000.00
Total Spring Festival	51,245.62	37,000.00	14,245.62
Art & Wine Faire Expenses			
Catering	667.00		
Event Management	10,780.65		
Beer	7,350.00	0.00	7,350.00
Wine	6,651.60	0.00	6,651.60
Glasses	7,913.71	0.00	7,913.71
Lumpers	3,980.00	0.00	3,980.00
Bike Monitors	1,100.00	0.00	1,100.00
Dumpster	2,500.00	0.00	2,500.00
Electrician	1,500.00	0.00	1,500.00
Advertising			
In-Kind	1,500.00		
Advertising - Other	3,765.95	0.00	3,765.95
Total Advertising	5,265.95	0.00	5,265.95
Poster	1,863.50	0.00	1,863.50
Security	1,744.00	0.00	1,744.00
Rental Trucks	276.70	0.00	276.70
AWF Ice	1,600.00	0.00	1,600.00
AWF T-Shirts	2,410.64	0.00	2,410.64
Misc.	1,967.84	0.00	1,967.84
Permits	1,283.00	0.00	1,283.00
Drink Tickets	65.66	0.00	65.66
Supplies	43.99	0.00	43.99
Banners	953.31	0.00	953.31
Pressure Washing	2,500.00	0.00	2,500.00
Cable Ads	9,274.50	0.00	9,274.50
Cable Ad Production	1,750.00	0.00	1,750.00
Art & Wine Faire Expenses - Other	0.00	69,000.00	-69,000.00
Total Art & Wine Faire Expenses	73,442.05	69,000.00	4,442.05

Downtown Alameda Business Association
YTD Profit & Loss Budget vs. Actual
July 2017 through June 2018

	Jul '17 - Jun...	Budget	$ Over Bud...
Car Show			
Cable Ad Production	1,100.00	0.00	1,100.00
Toilet Rental	305.90	0.00	305.90
Bike Parking	280.00	0.00	280.00
Advertising	3,864.15	0.00	3,864.15
Newspaper Ads	350.50	0.00	350.50
Music	1,180.00	0.00	1,180.00
Lumpers	280.00	0.00	280.00
Poster	176.48	0.00	176.48
Plates	1,121.32	0.00	1,121.32
T-Shirts	6,348.01	0.00	6,348.01
Misc.	1,102.97	0.00	1,102.97
Printing	142.15	0.00	142.15
Postage	240.80	0.00	240.80
Car Show - Other	0.00	17,000.00	-17,000.00
Total Car Show	16,492.28	17,000.00	-507.72
Other Event Expenses	600.00		
Total Event Expenses	149,875.09	123,000.00	26,875.09
Maintenance & Improvement Comm.	0.00	18,000.00	-18,000.00
Executive Director's Salary	89,197.61	90,000.00	-802.39
Payroll Taxes - UNREST.	7,700.85	8,100.00	-399.15
Staff Benefits	0.00	1,400.00	-1,400.00
Meetings/Training	2,030.00	2,500.00	-470.00
CAMSA Conference	354.05	1,500.00	-1,145.95
Outside Service - Prog.	2,875.00	10,000.00	-7,125.00
Merchant Service Fees	141.85		
Other Costs - Unrestricted	762.19		
Total UNRESTRICTED EXPENSES	252,936.64	254,500.00	-1,563.36
RESTRICTED EXPENSES			
Utilities			
Phone/Internet	3,093.62	2,640.00	453.62
Office Water	514.55	360.00	154.55
Total Utilities	3,608.17	3,000.00	608.17
Membership Program - Restricted			
Administration Expenses	85.00	120.00	-35.00
Holiday/Awards Dinner Expenses	3,670.00	3,000.00	670.00
Mixer Expenses	0.00	600.00	-600.00
New Member Packet Expenses	0.00	160.00	-160.00
Recognition Awards	0.00	120.00	-120.00
Total Membership Program - Restricted	3,755.00	4,000.00	-245.00
Promotion Program - Restricted			
Theatre Ad	4,700.00	4,900.00	-200.00
Website	11,063.38	15,000.00	-3,936.62
Merchant Events	3,996.91	1,200.00	2,796.91
Ad Agency Costs	4,939.72	2,100.00	2,839.72
Other Costs - Promo.	5,018.95	1,800.00	3,218.95
Total Promotion Program - Restricted	29,718.96	25,000.00	4,718.96
Maint. & Improvement Prog.-REST	220.00	0.00	220.00
Printing/Postage	392.16	1,900.00	-1,507.84
Membership Manager - Wages	29,683.93	32,000.00	-2,316.07
Payroll Taxes - REST.	3,653.48	2,900.00	753.48
Workers Comp.	1,247.25	600.00	647.25
Audit/Accounting			
Tax/Audit	1,500.00	1,400.00	100.00
Accounting/Bookkeeping	4,642.50	3,600.00	1,042.50
Payroll Fees	1,084.86	0.00	1,084.86
Total Audit/Accounting	7,227.36	5,000.00	2,227.36
Marketing Consultant	21,078.40	24,000.00	-2,921.60
Liability/D&O Insurance	6,395.00	5,700.00	695.00
Supplies	457.39	2,000.00	-1,542.61
Office Rent	22,800.00	22,800.00	0.00

Downtown Alameda Business Association
YTD Profit & Loss Budget vs. Actual
July 2017 through June 2018

	Jul '17 - Jun...	Budget	$ Over Bud...
Office Expenses			
Office Expenses - Other	3,947.89	600.00	3,347.89
Total Office Expenses	3,947.89	600.00	3,347.89
Total RESTRICTED EXPENSES	134,184.99	129,500.00	4,684.99
Total Expense	387,121.63	384,000.00	3,121.63
Net Ordinary Income	57,273.93	-13,999.96	71,273.89
Other Income/Expense			
Other Expense			
Fraud Loss	900.00		
Temp. Rest. Funds Reserve	-11,266.80		
Unrestricted Funds Reserve	67,640.73		
Total Other Expense	57,273.93		
Net Other Income	-57,273.93		
Net Income	0.00	-13,999.96	13,999.96

Downtown Alameda Business Association
Reconciliation Detail
Bank of Marin Checking, Period Ending 07/31/2018

Type	Date	Num	Name	Clr	Amount	Balance
Beginning Balance						8,421.42
Cleared Transactions						
Checks and Payments - 35 items						
Bill Pmt -Check	06/04/2018	2700	Stephanie L. Prothero	X	-2,554.96	-2,554.96
Bill Pmt -Check	06/26/2018	2707	Brown & Brown Ins...	X	-2,880.00	-5,434.96
Bill Pmt -Check	06/27/2018	2708	Bank of Marin	X	-25.00	-5,459.96
Check	07/01/2018	EFT	Mash Petroleum, INC	X	-1,995.00	-7,454.96
Bill Pmt -Check	07/01/2018	2715	Joshua Lipps	X	-750.00	-8,204.96
Bill Pmt -Check	07/01/2018	2710	Alameda County En...	X	-572.00	-8,776.96
Bill Pmt -Check	07/01/2018	2712	Fast Imaging	X	-540.79	-9,317.75
Bill Pmt -Check	07/01/2018	2714	Island Print Express	X	-376.91	-9,694.66
Bill Pmt -Check	07/01/2018	2713	Hilliard Managemen...	X	-270.00	-9,964.66
Bill Pmt -Check	07/01/2018	2716	SESAC	X	-154.00	-10,118.66
Bill Pmt -Check	07/01/2018	2717	Stephanie L. Prothero	X	-50.00	-10,168.66
Bill Pmt -Check	07/02/2018	2711	Dept of Justice	X	-20.00	-10,188.66
Check	07/03/2018	EFT	ADP	X	-3,465.55	-13,654.21
Check	07/03/2018	EFT	ADP	X	-1,221.88	-14,876.09
Check	07/03/2018	EFT	On-Line Stamp Co.	X	-28.95	-14,905.04
Bill Pmt -Check	07/03/2018	2709	Bank of Marin	X	-25.00	-14,930.04
Transfer	07/05/2018			X	-2,180.86	-17,110.90
Check	07/06/2018	EFT	PEX Card	X	-1,000.00	-18,110.90
Check	07/09/2018	EFT	Ready Refresh	X	-29.50	-18,140.40
Check	07/10/2018	EFT	PEX Card	X	-0.16	-18,140.56
Check	07/10/2018	EFT	PEX Card	X	-0.03	-18,140.59
Check	07/12/2018	EFT	Comcast	X	-159.28	-18,299.87
Check	07/20/2018	EFT	ADP	X	-3,907.11	-22,206.98
Check	07/20/2018	EFT	ADP	X	-1,337.42	-23,544.40
Check	07/20/2018	EFT	PEX Card	X	-750.00	-24,294.40
Bill Pmt -Check	07/25/2018	2722	Cash	X	-15,000.00	-39,294.40
Bill Pmt -Check	07/25/2018	2738	West Advertising	X	-2,420.00	-41,714.40
Bill Pmt -Check	07/25/2018	2719	Bill Armstrong	X	-1,000.00	-42,714.40
Bill Pmt -Check	07/25/2018	2735	RJV Elements	X	-850.00	-43,564.40
Bill Pmt -Check	07/25/2018	2734	Lloyd Meltzer	X	-360.00	-43,924.40
Bill Pmt -Check	07/25/2018	2728	John Martin	X	-300.00	-44,224.40
Bill Pmt -Check	07/25/2018	2724	Fast Imaging	X	-24.58	-44,248.98
Check	07/26/2018	EFT	PEX Card	X	-1,500.00	-45,748.98
Check	07/27/2018	EFT	PEX Card	X	-2,000.00	-47,748.98
Check	07/30/2018	EFT	Bank of Marin	X	-60,000.00	-107,748.98
Total Checks and Payments					-107,748.98	-107,748.98
Deposits and Credits - 16 items						
Bill Pmt -Check	05/12/2018	2684	Jetro Cash & Carry	X	0.00	0.00
Deposit	07/02/2018			X	5,295.00	5,295.00
Deposit	07/03/2018			X	619.62	5,914.62
Deposit	07/03/2018			X	667.23	6,581.85
Deposit	07/03/2018			X	2,500.00	9,081.85
Transfer	07/03/2018			X	5,000.00	14,081.85
Check	07/10/2018	EFT	PEX Card	X	0.03	14,081.88
Check	07/10/2018	EFT	PEX Card	X	0.16	14,082.04
Deposit	07/12/2018			X	4,640.00	18,722.04
Deposit	07/18/2018			X	96.80	18,818.84
Deposit	07/18/2018			X	4,895.85	23,714.69
Deposit	07/19/2018			X	314.00	24,028.69
Check	07/26/2018	EFT	Bank of Marin	X	20,000.00	44,028.69
Deposit	07/29/2018			X	526.95	44,555.64
Deposit	07/30/2018			X	41,255.00	85,810.64
Deposit	07/30/2018			X	86,091.00	171,901.64
Total Deposits and Credits					171,901.64	171,901.64
Total Cleared Transactions					64,152.66	64,152.66
Cleared Balance					64,152.66	72,574.08
Uncleared Transactions						
Checks and Payments - 18 items						
Bill Pmt -Check	05/01/2018	2662	Elks Lodge		-500.00	-500.00
Bill Pmt -Check	07/25/2018	2723	Clean Sidewalks		-2,500.00	-3,000.00
Bill Pmt -Check	07/25/2018	2737	Ultra Wash		-2,500.00	-5,500.00
Bill Pmt -Check	07/25/2018	2736	Stephanie L. Prothero		-2,375.00	-7,875.00
Bill Pmt -Check	07/25/2018	2729	Joshua Lipps		-1,000.00	-8,875.00
Bill Pmt -Check	07/25/2018	2726	Gerald Bashaw		-600.00	-9,475.00
Bill Pmt -Check	07/25/2018	2730	Keenan, Harold		-500.00	-9,975.00

Downtown Alameda Business Association
Reconciliation Detail
Bank of Marin Checking, Period Ending 07/31/2018

Type	Date	Num	Name	Clr	Amount	Balance
Bill Pmt -Check	07/25/2018	2739	Youssef Riahi		-480.00	-10,455.00
Bill Pmt -Check	07/25/2018	2731	Kevin Bennett		-360.00	-10,815.00
Bill Pmt -Check	07/25/2018	2720	Brennan Shreves		-360.00	-11,175.00
Bill Pmt -Check	07/25/2018	2733	Levy, Daniel		-360.00	-11,535.00
Bill Pmt -Check	07/25/2018	2721	Cameron Swartzell		-360.00	-11,895.00
Bill Pmt -Check	07/25/2018	2732	Kourtney McCrary		-300.00	-12,195.00
Bill Pmt -Check	07/25/2018	2718	Arian Grimsrud		-300.00	-12,495.00
Bill Pmt -Check	07/25/2018	2727	James Weyeneth		-300.00	-12,795.00
Bill Pmt -Check	07/25/2018	2725	Francis Centesisms...		-200.00	-12,995.00
Bill Pmt -Check	07/30/2018	2743	Caleb Salmon		-360.00	-13,355.00
Bill Pmt -Check	07/30/2018	2744	Christopher Swartzell		-360.00	-13,715.00
Total Checks and Payments					-13,715.00	-13,715.00
Total Uncleared Transactions					-13,715.00	-13,715.00
Register Balance as of 07/31/2018					50,437.66	58,859.08
New Transactions						
Checks and Payments - 18 items						
Bill Pmt -Check	08/01/2018	2752	Alameda Island Bre...		-6,900.00	-6,900.00
Bill Pmt -Check	08/01/2018	2755	Saxco, Inc.		-5,867.77	-12,767.77
Bill Pmt -Check	08/01/2018	2753	Brand Marinade		-2,218.00	-14,985.77
Check	08/01/2018	EFT	Mash Petroleum, INC		-1,900.00	-16,885.77
Bill Pmt -Check	08/01/2018	2754	Joshua Lipps		-1,140.00	-18,025.77
Bill Pmt -Check	08/01/2018	2756	Wagner, LeiLani An...		-450.00	-18,475.77
Check	08/03/2018	EFT	ADP		-4,573.77	-23,049.54
Check	08/03/2018	EFT	ADP		-1,586.86	-24,636.40
Check	08/06/2018	EFT	Bank of Marin Visa		-3,421.55	-28,057.95
Bill Pmt -Check	08/06/2018	2757	Rythmics		-1,500.00	-29,557.95
Bill Pmt -Check	08/08/2018	2763	Rock Wall Winery		-2,684.00	-32,241.95
Bill Pmt -Check	08/08/2018	2764	San Francisco Chro...		-1,900.00	-34,141.95
Bill Pmt -Check	08/08/2018	2758	Betty Dittmer		-325.00	-34,466.95
Bill Pmt -Check	08/08/2018	2765	Telegraph Media		-300.00	-34,766.95
Bill Pmt -Check	08/08/2018	2760	Hilllard Managemen...		-300.00	-35,066.95
Bill Pmt -Check	08/08/2018	2762	Bay Area News Gro...		-270.00	-35,336.95
Bill Pmt -Check	08/08/2018	2759	Fast Imaging		-103.79	-35,440.74
Bill Pmt -Check	08/08/2018	2761	Alameda County Ta...		-33.03	-35,473.77
Total Checks and Payments					-35,473.77	-35,473.77
Total New Transactions					-35,473.77	-35,473.77
Ending Balance					**14,963.89**	**23,385.31**

Bank of Marin
PO Box 2039
Novato, CA 94948-2039

Account Number:
Statement Period: 05/31/18 - 06/29/18

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

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:
805 MARINA VILLAGE PARKWAY
ALAMEDA, CA 94501

Visit us Online: www.bankofmarin.com

Important Information: Mobile Check Deposits

Effective July 1, 2018, Federal Regulation will require all checks deposited through the Bank of Marin mobile apps to be endorsed as follows:

"For Mobile Deposit Only at Bank of Marin"

Your deposit will not process without this specific endorsement language and your signature.

Please contact your branch with any questions.

Account Summary for CHECKING ACCOUNT

Beginning Balance as of 05/31/18	**$19,565.85**
(+) Deposits and Credits (9)	41,334.31
(-) Withdrawals and Debits (23)	52,478.74
Ending Balance as of 06/29/18	**$8,421.42**
Enclosures	13

Checks Posted

* Skip in check sequence

Number	Date	Amount	Number	Date	Amount	Number	Date	Amount
2687	06/06	872.00	2698	06/12	1,961.00	2703	06/29	230.00
2691*	06/15	2,300.00	2699	06/13	8,793.08	2704	06/22	100.00
2694*	06/12	540.00	2701*	06/13	450.00	2705	06/26	450.00
2695	06/13	2,000.00	2702	06/22	4,600.00	2706	06/25	7,766.99
2697*	06/05	3,220.00						

Debits

Date	Description	Subtractions
06/01	Preauthorized Debit MASH PETROLEUM RENT 180601 SANTA CLARA, AL	1,900.00
06/04	Preauthorized Debit ADP TAX ADP TAX 180604 RTX83 060511A01	1,457.97

Balance Your Account

Date: _____

Checks Outstanding

Check No.	Amount	
TOTAL		

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

2

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			A
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			B

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

ELECTRONIC FUND TRANSFER TRANSACTIONS (EFT)

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.

IN CASE OF ERRORS OR QUESTIONS ABOUT YOUR ELECTRONIC TRANSFERS
FOR CONSUMER CUSTOMERS ONLY

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.

MEMBER FDIC

(R 09/15)

CHECKING ACCOUNT (continued) Account

Debits (continued)

Date	Description	Subtractions
06/04	Preauthorized Debit ADP WAGE PAY WAGE PAY 180604 792047332167X83	4,244.61
06/05	Preauthorized Debit CARDMEMBER SERV WEB PYMT 180605	1,463.47
06/05	Preauthorized Debit CA DEPT TAX FEE CDTFA EPMT 180605 414913	4,630.00
06/12	Preauthorized Debit COMCAST CABLE 180612	159.28
06/14	Overdraft Fee FOR OVERDRAFT CHECK # 2699	30.00
06/18	Preauthorized Debit READYREFRESH ECHECKPAY 180615 5722852000	53.43
06/19	Preauthorized Debit ADP TAX ADP TAX 180619 RTX83 062012A01	1,340.41
06/19	Preauthorized Debit ADP WAGE PAY WAGE PAY 180619 565043398270X83	3,916.50

Credits

Date	Description	Additions
06/01	Deposit	1,500.00
06/04	Preauthorized Credit EVENTBRITE, INC. EDI PYMNTS RMR*IV*42733505064 **1533.51*1533.51\	1,533.51
06/05	Deposit	6,993.70
06/14	Cash Mgmt Trsfr Cr REF 1651723L FUNDS TRANSFER FRM DEP 20502605 FROM	10,000.00
06/14	Deposit	2,500.00
06/18	Deposit	14,791.00
06/18	Preauthorized Credit EVENTBRITE, INC. EDI PYMNTS RMR*IV*42733505064 **806.1*806.1\	806.10
06/22	Credit Memo	30.00
06/26	Deposit	3,180.00

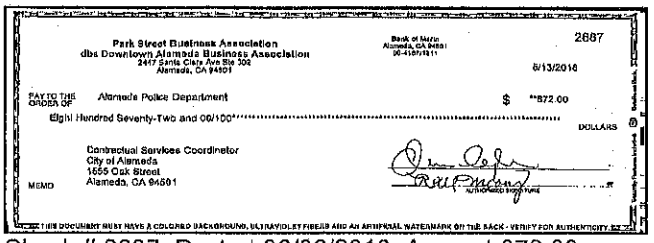
Daily Balances

Date	Amount	Date	Amount	Date	Amount
05/31	19,565.85	06/12	9,144.73	06/19	18,358.41
06/01	19,165.85	06/13	-2,098.35	06/22	13,688.41
06/04	14,996.78	06/14	10,371.65	06/25	5,921.42
06/05	12,677.01	06/15	8,071.65	06/26	8,651.42
06/06	11,805.01	06/18	23,615.32	06/29	8,421.42

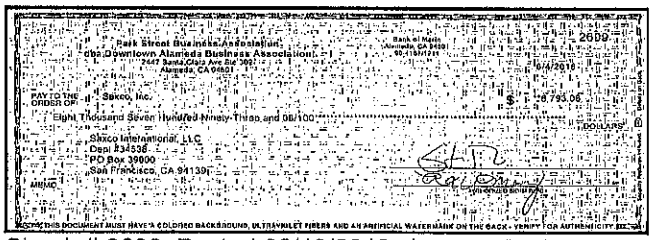
CHECKING ACCOUNT (continued) Account

Overdraft/Return Item Fees

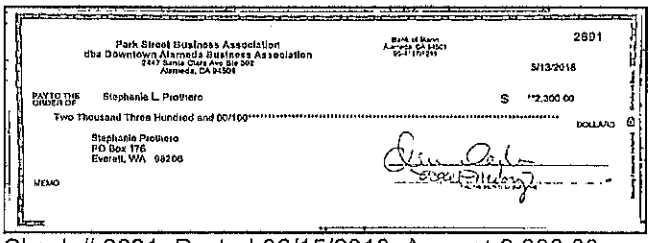
Description	Total this Period	Total Year to Date
Total Overdraft Fees	$30.00	$30.00
Total Returned Item Fees	$0.00	$0.00


Park Street Business Association
dba Downtown Alameda Business Association
2447 Santa Clara Ave Ste 302
Alameda, CA 94501
Bank of Marin
Alameda, CA 94501
2687
6/13/2018
PAY TO THE ORDER OF Alameda Police Department $ **872.00
Eight Hundred Seventy-Two and 00/100********** DOLLARS
Contractual Services Coordinator
City of Alameda
1555 Oak Street
Alameda, CA 94501
MEMO
THIS DOCUMENT MUST HAVE A COLORED BACKGROUND, ULTRAVIOLET FIBERS AND AN ARTIFICIAL WATERMARK ON THE BACK - VERIFY FOR AUTHENTICITY

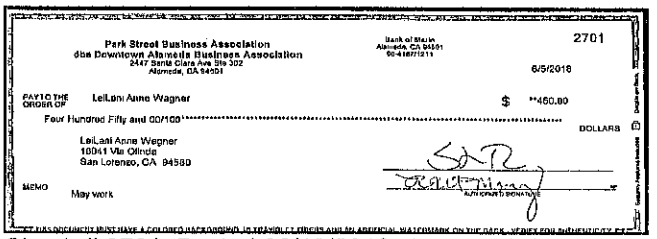
Check # 2687, Posted 06/06/2018, Amount 872.00


Park Street Business Association
dba Downtown Alameda Business Association
2447 Santa Clara Ave Ste 302
Alameda, CA 94501
Bank of Marin
Alameda, CA 94501
2699
6/14/2018
PAY TO THE ORDER OF Sakco, Inc. $ **8,793.08
Eight Thousand Seven Hundred Ninety-Three and 08/100********** DOLLARS
Sakco International, LLC
Dept #34538
PO Box 39000
San Francisco, CA 94139
MEMO
THIS DOCUMENT MUST HAVE A COLORED BACKGROUND, ULTRAVIOLET FIBERS AND AN ARTIFICIAL WATERMARK ON THE BACK - VERIFY FOR AUTHENTICITY

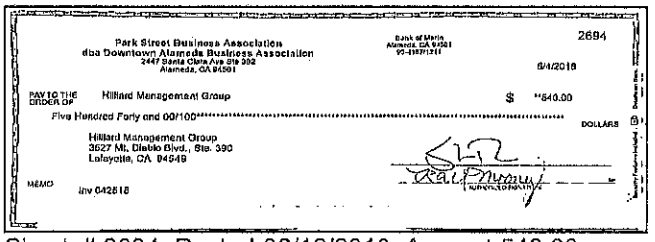
Check # 2699, Posted 06/13/2018, Amount 8,793.08


Park Street Business Association
dba Downtown Alameda Business Association
2447 Santa Clara Ave Ste 302
Alameda, CA 94501
Bank of Marin
Alameda, CA 94501
2691
5/13/2018
PAY TO THE ORDER OF Stephanie L Prothero $ **2,300.00
Two Thousand Three Hundred and 00/100********** DOLLARS
Stephanie Prothero
PO Box 176
Everett, WA 98206
MEMO
THIS DOCUMENT MUST HAVE A COLORED BACKGROUND, ULTRAVIOLET FIBERS AND AN ARTIFICIAL WATERMARK ON THE BACK - VERIFY FOR AUTHENTICITY

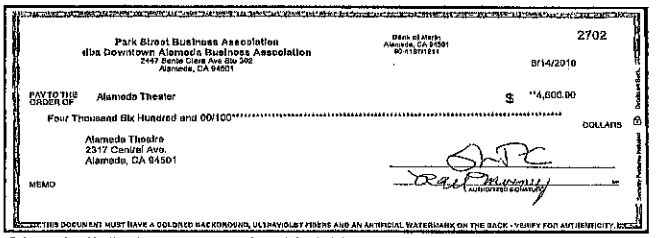
Check # 2691, Posted 06/15/2018, Amount 2,300.00


Park Street Business Association
dba Downtown Alameda Business Association
2447 Santa Clara Ave Ste 302
Alameda, CA 94501
Bank of Marin
Alameda, CA 94501
2701
6/5/2018
PAY TO THE ORDER OF LeiLani Anne Wagner $ **450.00
Four Hundred Fifty and 00/100********** DOLLARS
LeiLani Anne Wagner
16041 Via Olinda
San Lorenzo, CA 94580
MEMO May work
THIS DOCUMENT MUST HAVE A COLORED BACKGROUND, ULTRAVIOLET FIBERS AND AN ARTIFICIAL WATERMARK ON THE BACK - VERIFY FOR AUTHENTICITY

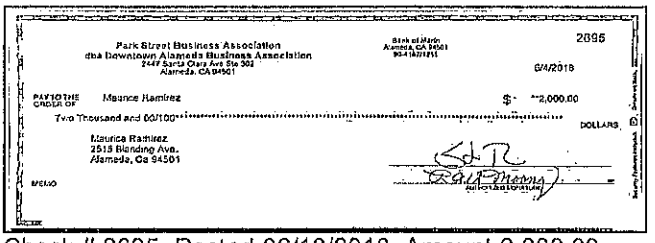
Check # 2701, Posted 06/13/2018, Amount 450.00


Park Street Business Association
dba Downtown Alameda Business Association
2447 Santa Clara Ave Ste 302
Alameda, CA 94501
Bank of Marin
Alameda, CA 94501
2694
6/4/2018
PAY TO THE ORDER OF Hillard Management Group $ **540.00
Five Hundred Forty and 00/100********** DOLLARS
Hillard Management Group
3627 Mt. Diablo Blvd., Ste. 390
Lafayette, CA 94549
MEMO Inv 042818
THIS DOCUMENT MUST HAVE A COLORED BACKGROUND, ULTRAVIOLET FIBERS AND AN ARTIFICIAL WATERMARK ON THE BACK - VERIFY FOR AUTHENTICITY

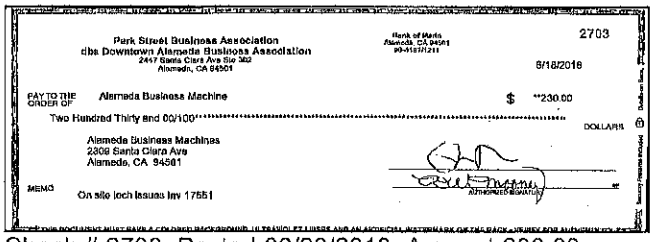
Check # 2694, Posted 06/12/2018, Amount 540.00


Park Street Business Association
dba Downtown Alameda Business Association
2447 Santa Clara Ave Ste 302
Alameda, CA 94501
Bank of Marin
Alameda, CA 94501
2702
6/14/2018
PAY TO THE ORDER OF Alameda Theater $ **4,600.00
Four Thousand Six Hundred and 00/100********** DOLLARS
Alameda Theatre
2317 Central Ave.
Alameda, CA 94501
MEMO
THIS DOCUMENT MUST HAVE A COLORED BACKGROUND, ULTRAVIOLET FIBERS AND AN ARTIFICIAL WATERMARK ON THE BACK - VERIFY FOR AUTHENTICITY

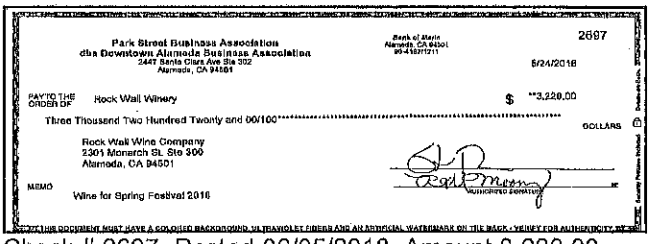
Check # 2702, Posted 06/22/2018, Amount 4,600.00


Park Street Business Association
dba Downtown Alameda Business Association
2447 Santa Clara Ave Ste 302
Alameda, CA 94501
Bank of Marin
Alameda, CA 94501
2695
6/4/2018
PAY TO THE ORDER OF Maurice Ramirez $ **2,000.00
Two Thousand and 00/100********** DOLLARS
Maurice Ramirez
2515 Blanding Ave.
Alameda, Ca 94501
MEMO
THIS DOCUMENT MUST HAVE A COLORED BACKGROUND, ULTRAVIOLET FIBERS AND AN ARTIFICIAL WATERMARK ON THE BACK - VERIFY FOR AUTHENTICITY

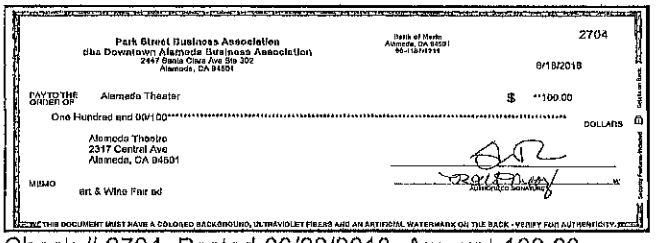
Check # 2695, Posted 06/13/2018, Amount 2,000.00


Park Street Business Association
dba Downtown Alameda Business Association
2447 Santa Clara Ave Ste 302
Alameda, CA 94501
Bank of Marin
Alameda, CA 94501
2703
6/18/2018
PAY TO THE ORDER OF Alameda Business Machine $ **230.00
Two Hundred Thirty and 00/100********** DOLLARS
Alameda Business Machines
2309 Santa Clara Ave
Alameda, CA 94501
MEMO On site loch issues Inv 17551
THIS DOCUMENT MUST HAVE A COLORED BACKGROUND, ULTRAVIOLET FIBERS AND AN ARTIFICIAL WATERMARK ON THE BACK - VERIFY FOR AUTHENTICITY

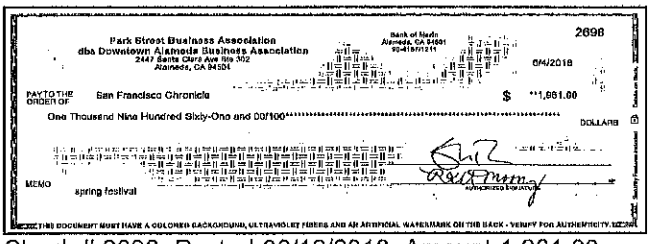
Check # 2703, Posted 06/29/2018, Amount 230.00


Park Street Business Association
dba Downtown Alameda Business Association
2447 Santa Clara Ave Ste 302
Alameda, CA 94501
Bank of Marin
Alameda, CA 94501
2697
6/24/2018
PAY TO THE ORDER OF Rock Wall Winery $ **3,220.00
Three Thousand Two Hundred Twenty and 00/100********** DOLLARS
Rock Wall Wine Company
2301 Monarch St. Ste 300
Alameda, CA 94501
MEMO Wine for Spring Festival 2018
THIS DOCUMENT MUST HAVE A COLORED BACKGROUND, ULTRAVIOLET FIBERS AND AN ARTIFICIAL WATERMARK ON THE BACK - VERIFY FOR AUTHENTICITY

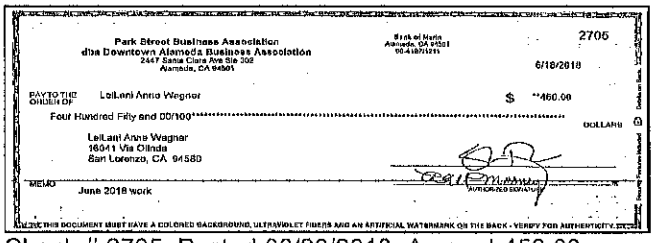
Check # 2697, Posted 06/05/2018, Amount 3,220.00


Park Street Business Association
dba Downtown Alameda Business Association
2447 Santa Clara Ave Ste 302
Alameda, CA 94501
Bank of Marin
Alameda, CA 94501
2704
6/18/2018
PAY TO THE ORDER OF Alameda Theater $ **100.00
One Hundred and 00/100********** DOLLARS
Alameda Theatre
2317 Central Ave
Alameda, CA 94501
MEMO art & Wine Fair ad
THIS DOCUMENT MUST HAVE A COLORED BACKGROUND, ULTRAVIOLET FIBERS AND AN ARTIFICIAL WATERMARK ON THE BACK - VERIFY FOR AUTHENTICITY

Check # 2704, Posted 06/22/2018, Amount 100.00

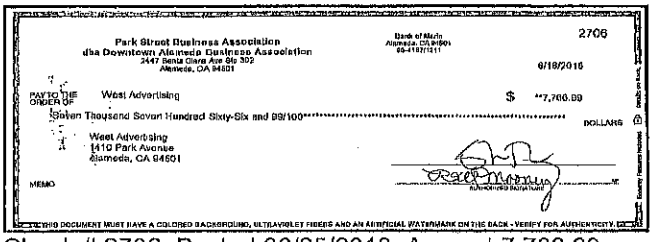

Park Street Business Association
dba Downtown Alameda Business Association
2447 Santa Clara Ave Ste 302
Alameda, CA 94501
Bank of Marin
Alameda, CA 94501
2698
6/4/2018
PAY TO THE ORDER OF San Francisco Chronicle $ **1,961.00
One Thousand Nine Hundred Sixty-One and 00/100********** DOLLARS
MEMO spring festival
THIS DOCUMENT MUST HAVE A COLORED BACKGROUND, ULTRAVIOLET FIBERS AND AN ARTIFICIAL WATERMARK ON THE BACK - VERIFY FOR AUTHENTICITY

Check # 2698, Posted 06/12/2018, Amount 1,961.00


Park Street Business Association
dba Downtown Alameda Business Association
2447 Santa Clara Ave Ste 302
Alameda, CA 94501
Bank of Marin
Alameda, CA 94501
2705
6/18/2018
PAY TO THE ORDER OF LeiLani Anne Wagner $ **460.00
Four Hundred Fifty and 00/100********** DOLLARS
LeiLani Anne Wagner
16041 Via Olinda
San Lorenzo, CA 94580
MEMO June 2018 work
THIS DOCUMENT MUST HAVE A COLORED BACKGROUND, ULTRAVIOLET FIBERS AND AN ARTIFICIAL WATERMARK ON THE BACK - VERIFY FOR AUTHENTICITY

Check # 2705, Posted 06/26/2018, Amount 450.00

Bank of Marin



Park Street Business Association
dba Downtown Alameda Business Association
2447 Santa Clara Ave Ste 302
Alameda, CA 94501

Bank of Marin
Alameda, CA 94501
85-4187/1211

2706

6/18/2018

PAY TO THE ORDER OF West Advertising $ **7,766.99

Seven Thousand Seven Hundred Sixty-Six and 99/100********** DOLLARS

West Advertising
1410 Park Avenue
Alameda, CA 94501

MEMO

THIS DOCUMENT MUST HAVE A COLORED BACKGROUND, ULTRAVIOLET FIBERS AND AN ARTIFICIAL WATERMARK ON THE BACK - VERIFY FOR AUTHENTICITY.

Check # 2706, Posted 06/25/2018, Amount 7,766.99

Bank of Marin
PO Box 2039
Novato, CA 94948-2039

Account Number:
Statement Period: 05/31/18 - 06/29/18

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

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:
805 MARINA VILLAGE PARKWAY
ALAMEDA, CA 94501

Visit us Online: www.bankofmarin.com

Important Information: Mobile Check Deposits

Effective July 1, 2018, Federal Regulation will require all checks deposited through the Bank of Marin mobile apps to be endorsed as follows:

"For Mobile Deposit Only at Bank of Marin"

Your deposit will not process without this specific endorsement language and your signature.

Please contact your branch with any questions.

Account Summary for MONEY MARKET ACCOUNT

Beginning Balance as of 05/31/18	**$177,560.26**	Annual Percentage Yield Earned	0.05%
+ Deposits and Credits (1)	6.16	Average Balance for APY	$172,043.02
- Withdrawals and Debits (1)	10,000.00	Interest Earned	$6.16
Ending Balance as of 06/29/18	**$167,566.42**	Interest Paid Year to Date	$30.25
		Interest Bearing Days	29

Debits

Date	Description	Subtractions
06/14	Cash Mgmt Trsfr Dr REF FROM	10,000.00

Credits

Date	Description	Additions
06/29	Interest	6.16

Daily Balances

Date	Balance	Date	Balance	Date	Balance
05/31	177,560.26	06/14	167,560.26	06/29	167,566.42

Balance Your Account

Date: _____

Checks Outstanding

Check No.	Amount	
TOTAL		

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

2

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			A

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			B

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

ELECTRONIC FUND TRANSFER TRANSACTIONS (EFT)

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.

IN CASE OF ERRORS OR QUESTIONS ABOUT YOUR ELECTRONIC TRANSFERS
FOR CONSUMER CUSTOMERS ONLY

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.

MEMBER FDIC

(R 09/15)

MONEY MARKET ACCOUNT (continued) Account

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

Forms 990 / 990-EZ Return Summary

For calendar year 2017, or tax year beginning 07/01/17 , and ending 06/30/18

PARK STREET BUSINESS ASSOCIATION, INC.

Net Asset / Fund Balance at Beginning of Year			67,875
Revenue			
Contributions	120,626		
Program service revenue	323,770		
Investment income			
Capital gain / loss			
Fundraising / Gaming:			
Gross revenue			
Direct expenses			
Net income			
Other income	0		
Total revenue		444,396	
Expenses			
Program services	279,886		
Management and general	108,135		
Fundraising			
Total expenses		388,021	
Excess / (deficit)			56,375
Changes			
Net Asset / Fund Balance at End of Year			124,250

Reconciliation of Revenue

Total revenue per financial statements	
Less:	
Unrealized gains	
Donated services	
Recoveries	
Other	
Plus:	
Investment expenses	
Other	
Total revenue per return	444,396

Reconciliation of Expenses

Total expenses per financial statements	
Less:	
Donated services	
Prior year adjustments	
Losses	
Other	
Plus:	
Investment expenses	
Other	
Total expenses per return	388,021

Balance Sheet

	Beginning	Ending	Differences
Assets	109,003	182,619	
Liabilities	41,128	58,369	
Net assets	67,875	124,250	56,375

Miscellaneous Information

Amended return	
Return / extended due date	05/15/19
Failure to file penalty	

Form **8879-EO**

Department of the Treasury
Internal Revenue Service

IRS *e-file* Signature Authorization for an Exempt Organization

For calendar year 2017, or fiscal year beginning 7/01, 2017, and ending 6/30, 20 18

Do not send to the IRS. Keep for your records.
Go to *www.irs.gov/Form8879EO* for the latest information.

OMB No. 1545-1878

2017

Name of exempt organization: **PARK STREET BUSINESS ASSOCIATION, INC.**

Employer identification number:

Name and title of officer: **STEVE BUSSE**
VICE PRESIDENT

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 one line in Part I.

1a	Form 990 check here ▶ [X]	**b Total revenue,** if any (Form 990, Part VIII, column (A), line 12)	1b 444,396
2a	Form 990-EZ check here ▶ [ ]	**b Total revenue,** if any (Form 990-EZ, line 9)	2b
3a	Form 1120-POL check here ▶ [ ]	b **Total tax** (Form 1120-POL, line 22)	3b
4a	Form 990-PF check here ▶ [ ]	**b Tax based on investment income** (Form 990-PF, Part VI, line 5)	4b
5a	Form 8868 check here ▶ [ ]	**b Balance Due** (Form 8868, line 3c)	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 2017 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

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

on the organization's tax year 2017 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 2017 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 12/11/18

Part III Certification and Authentication

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

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2017 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 VALER** Date 12/11/18

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

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

OMB No. 1545-0047
2017
Open to Public Inspection

A For the 2017 calendar year, or tax year beginning 07/01/17 , and ending 06/30/18

B Check if applicable:
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Final return/ terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization: PARK STREET BUSINESS ASSOCIATION, INC.
Doing business as: DOWNTOWN ALAMEDA BUSINESS ASSN.
Number and street (or P.O. box if mail is not delivered to street address): 2447 SANTA CLARA AVE STE 302
Room/suite:
City or town, state or province, country, and ZIP or foreign postal code: ALAMEDA CA 94501

D Employer identification number:
E Telephone number: 510-523-1392
G Gross receipts$ 444,396

F Name and address of principal officer: STEVE BUSSE

H(a) Is this a group return for subordinates? ☐ Yes ☒ No
H(b) Are all subordinates included? ☐ Yes ☐ No
If "No," attach a list. (see instructions)

I Tax-exempt status: ☐ 501(c)(3) ☒ 501(c) (6) (insert no.) ☐ 4947(a)(1) or ☐ 527

J Website: HTTP://DOWNTOWNALAMEDA.COM/

H(c) Group exemption number:

K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other

L Year of formation: 1990

M State of legal domicile: CA

Part I Summary

1 Briefly describe the organization's mission or most significant activities: SEE SCHEDULE O

2 Check this box ☐ 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	10
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	10
5	Total number of individuals employed in calendar year 2017 (Part V, line 2a)	5	5
6	Total number of volunteers (estimate if necessary)	6	60
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0

		Prior Year	Current Year
8	Contributions and grants (Part VIII, line 1h)	112,107	120,626
9	Program service revenue (Part VIII, line 2g)	25,137	323,770
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)	132,248	0
12	Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	269,492	444,396
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)	100,290	130,235
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)	114,998	257,786
18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	215,288	388,021
19	Revenue less expenses. Subtract line 18 from line 12	54,204	56,375

		Beginning of Current Year	End of Year
20	Total assets (Part X, line 16)	109,003	182,619
21	Total liabilities (Part X, line 26)	41,128	58,369
22	Net assets or fund balances. Subtract line 21 from line 20	67,875	124,250

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

STEVE BUSSE — VICE PRESIDENT
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☒ if self-employed	PTIN
RYAN VAN VALER		01/14/19		

Firm's name: RYAN VAN VALER, E.A.
Firm's EIN:
Firm's address: 2447 SANTA CLARA AVE STE 300 A ALAMEDA, CA 94501-4579
Phone no. 510-521-0252

May the IRS discuss this return with the preparer shown above? (see instructions) ☐ Yes ☐ No

Part III Statement of Program Service Accomplishments

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

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 [X] 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 [X] No

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

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

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

THE PARK STREET BUSINESS ASSOCIATION (DBA DOWNTOWN ALAMEDA BUSINESS ASSOCIATION) IS HARD AT WORK YEAR ROUND WITH OUR 470+ BUSINESSES IN MIND. FIRST FORMED IN 1981, WE SERVE AS A SUPPORT NETWORK AND ADVOCATE FOR BUSINESSES OPERATING IN OUR HISTORIC BUSINESS IMPROVEMENT AREA. THE DOWNTOWN ASSOCIATION PROMOTES A HEALTHY RETAIL/SERVICE CLIMATE AS WELL AS A DISTRICT THAT IS FAMILY-FRIENDLY, CLEAN, GREEN, AND SAFE. THE WELFARE OF THE ASSOCIATION AND ITS MEMBERS IS ACTIVELY PURSUED BY STAFF, OUR BOARD OF DIRECTORS, CITY OFFICIALS, AND CIVIC-MINDED VOLUNTEERS.

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

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

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*	1		X
2	Is the organization required to complete *Schedule B, Schedule of Contributors* (see instructions)?	2		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*	3		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*	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? *If "Yes," complete Schedule C, Part III*	5		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*	6		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*	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		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*	9		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*	10		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*	11a	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*	11b		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*	11c		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*	11d		X
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e	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*	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	12a		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*	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		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*	14b		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*	15		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*	16		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)	17		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*	18		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*	19		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*	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
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*	21		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*	22		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*	23		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*	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
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?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
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*	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? *If "Yes," complete Schedule L, Part II*	26		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*	27		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*	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		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*	28c		X
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		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*	32		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*	33		X
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1*	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		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*	35b		
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		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.	38	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

					Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	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		
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	5			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file* (see instructions)					
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?			13a		
	Note. See the instructions for additional information the organization must report on Schedule O.					
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	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 ..... [X]

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	10		
	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	10		
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:

JANET MAGELBY 2447 SANTA CLARA AVE. STE 302
ALAMEDA CA 94501 510-523-1392

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 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) JANET MAGELBY	40.00									
EXECUTIVE DIRECTOR	0.00	X						57,636	0	0
(2) DONNA LAYBURN	6.00									
PRESIDENT	0.00	X		X				0	0	0
(3) STEVE BUSSE	2.00									
VICE PRESIDENT	0.00	X		X				0	0	0
(4) DEB KNOWLES	2.00									
SECRETARY	0.00	X		X				0	0	0
(5) DUANE WATSON	2.00									
TREASURER	0.00	X		X				0	0	0
(6) JULIE BARON	1.00									
DIRECTOR	0.00	X						0	0	0
(7) RICH KRINKS	1.50									
DIRECTOR	0.00	X						0	0	0
(8) KYLE CONNER	1.50									
DIRECTOR	0.00	X						0	0	0
(9) KATE PRYOR	2.00									
DIRECTOR	0.00	X						0	0	0
(10) CINDY KAHL	2.00									
DIRECTOR	0.00	X						0	0	0
(11) RON MOONEY	5.00									
TREASURER	0.00	X		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 or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(12) JENNIFER SERR	1.00									
DIRECTOR	0.00	X						0	0	0
(13) KRIZTEN DELOSSANTOS	5.00									
INTERIM SECRETARY	0.00	X		X				0	0	0
(14) CYNTHIA SHORLE	2.00									
DIRECTOR	0.00	X						0	0	0
1b Sub-total								57,636		
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								57,636		

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

		Yes	No
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*		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*		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*		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 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	120,626			
	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				
	g Noncash contributions included in lines 1a-1f: $					
	h **Total.** Add lines 1a–1f		120,626			
Program Service Revenue		Busn. Code				
	2a ART & WINE FAIRE		156,117	156,117		
	b SPRING FESTIVAL		116,071	116,071		
	c CAR SHOW		24,735	24,735		
	d SPIRITS STROLL		19,890	19,890		
	e MUNI LOT		3,000	3,000		
	f All other program service revenue		3,957	3,957		
	g **Total.** Add lines 2a–2f		323,770			
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)					
		(i) Securities	(ii) Other			
	7a Gross amount from sales of assets other than inventory					
	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					
	b Less: direct expenses b					
	c Net income or (loss) from fundraising events					
	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.		444,396	323,770	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	118,881	74,283	44,598	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes	11,354		11,354	
11 Fees for services (non-employees):				
a Management	14,739	14,739		
b Legal				
c Accounting	7,227		7,227	
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.)	23,953	23,953		
12 Advertising and promotion	62,578	62,578		
13 Office expenses	4,797	392	4,405	
14 Information technology				
15 Royalties				
16 Occupancy	26,628		26,628	
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	2,384		2,384	
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance	8,077	435	7,642	
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 GLASSES	8,793	8,793		
b GLASSES	7,914	7,914		
c BEER	7,350	7,350		
d WINE	6,652	6,652		
e All other expenses	76,694	72,797	3,897	
25 Total functional expenses. Add lines 1 through 24e	388,021	279,886	108,135	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 ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

			(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest bearing	95,657	1	170,275
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	750	4	1,850
	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	9,121	9	7,019
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D — 10a: 26,262			
	b	Less: accumulated depreciation — 10b: 26,262		10c	
	11	Investments—publicly traded securities		11	
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	3,475	15	3,475
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)	109,003	16	182,619
Liabilities	17	Accounts payable and accrued expenses	3,143	17	6,720
	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	37,985	25	51,649
	26	**Total liabilities.** Add lines 17 through 25	41,128	26	58,369
Net Assets or Fund Balances		**Organizations that follow SFAS 117 (ASC 958), check here ☒ and complete lines 27 through 29, and lines 33 and 34.**			
	27	Unrestricted net assets	48,498	27	116,139
	28	Temporarily restricted net assets	19,377	28	8,111
	29	Permanently restricted net assets		29	
		Organizations that do not follow SFAS 117 (ASC 958), check here ☐ 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	67,875	33	124,250
	34	Total liabilities and net assets/fund balances	109,003	34	182,619

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	444,396
2	Total expenses (must equal Part IX, column (A), line 25)	2	388,021
3	Revenue less expenses. Subtract line 2 from line 1	3	56,375
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	67,875
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	124,250

Part XII Financial Statements and Reporting

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

			Yes	No
1	Accounting method used to prepare the Form 990: ☐ Cash ☒ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," 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: ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	2a		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: ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	2b		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.	2c		
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?	3a		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b		

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

OMB No. 1545-0047

2017

Open to Public Inspection

Name of the organization
PARK STREET BUSINESS ASSOCIATION, INC.

Employer identification number

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? ☐ Yes ☐ 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? ☐ Yes ☐ 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).

☐ Preservation of land for public use (e.g., recreation or education)
☐ Protection of natural habitat
☐ Preservation of open space
☐ Preservation of a historically important land area
☐ Preservation of a certified historic structure

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 7/25/06, 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
c Beginning balance	1c	
d Additions during the year	1d	
e Distributions during the year	1e	
f Ending balance	1f	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ..... ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII .....

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:

		Yes	No
(i) unrelated organizations	3a(i)		
(ii) related organizations	3a(ii)		
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?	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		26,262	26,262	
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**	43,811
(3) **ACCRUED PAYROLL**	3,466
(4) **CREDIT CARDS**	3,150
(5) **PAYROLL TAXES**	1,222
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 25.)*	51,649

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 O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2017

Open to Public Inspection

Name of the organization: PARK STREET BUSINESS ASSOCIATION, INC.

Employer identification number:

FORM 990 - ORGANIZATION'S MISSION

THE PARK STREET BUSINESS ASSOCIATION (DBA DOWNTOWN ALAMEDA BUSINESS ASSOCIATION) IS HARD AT WORK YEAR ROUND WITH OUR 450+ BUSINESSES IN MIND. FIRST FORMED IN 1981, WE SERVE AS A SUPPORT NETWORK AND ADVOCATE FOR BUSINESSES OPERATING IN OUR HISTORIC BUSINESS IMPROVEMENT AREA. THE DOWNTOWN ASSOCIATION PROMOTES A HEALTHY RETAIL/SERVICE CLIMATE AS WELL AS A DISTRICT THAT IS FAMILY-FRIENDLY, CLEAN, GREEN, AND SAFE. THE WELFARE OF THE ASSOCIATION AND ITS MEMBERS IS ACTIVELY PURSUED BY STAFF, OUR BOARD OF DIRECTORS, CITY OFFICIALS, AND CIVIC-MINDED VOLUNTEERS.

FORM 990, PART III, LINE 4D - ALL OTHER ACCOMPLISHMENT

THE PARK STREET BUSINESS ASSOCIATION (DBA DOWNTOWN ALAMEDA BUSINESS ASSOCIATION) IS HARD AT WORK YEAR ROUND WITH OUR 450+ BUSINESSES IN MIND. FIRST FORMED IN 1981, WE SERVE AS A SUPPORT NETWORK AND ADVOCATE FOR BUSINESSES OPERATING IN OUR HISTORIC BUSINESS IMPROVEMENT AREA. THE DOWNTOWN ASSOCIATION PROMOTES A HEALTHY RETAIL/SERVICE CLIMATE AS WELL AS A DISTRICT THAT IS FAMILY-FRIENDLY, CLEAN, GREEN, AND SAFE. THE WELFARE OF THE ASSOCIATION AND ITS MEMBERS IS ACTIVELY PURSUED BY STAFF, OUR BOARD OF DIRECTORS, CITY OFFICIALS, AND CIVIC-MINDED VOLUNTEERS.

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990

DIRECTOR(S) REVIEW FORM 990 PRIOR TO FILING

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION

AVAILABLE UPON REQUEST

Name of the organization: PARK STREET BUSINESS ASSOCIATION,

Employer identification number:

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

DESCRIPTION	PROGRAM SERVICE	MGT & GENERAL	FUNDRAISING
T-SHIRTS	$ 6,348	$ 0	$ 0
PROMOTION COMMITTEE	$ 5,019	$ 0	$ 0
BEER	$ 4,800	$ 0	$ 0
WINE	$ 4,720	$ 0	$ 0
LUMPERS	$ 3,980	$ 0	$ 0
MEMBERSHIP	$ 0	$ 3,755	$ 0
PRESSURE WASHING	$ 3,750	$ 0	$ 0
LUMPERS	$ 2,960	$ 0	$ 0
DUMPSTER	$ 2,500	$ 0	$ 0
PRESSURE WASHING	$ 2,500	$ 0	$ 0
TRASH/RECYCLE	$ 2,500	$ 0	$ 0
STAGE RENTAL			

Name of the organization: PARK STREET BUSINESS ASSOCIATION,

Employer identification number:

	$ 2,430	$ 0	$ 0
AWF T-SHIRTS			
	$ 2,411	$ 0	$ 0
OTHER			
	$ 2,001	$ 0	$ 0
MISC.			
	$ 1,968	$ 0	$ 0
POSTER			
	$ 1,864	$ 0	$ 0
SECURITY			
	$ 1,744	$ 0	$ 0
AWF ICE			
	$ 1,600	$ 0	$ 0
ELECTICIAN			
	$ 1,500	$ 0	$ 0
GLASSWARE			
	$ 1,437	$ 0	$ 0
PERMITS			
	$ 1,283	$ 0	$ 0
ELECTRICAL			
	$ 1,262	$ 0	$ 0
MUSIC			
	$ 1,180	$ 0	$ 0
PLATES			
	$ 1,121	$ 0	$ 0
MISC.			
	$ 1,103	$ 0	$ 0

Name of the organization: PARK STREET BUSINESS ASSOCIATION,

Employer identification number:

BIKE MONITORS

$ 1,100 $ 0 $ 0

BANNERS

$ 953 $ 0 $ 0

FRAUD LOSS (PAYPAL)

$ 900 $ 0 $ 0

POLICE

$ 872 $ 0 $ 0

BIKE PARKING

$ 800 $ 0 $ 0

OTHER- PROG

$ 762 $ 0 $ 0

CATERING

$ 667 $ 0 $ 0

SUPPLIES

$ 507 $ 0 $ 0

ICE

$ 502 $ 0 $ 0

VOLUNTEER TOKENS

$ 500 $ 0 $ 0

PERMITS

$ 479 $ 0 $ 0

MISC.

$ 436 $ 0 $ 0

TOILET RENTAL

$ 306 $ 0 $ 0

BIKE PARKING

Name of the organization: PARK STREET BUSINESS ASSOCIATION,

Employer identification number:

	$ 280	$ 0	$ 0
LUMPERS			
	$ 280	$ 0	$ 0
RENTAL TRUCKS			
	$ 277	$ 0	$ 0
POSTAGE			
	$ 241	$ 0	$ 0
TRUCK RENTAL			
	$ 199	$ 0	$ 0
POSTER			
	$ 176	$ 0	$ 0
MUSIC CLEARANCE			
	$ 154	$ 0	$ 0
PRINTING			
	$ 142	$ 0	$ 0
MERCHANT SERVICE FEES			
	$ 0	$ 142	$ 0
DRINK TICKETS			
	$ 73	$ 0	$ 0
DRINK TICKETS			
	$ 66	$ 0	$ 0
BANNER			
	$ 65	$ 0	$ 0
SUPPLIES			
	$ 44	$ 0	$ 0
TAXES/LICENSES			
	$ 35	$ 0	$ 0

Name of the organization | Employer identification number

PARK STREET BUSINESS ASSOCIATION,

TOTAL			
	$ 72,797	$ 3,897	$ 0

PSBA Park Street Business Association, 01/14/2019 4:26 PM

Federal Asset Report

FYE: 6/30/2018

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	26,262				26,262	10	HY	200DB	26,262	0
			26,262				26,262				26,262	0
	Grand Totals		26,262				26,262				26,262	0
	Less: Dispositions and Transfers		0				0				0	0
	Less: Start-up/Org Expense		0				0				0	0
	Net Grand Totals		26,262				26,262				26,262	0

PSBA Park Street Business Association, 01/14/2019 4:26 PM

CA Asset Report

FYE: 6/30/2018

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	26,262	26,262	26,262	0	0	0
			26,262	26,262	26,262	0	0	0
	Grand Totals		26,262	26,262	26,262	0	0	0
	Less: Dispositions		0	0	0	0	0	0
	Less: Start-up/Org Expense		0	0	0	0	0	0
	Net Grand Totals		26,262	26,262	26,262	0	0	0

PSBA Park Street Business Association, 01/14/2019 4:26 PM

AMT Asset Report

FYE: 6/30/2018

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	26,262				26,262	10	HY	150DB	26,262	0
			26,262				26,262				26,262	0
	Grand Totals		26,262				26,262				26,262	0
	Less: Dispositions and Transfers		0				0				0	0
	Net Grand Totals		26,262				26,262				26,262	0

PSBA Park Street Business Association, 01/14/2019 4:26 PM

Depreciation Adjustment Report

FYE: 6/30/2018

All Business Activities

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

PSBA Park Street Business Association, 01/14/2019 4:26 PM

Future Depreciation Report FYE: 6/30/19

FYE: 6/30/2018

Form 990, Page 1

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

PSBA Park Street Business Association, 01/14/2019 4:26 PM

CA Future Depreciation Report FYE: 6/30/19

FYE: 6/30/2018 **Form 990, Page 1**

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

Form **990**

Two Year Comparison Report

For calendar year 2017, or tax year beginning 07/01/17 , ending 06/30/18

2016 & 2017

Name

PARK STREET BUSINESS ASSOCIATION, INC.

Taxpayer Identification Number

			2016	2017	Differences
Revenue	1. Contributions, gifts, grants	1.			
	2. Membership dues and assessments	2.	112,107	120,626	8,519
	3. Government contributions and grants	3.			
	4. Program service revenue	4.	25,137	323,770	298,633
	5. Investment income	5.			
	6. Proceeds from tax exempt bonds	6.			
	7. Net gain or (loss) from sale of assets other than inventory	7.			
	8. Net income or (loss) from fundraising events	8.	132,248		-132,248
	9. Net income or (loss) from gaming	9.			
	10. Net gain or (loss) on sales of inventory	10.			
	11. Other revenue	11.			
	12. **Total revenue.** Add lines 1 through 11	12.	269,492	444,396	174,904
Expenses	13. Grants and similar amounts paid	13.			
	14. Benefits paid to or for members	14.			
	15. Compensation of officers, directors, trustees, etc.	15.			
	16. Salaries, other compensation, and employee benefits	16.	100,290	130,235	29,945
	17. Professional fundraising fees	17.			
	18. Other professional fees	18.	46,874	45,919	-955
	19. Occupancy, rent, utilities, and maintenance	19.	18,507	26,628	8,121
	20. Depreciation and Depletion	20.			
	21. Other expenses	21.	49,617	185,239	135,622
	22. **Total expenses.** Add lines 13 through 21	22.	215,288	388,021	172,733
	23. **Excess or (Deficit).** Subtract line 22 from line 12	23.	54,204	56,375	2,171
Other Information	24. Total exempt revenue	24.	269,492	444,396	174,904
	25. Total unrelated revenue	25.			
	26. Total excludable revenue	26.	25,137	323,770	298,633
	27. Total assets	27.	109,002	182,619	73,617
	28. Total liabilities	28.	41,128	58,369	17,241
	29. Retained earnings	29.	67,874	124,250	56,376
	30. Number of voting members of governing body	30.	13	10	
	31. Number of independent voting members of governing body	31.	13	10	
	32. Number of employees	32.	2	5	
	33. Number of volunteers	33.	60	60	

Form **990**	Tax Return History	**2017**

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

Employer Identification Number - - ---.---

	2013	2014	2015	2016	2017	2018
Contributions, gifts, grants			929			
Membership dues			120,458	112,107	120,626	
Program service revenue			30,337	25,137	323,770	
Capital gain or loss						
Investment income						
Fundraising revenue (income/loss)			106,719	132,248		
Gaming revenue (income/loss)						
Other revenue						
Total revenue			258,443	269,492	444,396	
Grants and similar amounts paid						
Benefits paid to or for members						
Compensation of officers, etc.						
Other compensation			138,732	100,290	130,235	
Professional fees			28,532	46,874	45,919	
Occupancy costs			18,190	18,507	26,628	
Depreciation and depletion			86			
Other expenses			66,679	49,617	185,239	
Total expenses			252,219	215,288	388,021	
Excess or (Deficit)			6,224	54,204	56,375	
Total exempt revenue			258,443	269,492	444,396	
Total unrelated revenue						
Total excludable revenue			30,337	25,137	323,770	
Total Assets			30,998	109,002	182,619	
Total Liabilities			17,328	41,128	58,369	
Net Fund Balances			13,670	67,874	124,250	

Federal Statements

FYE: 6/30/2018

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

Description	Total Expenses	Program Service	Management & General	Fund Raising
PROGRAM	$ 2,875	$ 2,875	$	$
MARKETING	21,078	21,078		
TOTAL	$ 23,953	$ 23,953	$ 0	$ 0

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

Description	Total Expenses	Program Service	Management & General	Fund Raising
T-SHIRTS	$ 6,348	$ 6,348	$	$
PROMOTION COMMITTEE	5,019	5,019		
BEER	4,800	4,800		
WINE	4,720	4,720		
LUMPERS	3,980	3,980		
MEMBERSHIP	3,755		3,755	
PRESSURE WASHING	3,750	3,750		
LUMPERS	2,960	2,960		
DUMPSTER	2,500	2,500		
PRESSURE WASHING	2,500	2,500		
TRASH/RECYCLE	2,500	2,500		
STAGE RENTAL	2,430	2,430		
AWF T-SHIRTS	2,411	2,411		
OTHER	2,001	2,001		
MISC.	1,968	1,968		
POSTER	1,864	1,864		
SECURITY	1,744	1,744		
AWF ICE	1,600	1,600		
ELECTICIAN	1,500	1,500		
GLASSWARE	1,437	1,437		
PERMITS	1,283	1,283		
ELECTRICAL	1,262	1,262		
MUSIC	1,180	1,180		
PLATES	1,121	1,121		
MISC.	1,103	1,103		
BIKE MONITORS	1,100	1,100		

Form 990, Part IX, Line 24e - All Other Expenses (continued)

Description	Total Expenses	Program Service	Management & General	Fund Raising
BANNERS	$ 953	$ 953	$	$
FRAUD LOSS (PAYPAL)	900	900		
POLICE	872	872		
BIKE PARKING	800	800		
OTHER- PROG	762	762		
CATERING	667	667		
SUPPLIES	507	507		
ICE	502	502		
VOLUNTEER TOKENS	500	500		
PERMITS	479	479		
MISC.	436	436		
TOILET RENTAL	306	306		
BIKE PARKING	280	280		
LUMPERS	280	280		
RENTAL TRUCKS	277	277		
POSTAGE	241	241		
TRUCK RENTAL	199	199		
POSTER	176	176		
MUSIC CLEARANCE	154	154		
PRINTING	142	142		
MERCHANT SERVICE FEES	142		142	
DRINK TICKETS	73	73		
DRINK TICKETS	66	66		
BANNER	65	65		
SUPPLIES	44	44		
TAXES/LICENSES	35	35		
TOTAL	$ 76,694	$ 72,797	$ 3,897	$ 0

Form 199 Return Summary

For calendar year 2017, or tax year beginning 07/01/2017 , and ending 06/30/2018

PARK STREET BUSINESS ASSOCIATION, INC.

Gross sales / receipts	323,770	
Dues from members		
Contributions / grants	120,626	
Total costs		
Expenses	388,021	
Excess / (deficit)		56,375
Filing fee	10	
Total payments	10	
Penalties and interest		
Use tax		
Balance due		
Refund		0

Balance Sheet

	Beginning	Ending	Differences
Assets	109,003	182,619	
Liabilities	41,128	58,370	
Net assets	67,875	124,249	56,374

Miscellaneous Information

Amended return

Return / extended due date 05/15/19

034

MAIL TO:
Registry of Charitable Trusts
P.O. Box 903447
Sacramento, CA 94203-4470
(916) 210-6400

WEB SITE ADDRESS:
www.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 the 15th day of the 5th month 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,
Name of Organization

2447 SANTA CLARA AVE STE 302
Address (Number and Street)

ALAMEDA CA 94501
City or Town, State and ZIP Code

Check if:
☐ Change of address.
☐ 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

Gross Annual Revenue	Fee	Gross Annual Revenue	Fee	Gross Annual Revenue	Fee
Less than $25,000	0	Between $100,001 and $250,000	$50	Between $1,000,001 and $10 million	$150
Between $25,000 and $100,000	$25	Between $250,001 and $1 million	$75	Between $10,000,001 and $50 million	$225
				Greater than $50 million	$300

PART A - ACTIVITIES

For your most recent full accounting period (beginning 07/01/17 ending 06/30/18) list:
Gross annual revenue$ 444,396 Total assets $ 182,619

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 page providing an explanation and details for each "yes" response. Please review RRF-1 instructions for information required.

		Yes	No
1.	During this reporting period, were there any contracts, loans, leases or other financial transactions between the organization and any officer, director or trustee thereof either directly or with an entity in which any such officer, director or trustee had any financial interest?		X
2.	During this reporting period, were there any theft, embezzlement, diversion or misuse of the organization's charitable property 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 510-523-1392

Organization's e-mail address RON@RONMOONEY.NET

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

Signature of authorized officer	STEVE BUSSE (Printed Name)	VICE 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.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047
2017
Open to Public Inspection

A For the 2017 calendar year, or tax year beginning 07/01/17 , and ending 06/30/18

B Check if applicable:
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Final return/ terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization: PARK STREET BUSINESS ASSOCIATION, INC.
Doing business as: DOWNTOWN ALAMEDA BUSINESS ASSN.
Number and street (or P.O. box if mail is not delivered to street address): 2447 SANTA CLARA AVE STE 302
Room/suite:
City or town, state or province, country, and ZIP or foreign postal code: ALAMEDA CA 94501

D Employer identification number:
E Telephone number: 510-523-1392
G Gross receipts$ 444,396

F Name and address of principal officer: STEVE BUSSE

H(a) Is this a group return for subordinates? ☐ Yes ☒ No
H(b) Are all subordinates included? ☐ Yes ☐ No
If "No," attach a list. (see instructions)

I Tax-exempt status: ☐ 501(c)(3) ☒ 501(c) (6) (insert no.) ☐ 4947(a)(1) or ☐ 527

J Website: HTTP://DOWNTOWNALAMEDA.COM/

H(c) Group exemption number:

K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other

L Year of formation: 1990

M State of legal domicile: CA

Part I Summary

1 Briefly describe the organization's mission or most significant activities: SEE SCHEDULE O

2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.

Activities & Governance	3 Number of voting members of the governing body (Part VI, line 1a)	3	10
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	10
	5 Total number of individuals employed in calendar year 2017 (Part V, line 2a)	5	5
	6 Total number of volunteers (estimate if necessary)	6	60
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
	b Net unrelated business taxable income from Form 990-T, line 34	7b	0

		Prior Year	Current Year
Revenue	8 Contributions and grants (Part VIII, line 1h)	112,107	120,626
	9 Program service revenue (Part VIII, line 2g)	25,137	323,770
	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)	132,248	0
	12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	269,492	444,396
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)	100,290	130,235
	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)	114,998	257,786
	18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	215,288	388,021
	19 Revenue less expenses. Subtract line 18 from line 12	54,204	56,375

		Beginning of Current Year	End of Year
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	109,003	182,619
	21 Total liabilities (Part X, line 26)	41,128	58,369
	22 Net assets or fund balances. Subtract line 21 from line 20	67,875	124,250

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

STEVE BUSSE VICE PRESIDENT
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☒ if self-employed	PTIN
RYAN VAN VALER		01/14/19		P00619416

Firm's name: RYAN VAN VALER, E.A. — Firm's EIN: -- -------
Firm's address: 2447 SANTA CLARA AVE STE 300 A ALAMEDA, CA 94501-4579 — Phone no. 510-521-0252

May the IRS discuss this return with the preparer shown above? (see Instructions) ☐ Yes ☐ No

Part III Statement of Program Service Accomplishments

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

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 [X] 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 [X] No

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

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

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

THE PARK STREET BUSINESS ASSOCIATION (DBA DOWNTOWN ALAMEDA BUSINESS ASSOCIATION) IS HARD AT WORK YEAR ROUND WITH OUR 470+ BUSINESSES IN MIND. FIRST FORMED IN 1981, WE SERVE AS A SUPPORT NETWORK AND ADVOCATE FOR BUSINESSES OPERATING IN OUR HISTORIC BUSINESS IMPROVEMENT AREA. THE DOWNTOWN ASSOCIATION PROMOTES A HEALTHY RETAIL/SERVICE CLIMATE AS WELL AS A DISTRICT THAT IS FAMILY-FRIENDLY, CLEAN, GREEN, AND SAFE. THE WELFARE OF THE ASSOCIATION AND ITS MEMBERS IS ACTIVELY PURSUED BY STAFF, OUR BOARD OF DIRECTORS, CITY OFFICIALS, AND CIVIC-MINDED VOLUNTEERS.

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

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

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*	1		X
2	Is the organization required to complete *Schedule B, Schedule of Contributors* (see instructions)?	2		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*	3		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*	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? *If "Yes," complete Schedule C, Part III*	5		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*	6		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*	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		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*	9		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*	10		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*	11a	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*	11b		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*	11c		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*	11d		X
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e	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*	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	12a		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*	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		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*	14b		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*	15		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*	16		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)	17		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*	18		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*	19		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*	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
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*	21		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*	22		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*	23		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*	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
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?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
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*	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? *If "Yes," complete Schedule L, Part II*	26		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*	27		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*	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		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*	28c		X
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		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*	32		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*	33		X
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1*	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		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*	35b		
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		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.	38	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

				Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	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		
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	5		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file* (see instructions)				
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?		13a		
	Note. See the instructions for additional information the organization must report on Schedule O.				
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	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 ..... [X]

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	10		
	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	10		
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:

JANET MAGELBY **2447 SANTA CLARA AVE. STE 302**

ALAMEDA **CA 94501** **510-523-1392**

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 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) JANET MAGELBY	40.00									
EXECUTIVE DIRECTOR	0.00	X						57,636	0	0
(2) DONNA LAYBURN	6.00									
PRESIDENT	0.00	X		X				0	0	0
(3) STEVE BUSSE	2.00									
VICE PRESIDENT	0.00	X		X				0	0	0
(4) DEB KNOWLES	2.00									
SECRETARY	0.00	X		X				0	0	0
(5) DUANE WATSON	2.00									
TREASURER	0.00	X		X				0	0	0
(6) JULIE BARON	1.00									
DIRECTOR	0.00	X						0	0	0
(7) RICH KRINKS	1.50									
DIRECTOR	0.00	X						0	0	0
(8) KYLE CONNER	1.50									
DIRECTOR	0.00	X						0	0	0
(9) KATE PRYOR	2.00									
DIRECTOR	0.00	X						0	0	0
(10) CINDY KAHL	2.00									
DIRECTOR	0.00	X						0	0	0
(11) RON MOONEY	5.00									
TREASURER	0.00	X		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) JENNIFER SERR	1.00									
DIRECTOR	0.00	X						0	0	0
(13) KRIZTEN DELOSSANTOS	5.00									
INTERIM SECRETARY	0.00	X		X				0	0	0
(14) CYNTHIA SHORLE	2.00									
DIRECTOR	0.00	X						0	0	0
1b Sub-total								57,636		
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								57,636		

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

		Yes	No
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*		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*		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*		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 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	120,626			
	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				
	g Noncash contributions included in lines 1a-1f: $					
	h **Total.** Add lines 1a–1f		120,626			
Program Service Revenue		Busn. Code				
	2a ART & WINE FAIRE		156,117	156,117		
	b SPRING FESTIVAL		116,071	116,071		
	c CAR SHOW		24,735	24,735		
	d SPIRITS STROLL		19,890	19,890		
	e MUNI LOT		3,000	3,000		
	f All other program service revenue		3,957	3,957		
	g **Total.** Add lines 2a–2f		323,770			
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					
	b Less: direct expenses b					
	c Net income or (loss) from fundraising events					
	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.		444,396	323,770	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 X

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	118,881	74,283	44,598	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes	11,354		11,354	
11 Fees for services (non-employees):				
a Management	14,739	14,739		
b Legal				
c Accounting	7,227		7,227	
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.)	23,953	23,953		
12 Advertising and promotion	62,578	62,578		
13 Office expenses	4,797	392	4,405	
14 Information technology				
15 Royalties				
16 Occupancy	26,628		26,628	
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	2,384		2,384	
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance	8,077	435	7,642	
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 GLASSES	8,793	8,793		
b GLASSES	7,914	7,914		
c BEER	7,350	7,350		
d WINE	6,652	6,652		
e All other expenses	76,694	72,797	3,897	
25 Total functional expenses. Add lines 1 through 24e	388,021	279,886	108,135	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 ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

			(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest bearing	95,657	1	170,275
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	750	4	1,850
	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	9,121	9	7,019
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D — 10a: 26,262			
	b	Less: accumulated depreciation — 10b: 26,262		10c	
	11	Investments—publicly traded securities		11	
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	3,475	15	3,475
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)	109,003	16	182,619
Liabilities	17	Accounts payable and accrued expenses	3,143	17	6,720
	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	37,985	25	51,649
	26	**Total liabilities.** Add lines 17 through 25	41,128	26	58,369
Net Assets or Fund Balances		**Organizations that follow SFAS 117 (ASC 958), check here** ☒ **and complete lines 27 through 29, and lines 33 and 34.**			
	27	Unrestricted net assets	48,498	27	116,139
	28	Temporarily restricted net assets	19,377	28	8,111
	29	Permanently restricted net assets		29	
		Organizations that do not follow SFAS 117 (ASC 958), check here ☐ **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	67,875	33	124,250
	34	Total liabilities and net assets/fund balances	109,003	34	182,619

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	444,396
2	Total expenses (must equal Part IX, column (A), line 25)	2	388,021
3	Revenue less expenses. Subtract line 2 from line 1	3	56,375
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	67,875
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	124,250

Part XII Financial Statements and Reporting

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

			Yes	No
1	Accounting method used to prepare the Form 990: ☐ Cash ☒ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," 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: ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	2a		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: ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	2b		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.	2c		
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?	3a		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b		

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

OMB No. 1545-0047
2017
Open to Public Inspection

Name of the organization
PARK STREET BUSINESS ASSOCIATION, INC.

Employer identification number

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? ☐ Yes ☐ 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? ☐ Yes ☐ 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).

☐ Preservation of land for public use (e.g., recreation or education)
☐ Protection of natural habitat
☐ Preservation of open space
☐ Preservation of a historically important land area
☐ Preservation of a certified historic structure

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 7/25/06, 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
c Beginning balance	1c	
d Additions during the year	1d	
e Distributions during the year	1e	
f Ending balance	1f	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ..... ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII ..... ☐

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:

		Yes	No
(i) unrelated organizations	3a(i)		
(ii) related organizations	3a(ii)		
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?	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		26,262	26,262	
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	43,811
(3) ACCRUED PAYROLL	3,466
(4) CREDIT CARDS	3,150
(5) PAYROLL TAXES	1,222
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 25.)*	51,649

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 O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2017

Open to Public Inspection

Name of the organization: PARK STREET BUSINESS ASSOCIATION, INC.

Employer identification number:

FORM 990 - ORGANIZATION'S MISSION

THE PARK STREET BUSINESS ASSOCIATION (DBA DOWNTOWN ALAMEDA BUSINESS ASSOCIATION) IS HARD AT WORK YEAR ROUND WITH OUR 450+ BUSINESSES IN MIND. FIRST FORMED IN 1981, WE SERVE AS A SUPPORT NETWORK AND ADVOCATE FOR BUSINESSES OPERATING IN OUR HISTORIC BUSINESS IMPROVEMENT AREA. THE DOWNTOWN ASSOCIATION PROMOTES A HEALTHY RETAIL/SERVICE CLIMATE AS WELL AS A DISTRICT THAT IS FAMILY-FRIENDLY, CLEAN, GREEN, AND SAFE. THE WELFARE OF THE ASSOCIATION AND ITS MEMBERS IS ACTIVELY PURSUED BY STAFF, OUR BOARD OF DIRECTORS, CITY OFFICIALS, AND CIVIC-MINDED VOLUNTEERS.

FORM 990, PART III, LINE 4D - ALL OTHER ACCOMPLISHMENT

THE PARK STREET BUSINESS ASSOCIATION (DBA DOWNTOWN ALAMEDA BUSINESS ASSOCIATION) IS HARD AT WORK YEAR ROUND WITH OUR 450+ BUSINESSES IN MIND. FIRST FORMED IN 1981, WE SERVE AS A SUPPORT NETWORK AND ADVOCATE FOR BUSINESSES OPERATING IN OUR HISTORIC BUSINESS IMPROVEMENT AREA. THE DOWNTOWN ASSOCIATION PROMOTES A HEALTHY RETAIL/SERVICE CLIMATE AS WELL AS A DISTRICT THAT IS FAMILY-FRIENDLY, CLEAN, GREEN, AND SAFE. THE WELFARE OF THE ASSOCIATION AND ITS MEMBERS IS ACTIVELY PURSUED BY STAFF, OUR BOARD OF DIRECTORS, CITY OFFICIALS, AND CIVIC-MINDED VOLUNTEERS.

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990

DIRECTOR(S) REVIEW FORM 990 PRIOR TO FILING

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION

AVAILABLE UPON REQUEST

Name of the organization: PARK STREET BUSINESS ASSOCIATION,

Employer identification number:

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

DESCRIPTION	PROGRAM SERVICE	MGT & GENERAL	FUNDRAISING
T-SHIRTS	$ 6,348	$ 0	$ 0
PROMOTION COMMITTEE	$ 5,019	$ 0	$ 0
BEER	$ 4,800	$ 0	$ 0
WINE	$ 4,720	$ 0	$ 0
LUMPERS	$ 3,980	$ 0	$ 0
MEMBERSHIP	$ 0	$ 3,755	$ 0
PRESSURE WASHING	$ 3,750	$ 0	$ 0
LUMPERS	$ 2,960	$ 0	$ 0
DUMPSTER	$ 2,500	$ 0	$ 0
PRESSURE WASHING	$ 2,500	$ 0	$ 0
TRASH/RECYCLE	$ 2,500	$ 0	$ 0
STAGE RENTAL			

Name of the organization: PARK STREET BUSINESS ASSOCIATION,

Employer identification number:

	$ 2,430	$ 0	$ 0
AWF T-SHIRTS			
	$ 2,411	$ 0	$ 0
OTHER			
	$ 2,001	$ 0	$ 0
MISC.			
	$ 1,968	$ 0	$ 0
POSTER			
	$ 1,864	$ 0	$ 0
SECURITY			
	$ 1,744	$ 0	$ 0
AWF ICE			
	$ 1,600	$ 0	$ 0
ELECTICIAN			
	$ 1,500	$ 0	$ 0
GLASSWARE			
	$ 1,437	$ 0	$ 0
PERMITS			
	$ 1,283	$ 0	$ 0
ELECTRICAL			
	$ 1,262	$ 0	$ 0
MUSIC			
	$ 1,180	$ 0	$ 0
PLATES			
	$ 1,121	$ 0	$ 0
MISC.			
	$ 1,103	$ 0	$ 0

Name of the organization: PARK STREET BUSINESS ASSOCIATION,

Employer identification number:

BIKE MONITORS

$	1,100	$ 0	$ 0

BANNERS

$	953	$ 0	$ 0

FRAUD LOSS (PAYPAL)

$	900	$ 0	$ 0

POLICE

$	872	$ 0	$ 0

BIKE PARKING

$	800	$ 0	$ 0

OTHER- PROG

$	762	$ 0	$ 0

CATERING

$	667	$ 0	$ 0

SUPPLIES

$	507	$ 0	$ 0

ICE

$	502	$ 0	$ 0

VOLUNTEER TOKENS

$	500	$ 0	$ 0

PERMITS

$	479	$ 0	$ 0

MISC.

$	436	$ 0	$ 0

TOILET RENTAL

$	306	$ 0	$ 0

BIKE PARKING

Name of the organization: PARK STREET BUSINESS ASSOCIATION,

Employer identification number:

	$ 280	$ 0	$ 0
LUMPERS			
	$ 280	$ 0	$ 0
RENTAL TRUCKS			
	$ 277	$ 0	$ 0
POSTAGE			
	$ 241	$ 0	$ 0
TRUCK RENTAL			
	$ 199	$ 0	$ 0
POSTER			
	$ 176	$ 0	$ 0
MUSIC CLEARANCE			
	$ 154	$ 0	$ 0
PRINTING			
	$ 142	$ 0	$ 0
MERCHANT SERVICE FEES			
	$ 0	$ 142	$ 0
DRINK TICKETS			
	$ 73	$ 0	$ 0
DRINK TICKETS			
	$ 66	$ 0	$ 0
BANNER			
	$ 65	$ 0	$ 0
SUPPLIES			
	$ 44	$ 0	$ 0
TAXES/LICENSES			
	$ 35	$ 0	$ 0

Name of the organization | Employer identification number

PARK STREET BUSINESS ASSOCIATION,

TOTAL			
	$ 72,797	$ 3,897	$ 0

034

Date Accepted _____

DO NOT MAIL THIS FORM TO THE FTB

TAXABLE YEAR **2017**

California e-file Return Authorization for Exempt Organizations

FORM **8453-EO**

Exempt Organization name: PARK STREET BUSINESS ASSOCIATION, INC.

Identifying number:

Part I Electronic Return Information (whole dollars only)

1 Total gross receipts (Form 199, line 4)	1	444,396
2 Total gross income (Form 199, line 8)	2	444,396
3 Total expenses and disbursements (Form 199, Line 9)	3	388,021

Part II Settle Your Account Electronically for Taxable Year 2017

4 ☐ 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 _____

6 Account number _____ 7 Type of account: ☐ Checking ☐ Savings

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 2017 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 _____ Date 12/11/18 Title VICE PRESIDENT

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, 2017 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 Sign

ERO's signature _____ Date _____ Check if also paid preparer ☒ Check if self-employed ☒ ERO's PTIN _____

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

FEIN _____ ZIP code 94501

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

Paid Preparer Must Sign

Paid preparer's signature _____ Date 01/14/19 Check if self-employed ☒ Paid preparer's PTIN _____

Firm's name (or yours if self-employed) and address: 2447 SANTA CLARA AVE STE 300 A

FEIN _____ ZIP code _____

TAXABLE YEAR **2017**

California Exempt Organization Annual Information Return

FORM **199**

Calendar Year 2017 or fiscal year beginning (mm/dd/yyyy) 07/01/2017 , and ending (mm/dd/yyyy) 06/30/2018 .

Corporation/Organization name: PARK STREET BUSINESS ASSOCIATION, INC.

California corporation number:

Additional Information. See instructions.: DOWNTOWN ALAMEDA BUSINESS ASSN.

FEIN:

Street address (suite or room): 2447 SANTA CLARA AVE STE 302

PMB no.:

City: ALAMEDA

State: CA

Zip code: 94501

Foreign country name:

Foreign province/state/county:

Foreign postal code:

A First Return ... Yes [X] No
B Amended Return ... Yes [X] No
C IRC Section 4947(a)(1) trust ... Yes [X] No
D Final Information Return?
● [ ] Dissolved [ ] Surrendered (Withdrawn) [ ] Merged/Reorganized
Enter date: (mm/dd/yyyy) ●
E Check accounting method: (1) [ ] Cash (2) [X] 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 [X] No
H Is this organization in a group exemption ... Yes [X] 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 [X] No

J If exempt under R&TC Section 23701d, has the organization engaged in political activities? See instructions. N/A ● Yes No
K Is the organization exempt under R&TC Section 23701g? ● Yes [X] No
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 [X] No
N Did the organization file Form 100 or Form 109 to report taxable income? ... ● Yes [X] No
O Is the organization under audit by the IRS or has the IRS audited in a prior year? ... ● Yes [X] No
P Is federal Form 1023/1024 pending? ... Yes [X] 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	323,770 00
	2 Gross dues and assessments from members and affiliates ●		2	00
	3 Gross contributions, gifts, grants, and similar amounts received ●		3	120,626 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	444,396 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	444,396 00
Expenses	9 Total expenses and disbursements. From Side 2, Part II, line 18 ●		9	388,021 00
	10 Excess of receipts over expenses and disbursements. Subtract line 9 from line 8 ●		10	56,375 00
Filing Fee	11 Total payments ●		11	100
	12 Use tax. See General Instruction K ●		12	00
	13 Payments balance. If line 11 is more than line 12, subtract line 12 from line 11 ●		13	100
	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	100
	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	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.

Signature of officer | Title: VICE PRESIDENT | Date | ● Telephone: 510-523-1392

Paid Preparer's Use Only

Preparer's signature | Date: 01/14/2019 | Check if self-employed [X] | ● PTIN

Firm's name (or yours, if self-employed) and address: RYAN VAN VALER, E.A.
2447 SANTA CLARA AVE STE 300 A
ALAMEDA, CA 94501-4579

● FEIN

● Telephone: 510-521-0252

May the FTB discuss this return with the preparer shown above? See instructions ... ● [ ] Yes [ ] No

PARK STREET BUSINESS ASSOCIATION,
94-3127526

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	323,770 00
	2	Interest	2	00
	3	Dividends	3	00
	4	Gross rents	4	00
	5	Gross royalties	5	00
	6	Gross amount received from sale of assets (See Instructions)	6	00
	7	Other income. Attach schedule	7	00
	8	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	323,770 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 1	11	00
	12	Other salaries and wages	12	118,881 00
	13	Interest	13	00
	14	Taxes	14	35 00
	15	Rents	15	26,628 00
	16	Depreciation and depletion (See instructions)	16	00
	17	Other Expenses and Disbursements. Attach schedule. SEE STATEMENT 2	17	242,477 00
	18	Total expenses and disbursements. Add line 9 through line 17. Enter here and on Side 1, Part I, line 9	18	388,021 00

Schedule L Balance Sheet

Assets	Beginning of taxable year (a)	(b)	End of taxable year (c)	(d)
1 Cash		95,657		170,275
2 Net accounts receivable		750		1,850
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		26,262	
b Less accumulated depreciation	(26,262)		(26,262)	
11 Land				
12 Other assets. Attach schedule STMT 3		12,596		10,494
13 Total assets		109,003		182,619
Liabilities and net worth				
14 Accounts payable		3,143		6,720
15 Contributions, gifts, or grants payable				
16 Bonds and notes payable				
17 Mortgages payable				
18 Other liabilities. Attach schedule STMT 4		37,985		51,649
19 Capital stock or principal fund				
20 Paid-in or capital surplus. Attach reconciliation				
21 Retained earnings or income fund		67,875		124,250
22 Total liabilities and net worth		109,003		182,619

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	56,375	7 Income recorded on books this year not included in this return. Attach schedule	
2 Federal income tax			
3 Excess of capital losses over capital gains			
4 Income not recorded on books this year. Attach schedule		8 Deductions in this return not charged against book income this year. Attach schedule	
5 Expenses recorded on books this year not deducted in this return. Attach schedule		9 Total. Add line 7 and line 8	
6 Total. Add line 1 through line 5	56,375	10 Net income per return. Subtract line 9 from line 6	56,375

California Statements

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

Name	Address	City	State	Zip	Title	Avg Hrs	Compensation Amount
DONNA LAYBURN					PRESIDENT	6.00	
STEVE BUSSE					VICE PRESIDENT	2.00	
DEB KNOWLES					SECRETARY	2.00	
DUANE WATSON					TREASURER	2.00	
JULIE BARON					DIRECTOR	1.00	
RICH KRINKS					DIRECTOR	1.50	
KYLE CONNER					DIRECTOR	1.50	
KATE PRYOR					DIRECTOR	2.00	
CINDY KAHL					DIRECTOR	2.00	
RON MOONEY					TREASURER	5.00	
JANET MAGELBY					EXECUTIVE DIRECTOR	40.00	
JENNIFER SERR					DIRECTOR	1.00	
KRIZTEN DELOSSANTOS					INTERIM SECRETARY	5.00	
CYNTHIA SHORLE					DIRECTOR	2.00	
TOTAL							0

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

Description	Amount
	$
ART & WINE FAIRE	
	16,291
	10,781
CATERING	667
BEER	7,350
WINE	6,652
GLASSES	7,914
SALES TAX	
TABLES/CHAIRS RENTALS	
SPONSORS BOOTHS	
LUMPERS	3,980
BIKE MONITORS	1,100
DUMPSTER	2,500
ELECTICIAN	1,500
POSTER	1,864
SECURITY	1,744
RENTAL TRUCKS	277
AWF ICE	1,600
AWF T-SHIRTS	2,411
MISC.	1,968
PERMITS	1,283
DRINK TICKETS	66
SUPPLIES	44
BANNERS	953
PRESSURE WASHING	2,500
OTHER	
SPRING FESTIVAL	
	11,485
	3,958
TRASH/RECYCLE	2,500
POSTER	
MUSIC CLEARANCE	154
VOLUNTEER TOKENS	500
SALES TAX	
GLASSES	8,793
BEER	4,800
WINE	4,720
BANNER	65
PERMITS	479
DRINK TICKETS	73
POLICE	872
PRINTING	
BIKE PARKING	800
ELECTRICAL	1,262
LUMPERS	2,960
BOOTHS	
TRUCK RENTAL	199
STAGE RENTAL	2,430
ICE	502
SUPPLIES	507
MISC.	436
PRESSURE WASHING	3,750

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

Description	Amount
SPRING FESTIVAL - OTHER	$
CAR SHOW	
	5,315
TOILET RENTAL	306
BIKE PARKING	280
MUSIC	1,180
LUMPERS	280
POSTER	176
BANNER	
PLATES	1,121
T-SHIRTS	6,348
MISC.	1,103
PRINTING	142
POSTAGE	241
SPIRITS STROLL	
	4,787
	435
GLASSWARE	1,437
OTHER	1,401
OTHER	600
PROGRAM	2,875
SHOPPING GUIDES	
PRINTING/ POSTAGE	392
POWER BOX ART	
MEMBERSHIP	3,755
PROMOTION COMMITTEE	5,019
MAINT. & IMPROVEMENT COMM	
OTHER- REST	
MERCHANT SERVICE FEES	142
OTHER- PROG	762
SUPPLIES	457
OTHER	3,948
WORKERS COMP	1,247
LIABILITY/ D&O	6,395
PAYROLL TAXES	11,354
ACCOUNTING	7,227
MARKETING	21,078
CONFERENCES, MEETINGS	2,384
ADVERTISING, PROMOTION	24,700
FRAUD LOSS (PAYPAL)	900
TOTAL	$ 242,477

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

Description	Beginning of Year	End of Year
SECURITY DEPOSIT	$ 3,475	$ 3,475
PREPAID EXPENSES	9,121	7,019
TOTAL	$ 12,596	$ 10,494

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

Description	Beginning of Year	End of Year
UNEARNED REVENUE	$ 29,415	$ 43,811
ACCRUED PAYROLL	4,437	3,466
WORKERS COMP	258	
OTHER	3,875	
CREDIT CARDS		3,150
PAYROLL TAXES		1,222
TOTAL	$ 37,985	$ 51,649