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Form 990

Return of Organization Exempt From Income Tax

2009

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

► The organization may have to use a copy of this return to satisfy state reporting requirements

A For the 2009 calendar year, or tax year beginning 04-01-2009 and ending 03-31-2010

- B Check if applicable
 Address change
 Name change
 Initial return
 Terminated
 Amended return
 Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization CITY PARKS FOUNDATION	D Employer identification number 13-3561657
E Telephone number (212) 360-1399	
Doing Business As	G Gross receipts \$ 17,128,363
Number and street (or P O box if mail is not delivered to street address) 830 FIFTH AVENUE	Room/suite
City or town, state or country, and ZIP + 4 NEW YORK, NY 100657001	

F Name and address of principal officer
DAVID RIVEL
830 FIFTH AVENUE
NEW YORK, NY 100657001H(a) Is this a group return for affiliates? Yes NoH(b) Are all affiliates included? Yes No
If "No," attach a list (see instructions)

H(c) Group exemption number ►

I Tax-exempt status 501(c) (3) ► (insert no) 4947(a)(1) or 527

J Website: ► WWW CITYPARKSFOUNDATION.ORG

K Form of organization Corporation Trust Association Other ►

L Year of formation 1989

M State of legal domicile NY

Part I Summary

1	Briefly describe the organization's mission or most significant activities SEE SCHEDULE O FOR A DESCRIPTION OF THE ORGANIZATION'S MISSION OR MOST SIGNIFICANT ACTIVITIES
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)
4	Number of independent voting members of the governing body (Part VI, line 1b)
5	Total number of employees (Part V, line 2a)
6	Total number of volunteers (estimate if necessary)
7a	Total gross unrelated business revenue from Part VIII, column (C), line 12
b	Net unrelated business taxable income from Form 990-T, line 34

8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
9	Program service revenue (Part VIII, line 2g)	10,446,599	11,317,225
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,944,912	3,330,236
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	532,064	520,710
12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	12,923,575	15,168,171

13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	Prior Year	Current Year
14	Benefits paid to or for members (Part IX, column (A), line 4)	161,428	77,120
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	5,368,390	5,802,217
16a	Professional fundraising fees (Part IX, column (A), line 11e)		0
b	Total fundraising expenses (Part IX, column (D), line 25) ► 910,636		
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	4,617,486	5,791,728
18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	10,147,304	11,671,065
19	Revenue less expenses Subtract line 18 from line 12	2,776,271	3,497,106

20	Total assets (Part X, line 16)	Beginning of Current Year	End of Year
21	Total liabilities (Part X, line 26)	19,670,533	27,042,030
22	Net assets or fund balances Subtract line 21 from line 20	624,793	1,560,285
		19,045,740	25,481,745

Part II Signature Block

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 officer) is based on all information of which preparer has any knowledge		
	Signature of officer DAVID RIVEL EXECUTIVE DIRECTOR Type or print name and title		
Paid Preparer's Use Only	Preparer's signature Firm's name (or yours if self-employed), address, and ZIP + 4 Marks Paneth & Shron LLP 622 Third Avenue New York, NY 10017		

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

Part III Statement of Program Service Accomplishments**1** Briefly describe the organization's mission

SEE SCHEDULE O FOR A DESCRIPTION OF THE ORGANIZATION'S MISSION

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

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

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

If "Yes," describe these changes on Schedule O

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses
Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts 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 \$ 4,302,830 including grants of \$) (Revenue \$ 3,145,355)

ARTS & CULTURE CPF PRESENTS OVER 1,200 PERFORMANCES A YEAR IN PARKS THROUGHOUT NEW YORK CITY, INCLUDING CONCERTS, PUPPET SHOWS, THEATER AND DANCE PERFORMANCES, READINGS AND PERFORMING ARTS PROGRAMS FOR CHILDREN MAKING IT ONE OF THE LARGEST ARTS ORGANIZATIONS IN NEW YORK CITY

4b (Code) (Expenses \$ 1,707,189 including grants of \$) (Revenue \$ 12,854)

SPORTS CPF PROVIDES FREE SEQUENTIAL INSTRUCTION TO OVER 15,000 PEOPLE, PRIMARILY AGES FIVE TO SIXTEEN, IN PARKS EACH YEAR. CPF RUNS YOUTH PROGRAMS IN GOLF, TENNIS, TRACK AND FIELD AND A SENIOR CITIZENS FITNESS PROGRAM OFFERING TENNIS, YOGA AND FITNESS WALKING. CPF ALSO OPENED A COMPREHENSIVE JUNIOR GOLF CENTER IN 2008, THE FIRST FACILITY OF ITS KIND IN THE NATION

4c (Code) (Expenses \$ 2,204,121 including grants of \$) (Revenue \$ 0)

PARKS AND PLAYGROUND IMPROVEMENT CPF IMPROVES THE APPEARANCE AND USE OF PARKS THROUGH DIRECT PHYSICAL ENHANCEMENTS, ENCOURAGEMENT OF NEIGHBORHOOD VOLUNTEERS AND INNOVATIONS IN NEW YORK CITY DEPARTMENT OF PARKS AND RECREATION OPERATIONS

4d Other program services (Describe in Schedule O) **See also Additional Data for Description**

(Expenses \$ 1,827,259 including grants of \$) (Revenue \$ 172,027)

4e **Total program service expenses** \$ 10,041,399

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 Yes	
2 Is the organization required to complete Schedule B, Schedule of Contributors?	2 Yes	
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	No
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4 Yes	
5 Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5	
6 Did the organization maintain any donor advised funds or any similar funds or accounts where 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	No
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	No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	No
9 Did the organization report an amount in Part X, line 21, 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	No
10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10 Yes	
11 Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable. <ul style="list-style-type: none"> • Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI. • 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. • 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. • 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. • Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X. • 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? If "Yes," complete Schedule D, Part X. 	11 Yes	
12 Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12 Yes	
12a Was the organization included in consolidated, independent audited financial statements for the tax year?	12a Yes	No
If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional		
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	No
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	No
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b	No
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U.S.? If "Yes," complete Schedule F, Part II	15	No
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U.S.? If "Yes," complete Schedule F, Part III	16	No
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	17	No
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 Yes	
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	No
20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20	No

Part IV Checklist of Required Schedules (continued)

21 Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23 Did the organization answer "Yes" to Part VII, Section A, questions 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	Yes	
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 questions 24b-24d and complete Schedule K. If "No," go to line 25	24a		No
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) and 501(c)(4) 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		No
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		No
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
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)	28a		No
a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28c		No
c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? If "Yes," complete Schedule L, Part IV	29		No
30 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	30		No
31 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	31		No
32 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	32		No
33 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	33		No
34 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	34		No
35 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	35		No
36 Section 501(c)(3) organizations. Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	36		No
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		No
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, <i>Annual Summary and Transmittal of U.S. Information Returns</i> . Enter -0- if not applicable	1a 132	
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0	
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return	2a 471	
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		
3b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		
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)?		
4b	If "Yes," enter the name of the foreign country. See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a No	
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b No	
5c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		
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?	6a No	
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b No	
7	Organizations that may receive deductible contributions under section 170(c).		
7a	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 Yes	
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b Yes	
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c No	
7d	If "Yes," indicate the number of Forms 8282 filed during the year		
7e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e No	
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f No	
7g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g No	
7h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h No	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
9	Sponsoring organizations maintaining donor advised funds.		
9a	Did the organization make any taxable distributions under section 4966?	9a No	
9b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b No	
10	Section 501(c)(7) organizations. Enter		
10a	Initiation fees and capital contributions included on Part VIII, line 12	10a No	
10b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b No	
11	Section 501(c)(12) organizations. Enter		
11a	Gross income from members or shareholders	11a No	
11b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b No	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a No	
12b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b No	

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

Section A. Governing Body and Management

		Yes	No
1a Enter the number of voting members of the governing body . . .	1a	40	
b Enter the number of voting members that are independent . . .	1b	39	
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	Yes	
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		No
4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		No
5 Did the organization become aware during the year of a material diversion of the organization's assets?	5		No
6 Does the organization have members or stockholders?	6		No
7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		No
b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		No
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
a The governing body?	8a	Yes	
b Each committee with authority to act on behalf of the governing body?	8b	Yes	
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		No

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

		Yes	No
10a Does the organization have local chapters, branches, or affiliates?	10a		No
b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11 Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	Yes	
11A Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13 Does the organization have a written whistleblower policy?	13	Yes	
14 Does the organization have a written document retention and destruction policy?	14	Yes	
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	Yes	
b Other officers or key employees of the organization	15b	Yes	
If "Yes" to line a or b, 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		No
b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken 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 ► NY
- 18** Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply
 Own website Another's website Upon request
- 19** Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table
- 20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►
 SIMON CHU
 830 FIFTH AVENUE
 NEW YORK, NY 100657001
 (212) 360-8147

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's **current** key employees 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, or 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 the organization did not compensate any current or former officer, director, trustee or key employee.

1b Total	644,520	0	88,515
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- 2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization **►5**

	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	3	No
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	Yes
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person	5	No

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

(A) Name and business address	(B) Description of services	(C) Compensation
GARDEN CITY MAINTENANCE & IRRIGATION 1124 FRONT STREET UNIONDALE, NY 11553	TREE PLANTINGS	431,526
globe star media n entertainment 241 w 37th street suite 1006 new YORK, NY 10018	audio EQUIP RENTALS	289,750
sagona landscaping 30 sagona court staten island, NY 10309	tree PLANTINGS	182,047
COOPER ROBERTSON & PARTNERS 311 WEST 43RD STREET NEW YORK, NY 10036	ARCHITECT SERVICES	172,039
DESIGNATRONIX 155 COMAC STREET RONKONKOMA, NY 11779	AUDIO EQUIP RENTALS	168,489
2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ►6		

Part VIII Statement of Revenue

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514			
Contributions, gifts, grants and other similar amounts	1a Federated campaigns	1a						
	b Membership dues	1b						
	c Fundraising events	1c	948,562					
	d Related organizations	1d						
	e Government grants (contributions)	1e	5,850,828					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	4,517,835					
	g Noncash contributions included in lines 1a-1f \$		11,223					
	h Total. Add lines 1a-1f		►	11,317,225				
Program Service Revenue	Business Code							
			2a EARNED INCOME	711,300	3,016,363	3,016,363		
			b BENEFIT CONCERTS	711,300	313,873	313,873		
			c					
			d					
			e					
			f All other program service revenue					
			g Total. Add lines 2a-2f		►	3,330,236		
Other Revenue	Business Code							
			3 Investment income (including dividends, interest and other similar amounts)	►	520,028		520,028	
			4 Income from investment of tax-exempt bond proceeds	►				
			5 Royalties	►				
			6a Gross Rents	(I) Real	(II) Personal			
			b Less rental expenses					
			c Rental income 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 and sales expenses	1,801,193							
c Gain or (loss)	1,800,511							
d Net gain or (loss)	682	►	682		682			
8a Gross income from fundraising events (not including \$ 948,562 of contributions reported on line 1c) See Part IV, line 18								
a	159,681							
b Less direct expenses	b	159,681						
c Net income or (loss) from fundraising events		►	0					
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	Business Code							
11a								
b								
c								
d All other revenue								
e Total. Add lines 11a-11d		►						
12 Total revenue. See Instructions		►	15,168,171	3,330,236	0	520,710		

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) but are not required to complete columns (B), (C), and (D).**

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 governments and organizations in the U S See Part IV, line 21	77,120	77,120		
2 Grants and other assistance to individuals in the U S See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	365,443	95,197	246,446	23,800
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	4,427,309	3,614,543	247,852	564,914
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	19,659	9,242	2,118	8,299
9 Other employee benefits	643,761	543,920	32,637	67,204
10 Payroll taxes	346,045	255,805	41,522	48,718
11 Fees for services (non-employees)				
a Management				
b Legal	2,968		2,968	
c Accounting	37,600		37,600	
d Lobbying	63,765			63,765
e Professional fundraising See Part IV, line 17				
f Investment management fees				
g Other	1,733,414	1,728,633	4,781	
12 Advertising and promotion	418,049	356,279	12,964	48,806
13 Office expenses	72,504	49,769	13,544	9,191
14 Information technology				
15 Royalties				
16 Occupancy				
17 Travel	85,398	68,878	13,362	3,158
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	16,903	15,482	398	1,023
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	170,836	142,548	28,288	
23 Insurance	66,578	44,400	22,178	
24 Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
a EQUIPMENT	991,315	986,648	4,667	
b ARTIST FEES	988,549	988,549		
c Supplies	953,906	953,906		
d DUES & SUBSCRIPTIONS	150,381	70,918	7,705	71,758
e AWARDS & RECOGNITION	39,562	39,562		
f All other expenses				
25 Total functional expenses. Add lines 1 through 24f	11,671,065	10,041,399	719,030	910,636
26 Joint costs. Check here <input checked="" type="checkbox"/> if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

		(A) Beginning of year	(B) End of year
Assets	1 Cash—non-interest-bearing	1,250	1 1,250
	2 Savings and temporary cash investments	3,499,748	2 6,255,666
	3 Pledges and grants receivable, net	1,968,390	3 1,463,485
	4 Accounts receivable, net	4	
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L	5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 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	148,824	9 278,878
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	2,334,198
	b Less accumulated depreciation	10b	520,697
		1,730,556	10c 1,813,501
	11 Investments—publicly traded securities	11,287,024	11 15,444,509
	12 Investments—other securities See Part IV, line 11	12	750,000
	13 Investments—program-related See Part IV, line 11	13	
	14 Intangible assets	14	
	15 Other assets See Part IV, line 11	1,034,741	15 1,034,741
	16 Total assets. Add lines 1 through 15 (must equal line 34)	19,670,533	16 27,042,030
Liabilities	17 Accounts payable and accrued expenses	411,343	17 674,765
	18 Grants payable	18	
	19 Deferred revenue	213,450	19 885,520
	20 Tax-exempt bond liabilities	20	
	21 Escrow or custodial account liability Complete Part IV of Schedule D	21	
	22 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 Complete Part X of Schedule D	25	
	26 Total liabilities. Add lines 17 through 25	624,793	26 1,560,285
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.		
	27 Unrestricted net assets	8,334,617	27 10,337,236
	28 Temporarily restricted net assets	10,620,723	28 15,054,109
	29 Permanently restricted net assets	90,400	29 90,400
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.		
	30 Capital stock or trust principal, or current funds	30	
	31 Paid-in or capital surplus, or land, building or equipment fund	31	
	32 Retained earnings, endowment, accumulated income, or other funds	32	
	33 Total net assets or fund balances	19,045,740	33 25,481,745
	34 Total liabilities and net assets/fund balances	19,670,533	34 27,042,030

Part XI Financial Statements and Reporting

- 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?
- b** Were the organization's financial statements audited by an independent accountant?
- c** If "Yes," to 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
- d** If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both
 Separate basis Consolidated basis Both consolidated and separated basis
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

	Yes	No
2a		No
2b	Yes	
2c	Yes	
3a		No
3b		

2009

Open to Public
Inspection**SCHEDULE A**
(Form 990 or 990EZ)**Public Charity Status and Public Support**

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

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Department of the Treasury
Internal Revenue Service

Name of the organization
CITY PARKS FOUNDATION

Employer identification number

13-3561657

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

- 1 A church, convention of churches, or association of churches **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 8 A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 9 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III)
- 10 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)
- f If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
- (i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
- (ii) a family member of a person described in (i) above?
- (iii) a 35% controlled entity of a person described in (i) or (ii) above?
- h Provide the following information about the supported organization(s)

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of support?
			Yes	No	Yes	No	Yes	No	
Total									

Part II Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
 (Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	6,693,415	8,006,563	8,001,445	10,446,599	11,317,225	44,465,247
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge	1,670,409	1,681,556	2,135,012	2,059,244	2,332,113	9,878,334
4 Total. Add lines 1 through 3	8,363,824	9,688,119	10,136,457	12,505,843	13,649,338	54,343,581
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						323,811
6 Public Support. Subtract line 5 from line 4						54,019,770

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4	8,363,824	834,752	10,136,457	12,505,843	13,649,338	54,343,581
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	504,188	834,752	574,830	506,833	520,028	2,940,631
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets						
11 Total support (Add lines 7 through 10)						57,284,212
12 Gross receipts from related activities, etc (See instructions)				12		11,050,481

13 **First Five Years** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and **stop here** 

Section C. Computation of Public Support Percentage

14 Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f))	14	94 300 %
15 Public Support Percentage for 2008 Schedule A, Part II, line 14	15	93 350 %
16a 33 1/3% support test—2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here . The organization qualifies as a publicly supported organization 		
b 33 1/3% support test—2008. If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here . The organization qualifies as a publicly supported organization 		
17a 10%-facts-and-circumstances test—2009. If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here . Explain in Part IV how the organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization 		
b 10%-facts-and-circumstances test—2008. If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here . Explain in Part IV how the organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization 		
18 Private Foundation If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions 		

Part III Support Schedule for Organizations Described in IRC 509(a)(2)
 (Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public Support (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 Total support (Add lines 9, 10c, 11 and 12)						
14 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						

Section C. Computation of Public Support Percentage

15 Public Support Percentage for 2009 (line 8 column (f) divided by line 13 column (f))	15
16 Public support percentage from 2008 Schedule A, Part III, line 15	16

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2009 (line 10c column (f) divided by line 13 column (f))	17
18 Investment income percentage from 2008 Schedule A, Part III, line 17	18
19a 33 1/3% support tests—2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here . The organization qualifies as a publicly supported organization	
b 33 1/3% support tests—2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here . The organization qualifies as a publicly supported organization	
20 Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions	

Part IV **Supplemental Information.** Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. See instructions

Additional Data

Software ID:
Software Version:
EIN: 13-3561657
Name: CITY PARKS FOUNDATION

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other program services

(Code) (Expenses \$	830,363	including grants of \$) (Revenue \$	46,750)
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EDUCATION CPF TRAINS TEACHERS AND PROVIDES DIRECT SERVICES TO OVER 5,000 STUDENTS IN PARKS, RECREATION CENTERS AND NEW YORK CITY PUBLIC SCHOOLS, BOTH DURING THE SCHOOL DAY AND IN OUT-OF-SCHOOL PROGRAMS

(Code) (Expenses \$	77,120	including grants of \$) (Revenue \$	120,277)
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GRANTS TO OTHER GROUPS CPF MAKES GRANTS TO OTHER NEW YORK CITY PARKS GROUPS AND TO THE NEW YORK CITY DEPARTMENT OF PARKS AND RECREATION TO SUPPORT PROGRAMMING AND OTHER INITIATIVES IN PARKS

(Code) (Expenses \$	919,776	including grants of \$) (Revenue \$	5,000)
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PARTNERSHIPS FOR PARKS PARTNERSHIPS FOR PARKS, A JOINT PROGRAM WITH THE NEW YORK CITY DEPARTMENT OF PARKS AND RECREATION, PROMOTES COMMUNITY INVOLVEMENT IN PARKS BY BUILDING, LINKING AND STRENGTHENING A CITYWIDE CONSTITUENCY OF PARKS SUPPORTERS

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)					(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	
		Or director	Individual trustee	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former		
DAVID RIVEL EXECUTIVE DIRECTOR	35 00	X		X				196,595	0	35,308
ANDREW H TISCH CO-CHAIR	5 00	X		X				0	0	0
JEAN TROUBH CO-CHAIR	5 00	X		X				0	0	0
DAVID MOORE PRESIDENT	5 00	X		X				0	0	0
SUSAN K FREEDMAN VICE PRESIDENT	5 00	X		X				0	0	0
DAVID B PINTER VICE PRESIDENT	5 00	X		X				0	0	0
GAIL GORDON TREASURER	5 00	X		X				0	0	0
LARY S WOLF SECRETARY	5 00	X		X				0	0	0
JAMES ABADIE BOARD MEMBER	2 00	X						0	0	0
EDWARD I ADLER BOARD MEMBER	2 00	X						0	0	0
RICK ARNSTEIN BOARD MEMBER	2 00	X						0	0	0
david barse BOARD MEMBER	2 00	X						0	0	0
ADRIAN BENEPE BOARD MEMBER	2 00	X						0	0	0
ROSCOE C BROWN JR BOARD MEMBER	2 00	X						0	0	0
ELAINE CLARK BOARD MEMBER	2 00	X						0	0	0
CLAIRE GOODMAN P CLOUD BOARD MEMBER	2 00	X						0	0	0
AVERY CORMAN BOARD MEMBER	2 00	X						0	0	0
CHRISTOPHER DAVIES BOARD MEMBER	2 00	X						0	0	0
THOMAS A DUNNE BOARD MEMBER	2 00	X						0	0	0
ALEXANDER D DURST BOARD MEMBER	2 00	X						0	0	0
DEBRA FIFE BOARD MEMBER	2 00	X						0	0	0
JOAN GILLMAN BOARD MEMBER	2 00	X						0	0	0
NATALIE GOMEZ-VELEZ BOARD MEMBER	2 00	X						0	0	0
KAREN MCDONALD BOARD MEMBER	2 00	X						0	0	0
ELISE MERHIGE-DEJOSEPH BOARD MEMBER	2 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)					(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	Office	Key employee	Highest compensated employee			
JB MEYER BOARD MEMBER	2 00	X					0	0	0
PETER NAGER BOARD MEMBER	2 00	X					0	0	0
DWIGHT RAIFFORD BOARD MEMBER	2 00	X					0	0	0
BRUCE C RATNER BOARD MEMBER	2 00	X					0	0	0
LINDA S RECUPERO BOARD MEMBER	2 00	X					0	0	0
ADAM ROSEN BOARD MEMBER	2 00	X					0	0	0
ROBERT SAVITT BOARD MEMBER	2 00	X					0	0	0
PETER C SIMON BOARD MEMBER	2 00	X					0	0	0
ALEXA SMITH BOARD MEMBER	2 00	X					0	0	0
RONALD J STEIN BOARD MEMBER	2 00	X					0	0	0
JOHN TROUBH BOARD MEMBER	2 00	X					0	0	0
VIRGINIA WADE BOARD MEMBER	2 00	X					0	0	0
PHILLIP M WATERMAN JR BOARD MEMBER	2 00	X					0	0	0
HAROLD WEINBERGER BOARD MEMBER	2 00	X					0	0	0
RICHARD WINDRAM BOARD MEMBER	2 00	X					0	0	0
SIMON CHU DIRECTOR - FINANCE	35 00		X				101,961	0	17,429
DEBORAH FLANAGAN DIRECTOR - DEVELOPMENT	35 00			X			106,742	0	8,063
MICHAEL SILVERMAN DIRECTOR - SPORTS	35 00			X			121,325	0	18,050
JAMES BURKE DIR - ARTS & CULTURE	35 00			X			117,897	0	9,665

Form 990, Part IX - Statement of Functional Expenses - 24a - 24e Other Expenses

<i>Do not include amounts reported on line 6b, 8b, 9b, and 10b of Part VIII.</i>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
EQUIPMENT	991,315	986,648	4,667	
ARTIST FEES	988,549	988,549		
Supplies	953,906	953,906		
DUES & SUBSCRIPTIONS	150,381	70,918	7,705	71,758
AWARDS & RECOGNITION	39,562	39,562		

SCHEDULE C
(Form 990 or 990-EZ)**Political Campaign and Lobbying Activities****2009****Open to Public
Inspection****For Organizations Exempt From Income Tax Under section 501(c) and section 527**

► Complete if the organization is described below.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

If the organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered "Yes," to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, line 35a (regarding proxy tax), then

- Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of the organization
CITY PARKS FOUNDATION

Employer identification number

13-3561657

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

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV
- 2 Political expenditures ► \$ _____
- 3 Volunteer hours _____

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ► \$ _____
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ► \$ _____
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
- 4a Was a correction made? Yes No
- b If "Yes," describe in Part IV

Part I-C Complete if the organization is exempt under section 501(c) except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ► \$ _____
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ► \$ _____
- 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b ► \$ _____
- 4 Did the filing organization file **Form 1120-POL** for this year? Yes No
- 5 State the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

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

A Check <input type="checkbox"/> if the filing organization belongs to an affiliated group	B Check <input type="checkbox"/> if the filing organization checked box A and "limited control" provisions apply		
Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing Organization's Totals	(b) Affiliated Group Totals
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)			
b Total lobbying expenditures to influence a legislative body (direct lobbying)		63,765	
c Total lobbying expenditures (add lines 1a and 1b)		63,765	
d Other exempt purpose expenditures		11,607,300	
e Total exempt purpose expenditures (add lines 1c and 1d)		11,671,065	
f Lobbying nontaxable amount Enter the amount from the following table in both columns		733,553	
If the amount on line 1e, column (a) or (b) is: Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,500,000 Over \$1,500,000 but not over \$17,000,000 Over \$17,000,000		The lobbying nontaxable amount is: 20% of the amount on line 1e \$100,000 plus 15% of the excess over \$500,000 \$175,000 plus 10% of the excess over \$1,000,000 \$225,000 plus 5% of the excess over \$1,500,000 \$1,000,000	
g Grassroots nontaxable amount (enter 25% of line 1f)		183,388	
h Subtract line 1g from line 1a If zero or less, enter -0-		0	
i Subtract line 1f from line 1c If zero or less, enter -0-		0	
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No	

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2a Lobbying non-taxable amount	646,448	611,559	657,365	733,553	2,648,925
b Lobbying ceiling amount (150% of line 2a, column(e))					3,973,388
c Total lobbying expenditures	117,566	57,226	29,050	63,765	267,607
d Grassroots non-taxable amount	161,612	152,890	164,341	183,388	662,231
e Grassroots ceiling amount (150% of line 2d, column (e))					993,347
f Grassroots lobbying expenditures					

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

	(a)		(b)	
	Yes	No	Amount	
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of				
a Volunteers?				
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c Media advertisements?				
d Mailings to members, legislators, or the public?				
e Publications, or published or broadcast statements?				
f Grants to other organizations for lobbying purposes?				
g Direct contact with legislators, their staffs, government officials, or a legislative body?				
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i Other activities? If "Yes," describe in Part IV				
j Total lines 1c through 1i				
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b If "Yes," enter the amount of any tax incurred under section 4912				
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				

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

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3 Did the organization agree to carryover lobbying and political expenditures from the prior year?	3	

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

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	2a	
a Current year	2b	
b Carryover from last year	2c	
c Total	3	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	4	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	5	
5 Taxable amount of lobbying and political expenditures (see instructions)		

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1. Also, complete this part for any additional information.

Identifier	Return Reference	Explanation

2009

Open to Public
Inspection**SCHEDULE D**
(Form 990)**Supplemental Financial Statements**

► Complete if the organization answered "Yes," to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11, or 12.
► Attach to Form 990. ► See separate instructions.

Department of the Treasury
Internal Revenue Service**Name of the organization**
CITY PARKS FOUNDATION**Employer identification number**

13-3561657

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate 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 may 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" to 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 pleasure) Preservation of an historically importantly land area
- Protection of natural habitat Preservation of a certified historic structure
- Preservation of open space

- 2 Complete lines 2a-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 Year
2a	
2b	
2c	
2d	

- 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable 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 and enforcing conservation easements during the year ► _____

- 7 Amount of expenses incurred in monitoring, inspecting, 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 170(h)(4)(B)(ii)? Yes No

- 9 In Part XIV, 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" to Form 990, Part IV, line 8.

- 1a If the organization elected, as permitted under SFAS 116, 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 XIV, the text of the footnote to its financial statements that describes these items

- b If the organization elected, as permitted under SFAS 116, 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) Revenues included in 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 relating to these items

a Revenues included in 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 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 d Loan or exchange programs
 b Scholarly research e Other
 c Preservation for future generations
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV
- 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" to 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 XIV and complete the following table
- | | Amount |
|----|---------------|
| 1c | |
| 1d | |
| 1e | |
| 1f | |
- 2a Did the organization include an amount on Form 990, Part X, line 21? Yes No
- b If "Yes," explain the arrangement in Part XIV

Part V Endowment Funds. Complete if the organization answered "Yes" to 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	12,565,115	14,437,157			
b Contributions	582,500	1,418,990			
c Investment earnings or losses	3,450,838	-2,690,000			
d Grants or scholarships	474,597	601,032			
e Other expenditures for facilities and programs	16,123,856	12,565,115			
g End of year balance					

- 2 Provide the estimated percentage of the year end balance held as

a Board designated or quasi-endowment ► 53 000 % %

b Permanent endowment ► 1 000 % %

c Term endowment ► 46 000 % %

- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

	Yes	No
3a(i) unrelated organizations		
3a(ii) related organizations		

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

- 4 Describe in Part XIV the intended uses of the organization's endowment funds

Part VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

	Description of investment	(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		2,215,995	449,651	1,766,344	
d Equipment		118,203		71,046	47,157
e Other					
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).)					1,813,501

Part VII Investments—Other Securities. 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
Financial derivatives		
Closely-held equity interests		
Other		
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	►	

Total. (Column (b) should equal Form 990, Part X, col (B), line 1)

Part VIII Investments—Program Related. See Form 990, Part X, line 13

Total. (Column (b) should equal Form 990, Part X, col (B) line 13)

Part IX Other Assets. See Form 990, Part X, line 15

Total (Column (b) should equal Form 990, Part X, col (B), line 15)

Part X Other Liabilities See Form 990, Part X, line 25

Total. (Column (b) should equal Form 990, Part X, col (B) line 25)

2. Fin 48 Footnote In Part XIV, 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

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	15,168,171
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	11,671,065
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	3,497,106
4	Net unrealized gains (losses) on investments	4	2,943,899
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	-5,000
9	Total adjustments (net) Add lines 4 - 8	9	2,938,899
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	6,436,005

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	20,439,183
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	2,943,899
b	Donated services and use of facilities	2b	2,332,113
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	-5,000
e	Add lines 2a through 2d	2e	5,271,012
3	Subtract line 2e from line 1	3	15,168,171
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 XIV)	4b	
c	Add lines 4a and 4b	4c	0
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	15,168,171

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	14,003,178
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	2,332,113
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	2,332,113
3	Subtract line 2e from line 1	3	11,671,065
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 XIV)	4b	
c	Add lines 4a and 4b	4c	0
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	11,671,065

Part XIV Supplemental Information

Complete this part to 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, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

Identifier	Return Reference	Explanation
Part V, Line 4	Description of Intended Use of Endowment Funds	CPF'S BOARD OF DIRECTORS HAS DESIGNATED A PORTION OF CPF'S UNRESTRICTED NET ASSETS AS A QUASI-ENDOWMENT FUND, WHEREIN THE ASSETS WILL BE RETAINED FOR INVESTMENT. IT IS THE EXPECTATION OF CPF THAT THE QUASI-ENDOWMENT FUND WILL CONTINUE TO GROW TO SECURE THE LONG-TERM STABILITY OF CPF. PERMANENTLY RESTRICTED NET ASSETS OF \$90,400 ARE HELD FOR THE PERPETUAL CARE OF TWO MONUMENTS. THE TEMPORARILY RESTRICTED ENDOWMENT ASSETS REPRESENT THE ACCUMULATED INVESTMENT EARNINGS ON THE FISCAL SPONSOR AND OTHER TEMPORARILY RESTRICTED FUNDS THAT HAVE BEEN INVESTED BY CPF.
Part X	Description of Uncertain Tax Positions Under FIN 48	SCHEDULE D, PART X, LINE 2 - EXPLANATION FOR UNCERTAIN TAX POSITIONS UNDER FIN 48. Effective April 1, 2009, CPF adopted the provisions of FASB Interpretation No 48 ("FIN 48"), "Accounting for Uncertainties in Income Taxes," an interpretation of FASB Statement No. 109, now incorporated in Accounting Standards Codification ("ASC") 740, which provides standards for establishing and classifying any tax provisions for uncertain tax positions. The adoption of FIN 48 did not have an effect on CPF's financial position as of April 1, 2009 or CPF's results of operations and cash flows for the year ended March 31, 2010. CPF is no longer subject to federal or state and local income tax examinations by tax authorities for years before 2006.
Part XI, Line 8 - Other Adjustments		FISCAL SPONSOR FUNDS TRANSFERRED -5000
Part XII, Line 2d - Other Adjustments		FISCAL SPONSOR FUNDS TRANSFERRED -5000

SCHEDULE G
(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No. 1545-0047

2009

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

► **Attach to Form 990 or Form 990-EZ. ► See separate instructions.**

Employer identification number

Name of the organization
CITY PARKS FOUNDATION

the organization EKS FOUNDATION

Employer identification number

13-3561657

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

- 1** Indicate whether the organization raised funds through any of the following activities. Check all that apply

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

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising activities? Yes No

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. Form 990-EZ filers are not required to complete this table

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

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events (Add col (a) through col (c))
		<u>ANNUAL GALA</u> (event type)	<u>TENNIS BENEFIT</u> (event type)	<u>5</u> (total number)	
Revenue	1 Gross receipts . . .	387,759	276,460	444,024	1,108,243
	2 Less Charitable contributions . . .	372,826	213,770	361,966	948,562
	3 Gross income (line 1 minus line 2) . . .	14,933	62,690	82,058	159,681
Direct Expenses	4 Cash prizes . . .	0	0	0	
	5 Non-cash prizes . . .	0	3,640	233	3,873
	6 Rent/facility costs . . .	14,933	59,050	81,825	155,808
	7 Food and beverages . . .	0	0	0	
	8 Entertainment . . .	0	0	0	
	9 Other direct expenses . . .	0	0	0	
	10 Direct expense summary Add lines 4 through 9 in column (d)				159,681
	11 Net income summary Combine lines 3, column d, and line 10.				0

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

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

9 Enter the state(s) in which the organization operates gaming activities	<input type="checkbox"/> Yes	<input type="checkbox"/> No
a Is the organization licensed to operate gaming activities in each of these states?	<input type="checkbox"/> 9a	
b If "No," Explain _____		
10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?	<input type="checkbox"/> 10a	
b If "Yes," Explain _____		
11 Does the organization operate gaming activities with nonmembers?	<input type="checkbox"/> 11	
12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?	<input type="checkbox"/> 12	

	Yes	No
13 Indicate the percentage of gaming activity operated in	13a	13b
a The organization's facility
b An outside facility
14 Enter the name and address of the person who prepares the organization's gaming/special events books and records		
Name ►		
Address ►		
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	15a
b If "Yes," enter the amount of gaming revenue received by the organization ► \$ _____ and the amount of gaming revenue retained by the third party ► \$ _____		
c If "Yes," enter name and address		
Name ►		
Address ►		
16 Gaming manager information		
Name ►		
Gaming manager compensation ► \$ _____		
Description of services provided ►		
<input type="checkbox"/> Director/officer	<input type="checkbox"/> Employee	<input type="checkbox"/> Independent contractor
17 Mandatory distributions		
a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	17a
b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$ _____

Schedule I
(Form 990)

2009

Grants and Other Assistance to Organizations,
Governments and Individuals in the United StatesComplete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.
► Attach to Form 990Open to Public
InspectionDepartment of the Treasury
Internal Revenue ServiceName of the organization
CITY PARKS FOUNDATIONEmployer identification number
13-3561657**Part I General Information on Grants and Assistance**

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States ▶

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed ▶

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NYC Dept of Parks & Recreation 830 FIFTH AVENUE NEW YORK, NY 100657000		N/A	72,120		N/A	N/A	VARIOUS RECREATIONAL PROGRAM FUNDING (INCLUDING FLAG FOOTBALL, SOCCER, SOFTBALL, BASKETBALL AND LEARN TO SWIM)
Fort Greene Park Conservancy 85 S OXFORD STREET BROOKLYN, NY 11217	113637773	501(c)(3)	5,000		N/A	N/A	COMMEMORATION OF THE PRISON SHIP MARTYRS' MONUMENT

- 2 Enter total number of section 501(c)(3) and government organizations ▶ _____
- 3 Enter total number of other organizations ▶ _____

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance

Part IV **Supplemental Information.** Complete this part to provide the information required in Part I, line 2, and any other additional information.

Schedule J
(Form 990)**Compensation Information**

OMB No 1545-0047

2009**Open to Public
Inspection**Department of the Treasury
Internal Revenue Service

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.
► Attach to Form 990. ► See separate instructions.

Name of the organization
CITY PARKS FOUNDATION**Employer identification number**

13-3561657

Part I Questions Regarding Compensation

Yes No

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

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

b If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?

3 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply

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

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

a Receive a severance payment or change-of-control payment?

No

b Participate in, or receive payment from, a supplemental nonqualified retirement plan?

No

c Participate in, or receive payment from, an equity-based compensation arrangement?

No

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

Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.

5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of

No

a The organization?

No

b Any related organization?

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

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

No

a The organization?

No

b Any related organization?

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

7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III

No

8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe in Part III

No

9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

No

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

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

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

Part III Supplemental Information

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

Identifier	Return Reference	Explanation

2009

Open to Public
Inspection**SCHEDULE O**
(Form 990)**Supplemental Information to Form 990**

Complete to provide information for responses to specific questions on
Form 990 or to provide any additional information.
► Attach to Form 990.

Department of the Treasury
Internal Revenue Service
CITY PARKS FOUNDATION

Employer identification number
13-3561657

Identifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 2		JOHN TROUBH IS THE STEP SON OF JEAN TROUBH
Form 990, Part VI, Section B, line 11		PRIOR TO FILING THE FORM 990, THE RETURN IS MADE AVAILABLE TO THE CPF BOARD OF TRUSTEES FOR THEIR REVIEW AND APPROVAL ANY COMMENTS, CHANGES OR RECOMMENDATIONS BY INDIVIDUAL BOARD MEMBERS ARE EVALUATED BY THE AUDIT COMMITTEE
Form 990, Part VI, Section B, line 12c		CONFLICT OF INTEREST STATEMENTS ARE COMPLETED BY CPF BOARD MEMBERS ANNUALLY IF A TRUSTEE ACKNOWLEDGES A CONFLICT OR POTENTIAL CONFLICT, THE EXECUTIVE COMMITTEE WILL REVIEW AND EVALUATE THE SITUATION AND ACT ACCORDINGLY
Form 990, Part VI, Section B, line 15		CPF DETERMINES THE COMPENSATION OF ITS EXECUTIVE AND SENIOR OFFICERS BASED UPON COMPARISONS TO PUBLISHED RATES AT SIMILAR ORGANIZATIONS KEY BOARD MEMBERS HELP DETERMINE AND APPROVE THE APPROPRIATE PAY LEVELS
Form 990, Part VI, Section C, line 19		PUBLIC DOCUMENTS, SUCH AS THE ORGANIZATION'S FORM 990, ARE OPEN FOR PUBLIC INSPECTION CERTAIN GOVERNING DOCUMENTS, THE CPF CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST
FORM 990, PART XI, LINE 2C	PROCESS OF OVERSEEING THE AUDIT AND SELECTION OF INDEPENDENT ACCOUNTANT	THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR
FORM 990, PART I, LINE 1	DESCRIPTION OF THE ORGANIZATION'S MISSION OR MOST SIGNIFICANT ACTIVITIES	CITY PARKS FOUNDATION ("CPF") IS THE ONLY INDEPENDENT, NONPROFIT ORGANIZATION TO OFFER PARK PROGRAMS THROUGHOUT THE FIVE BOROUGHS OF NEW YORK CITY. WE WORK IN OVER 750 PARKS CITYWIDE, PRESENTING A BROAD RANGE OF FREE ARTS, SPORTS, AND EDUCATION PROGRAMS, AND EMPOWERING CITIZENS TO SUPPORT THEIR PARKS ON A LOCAL LEVEL. OUR PROGRAMS AND COMMUNITY BUILDING INITIATIVES REACH MORE THAN 600,000 PEOPLE EACH YEAR, CONTRIBUTING TO THE REVITALIZATION OF NEIGHBORHOODS THROUGHOUT NEW YORK CITY
FORM 990, PART III, LINE 1	DESCRIPTION OF THE ORGANIZATION'S MISSION	CITY PARKS FOUNDATION SEEKS TO IMPROVE PARKS THROUGH INNOVATIVE PROGRAMMING, CONNECTING PEOPLE TO PARKS BY PRESENTING A BROAD RANGE OF FREE ARTS, SPORTS, AND EDUCATION PROGRAMS, AND EMPOWERING CITIZENS TO CREATE HEALTHY AND VIBRANT URBAN SPACES THAT CONTRIBUTE TO THE RENEWAL OF NEIGHBORHOODS THROUGHOUT NEW YORK CITY WITH A PARTICULAR FOCUS ON SOME OF THE CITY'S MOST UNDERSERVED AREAS

Identifier	Return Reference	Explanation
FORM 990, PART V III, LINE 2	DESCRIPTION OF PROGRAM SERVICE REVENUES	CPF receives earned income primarily from four sources 1) box office revenues from marionette theater shows in the Swedish Cottage at Central Park, 2) income from children's birthday parties and other events in the Swedish Cottage, 3) concession revenue from the sales of food and beverages at SummerStage, and 4) income from producing concerts and other events for third parties at the SummerStage site. SUCH REVENUES PROMOTE SPECIFIC EVENTS AND PROGRAMS SPONSORED BY CPF AND HELP TO FURTHER THE PURPOSE OF CPF. REVENUE FROM BENEFIT CONCERTS REPRESENTS COSTS OF EVENTS PAID TO CPF BY PROMOTERS OF EVENTS HELD AT THE SUMMERSTAGE SITE. SUMMERSTAGE IS AN ARTS PROGRAM OF CPF IN COOPERATION WITH THE NYC DEPARTMENT OF PARKS AND RECREATION

