423263449DEC 182018

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 the foundation of the Internal Revenue Code (except private foundations) ter social security numbers on this form as it may be made public.

Department of the Treasury Internal Revenue Service

Department of the Treasury	M	กนา	-17	Do not citter 300iai 300a	inty numbers on this form as it may be made public
Internal Revenue Service		30	<u> </u>	► Go to www.irs.gov/Fo	rm990 for instructions and the latest information.
A For the 2017 cale	nda	r year	, or	tax year beginning	and ending

В	Check if		1	D Employer identific	cation number
	applicab	PARA PRIDE, INC.			
	Addre	F/K/A PARK PRIDE ATLANTA, INC.			
	Name	Doing business as		58-1	883895
	Initial return	Number and street (or P.O. box if mail is not delivered to street address) Room/s	suite E	E Telephone number	
	Final	, 233 PEACHTREE STREET NE, STE 1600		404-	546-6760
	termir ated			Gross receipts \$	4,375,247.
	Amen		T.	H(a) Is this a group re	eturn
Г	Applic	F Name and address of principal officer:BARBARA REID		for subordinates	
5	pendi	SAME AS C ABOVE		H(b) Are all subordinates in	
$\overline{}$	Тах-ех	empt status X 501(c)(3)	527		list. (see instructions)
		te: PARKPRIDE.ORG		H(c) Group exemption	
					State of legal domicile: GA
_	artll	Summary	1021 01	torritation, are estill	, oute of regar definition, while
_	14	Briefly describe the organization's mission or most significant activities. THE ORGA	NT7	ATTON'S MT	SSTON IS TO
Activities & Agavernance	1 '	ENGAGE COMMUNITIES TO ACTIVATE THE POWER OF	PAR	KS.	
nar	2	Check this box If the organization discontinued its operations or disposed of			ecote .
è	2		IIIOI E (I	1 . 1	24
8	∄ 3	Number of voting members of the governing body (Part VI, line 1a)		3	24
S	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	13
<u>8</u>	1 5	Total number of individuals employed in calendar year 2017 (Part V, line 2a)		5	
Š	6	Total number of volunteers (estimate if necessary)		6	0
रू इ	∄ 7a	Total unrelated business revenue from Part VIII, column (C)		7a	0.
	<u>≸ b</u>	Net unrelated business taxable income from Form 990-1, line 34		7b	0.
(ф	Contributions and grants (Part VIII, line 1h)		Prior Year	Current Year
Ð		Contributions and grants (Part VIII, line 1h)		1,919,209.	3,944,372.
5	₹ 9	Program service revenue (Part VIII, line 2g)		318,087.	361,983.
eve		Investment income (Part VIII, column (A), lines 3, 4, and 7@GDEN, UT		10,686.	12,656.
Œ		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		21,682.	42,836.
	10.0	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		2,269,664.	4,361,847.
	_	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	 	0.	0.
			<u> </u>	0.	0.
	1	Benefits paid to or for members (Part IX, column (A), line 4)		798,039.	885,927.
Ses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0.	003,327.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	
X	b	Total fundraising expenses (Part IX, column (D), line 25)		1 005 754	1 174 154
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		1,905,754.	1,574,154.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	<u> </u>	2,703,793.	2,460,081.
		Revenue less expenses. Subtract line 18 from line 12	<u> </u>	-434,129.	1,901,766.
Net Assets or	3		Begi	nning of Current Year	End of Year
Set	20	Total assets (Part X, line 16)		<u>3,533,869.</u>	6,023,372.
SE	21	Total liabilities (Part X, line 26)		945,046.	1,532,783.
25	22	Net assets or fund balances. Subtract line 21 from line 20		2,588,823.	4,490,589.
P	artilli	Signature Block		•	
Und	der pena	ities of perjury, I declare that I have examined this return, including accompanying schedules and st	atemen	ts, and to the best of my	y knowledge and belief, it is
		t, and complete. Declaration of preparer (other than officer) is based on all information of which pre			
_	<u> </u>	Barbara Keid	<u> </u>	11/15/	18
Sig	ın	Signature of officer	-	Date	7 4
		BARBARA REID, TREASURER			
He	re	Type or print name and title			
			Dat	P Charl	PTIN
		Print/Type preparer's name Preparer's signature		• · · · · · · · · · · · · · · · · · ·	-
Pai -		BARBARA S. BORCZAK, CPA BARBARA S. BORCZAK,		/14/18 self-employe	
	parer	Firm's name HENDERSON HUTCHERSON & MCCULLOUGH I	הדיר _C	Firm's EIN	62-1114363
Use	Only	Firm's address 1200 MARKET STREET			
_		CHATTANOOGA, TN 37402		Phone no. (4	23)756-7771
Ma	y the II	as discuss this return with the preparer shown above? (see instructions)			X Yes No
	001 11-2				Form 990 (2017)

Forn	990 (2017) F/K/A PARK PRIDE ATLANTA, INC.	58-1883895	Page 2
	rt 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.		
•	THE ORGANIZATION'S MISSION IS TO ENGAGE COMMUNITIES TO	ACTIVATE THE	
	POWER OF PARKS.	TICTIVITE THE	
	TOWER OF TARRES.		
_			
2	Did the organization undertake any significant program services during the year which were not listed on the		X No
	prior Form 990 or 990-EZ?	L Yes	LAL NO
_	If "Yes," describe these new services on Schedule O.		X No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	'	LAL 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		
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other	ers, the total expenses, a	and
	revenue, if any, for each program service reported		150
4a	(Code) (Expenses \$		<u>150.</u>)
	THE FRIENDS OF THE PARK PROGRAM IS THE CORE OF PARK PRI		THE
	PROGRAM IS DESIGNED TO DEVELOP AND SUPPORT COMMUNITY-BA		
	ORGANIZATIONS WORKING TO CREATE POSITIVE, LONG-LASTING		
	PARKS. PARK PRIDE PROVIDES STRUCTURE, TECHNICAL ASSISTA		ANCE
	TO THE GROUPS AND INTRODUCES THEM TO THE WIDE RANGE OF		
	RESOURCES TO HELP THEM ACHIEVE THEIR GOALS. "FRIENDS" G		
	ACCESS TO TOOLS, VOLUNTEERS, MATCHING GRANTS, DESIGN SE		
	FUNDRAISING GUIDANCE AS WELL AS EDUCATIONAL AND NETWORK	ING	
	OPPORTUNITIES.		
	IN 2017, THE FRIENDS OF THE PARK PROGRAM ENGAGED PARK E	NTHUSIASTS II	N
		OUGHOUT THE	YEAR
4b	(Code) (Expenses \$ 1,071,442 • including grants of \$) (Rever		
	IN 2017, PARK PRIDE SPENT \$1,071,442 IN SUPPORT OF 44 O		YTI
	PARK IMPROVEMENT PROJECTS IMPLEMENTED BY OUR FRIENDS OF		
	GROUPS. FUNDING CAME FROM OUR FISCAL PARTNERS AND AWARD	S FROM OUR	
		TIONALLY, PAI	
	PRIDE ANNOUNCED AN ADDITIONAL\$1,038,000 WOULD BE ALLOCA		DS
	OF THE PARK THROUGH THESE PROGRAMS FOR 20 MORE PARK IMP	ROVEMENT	
	PROJECTS TO BE COMPLETED BY 2019.		
		<u> </u>	
	THESE IMPROVEMENTS ARE SUPPORTED THROUGH GRANTS FROM TH		
	WOODRUFF FOUNDATION (\$1,750,000 TO BE SPENT OVER TWO YE		
	HOME DEPOT FOUNDATION (\$175,000) AS WELL AS INDIVIDUAL	CONTRIBUTION:	<u>s</u>
	THROUGH THE FISCAL PARTNERS PROGRAM.		
4c	(Code) (Expenses \$126 , 683 . including grants of \$) (Reven		<u> </u>
	THROUGH THE PARK VISIONING PROGRAM, PARK PRIDE'S LANDSC		
	GUIDE NEIGHBORHOOD RESIDENTS THROUGH A COLLABORATIVE PR		
	A CONCEPTUAL MASTER PLAN FOR THEIR PARK. THROUGH THE OP		
	PARK PRIDE FACILITATES, COMMUNITIES ARE ABLE TO ARTICUL	ATE THEIR NEI	EDS
	AND DESIRES AND BUILD CONSENSUS AROUND A COLLECTIVE VIS	ION FOR THEIR	₹
	PARK.		
	FOR MORE THAN A DECADE, PARK PRIDE'S PROFESSIONAL LANDS	CAPE ARCHITE	CT
	STAFF HAS LED COMMUNITIES THROUGH THE PROCESS OF COMPIL	ING COMMUNITY	<u> </u>
	INPUT TO DETERMINE THEIR NEEDS AND TO DESIGN OR REDESIG	N THEIR	
	NEIGHBORHOOD PARK. THE PARK VISIONING PROCESS CONVERTA		Z'S
	DREAM INTO A CONCEPTUAL MASTER PLAN THAT NOT ONLY ENERG		
4d	Other program services (Describe in Schedule O.)	<u> </u>	
	(Expenses \$ 793,243 • including grants of \$) (Revenue \$	Y	
4e	Total program service expenses 2,114,482.		
		Form 99	90 (2017)

Form 990 (2017)

PARK PRIDE, INC. F/K/A PARK PRIDE ATLANTA, INC.

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58-1883895

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Part V Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors	2	Х	
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_		X
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		Х
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		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	l _		v
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Х
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		Х
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		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			1968 A
	as applicable.	1 8 c 1 6 c	726	
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	х	
h	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	па		
-	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
С	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		Х
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
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
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	Х	
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	
D	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		х
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
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	174		
_	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		Х
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		Х
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,			3.5
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines		v	
10	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
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		Х
	compact concade d, ratem.	פו		

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PARK PRIDE, INC. F/K/A PARK PRIDE ATLANTA, INC. Form 990 (2017). F/K/A PARK PRIDE A
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			37
	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	23		X
04-	Schedule J Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	23		
24a	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		
	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		
	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		X
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			х
	Schedule L, Part I	25b	\dashv	
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		Х
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	100		
	instructions for applicable filing thresholds, conditions, and exceptions):			
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			v
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29 20	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?	- 55		
J 1	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			v
	Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	255		
26	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	35b		
36	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
J .	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	Х	

Form 990 (2017)	F/K/A PARK PRIDE ATLANTA, I	
Part V Statement	s Regarding Other IRS Filings and Tax Comp	liance

the Enter the number reported in Box 3 of Form 1096 Enter ·0· if not applicable Enter the number of Forms W·2G included in line 1a. Enter ·0· if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 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 If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) Did the organization have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O 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)? 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). Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? If "Yes," to line 5a or 5b, did the organization file Form 8886-T? 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? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	12 0 1c 13 2b 3a 3b 4a 5a 5b	X	No X
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 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 b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? b If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, 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)? 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? b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? c If "Yes," to line 5a or 5b, did the organization file Form 8886-T? 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? b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	10 12 2b 3a 3b 4a 5a 5b		
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 (gambling) winnings to prize winners? Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? b If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, 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)? 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? b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? c If "Yes," to line 5a or 5b, did the organization file Form 8886-T? 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? b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts 	13		X
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b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
•	6 a		X
were not tax deductible?	_6b		<u></u>
7 Organizations that may receive deductible contributions under section 170(c).			لييا
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 pay			Х
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?			X
d If "Yes," indicate the number of Forms 8282 filed during the year	7c		
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?	_		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-			
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 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			. 1
11 Section 501(c)(12) organizations. Enter.			. 1
a Gross income from members or shareholders			.
b Gross income from other sources (Do not net amounts due or paid to other sources against			. 1
amounts due or received from them.)		!	1
2a 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			
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			1
organization is licensed to issue qualified health plans	⊣ ¬		· -
c Enter the amount of reserves on hand 13c			
 4a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 	44~		<u></u>
with 166, that it med a Form 720 to report these payments. It 140, provide all explanation in schedule O	14a 14b		X

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				
Sec	tion 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 24							
	If there are material differences in voting rights among members of the governing body, or if the governing	1						
	body delegated broad authority to an executive committee or similar committee, explain in Schedule 0.	·						
ь	Enter the number of voting members included in line 1a, above, who are independent 24		'					
2								
	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?	з		Х				
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х				
5	Did the organization become aware during the year of a significant diversion of the organization's assets?							
6	Did the organization have members or stockholders?	6		X				
	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		Х				
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		Х				
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:							
	The governing body?	8a	X					
	Each committee with authority to act on behalf of the governing body?	8b	Х					
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		Х				
Sec	tion 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		Х				
	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	Х					
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.							
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X					
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х					
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe							
_	ın Schedule O how this was done	12c	Х					
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?							
а	The organization's CEO, Executive Director, or top management official	15a	X					
	Other officers or key employees of the organization	15b	Х					
-	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				
ь	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						
ec	tion C. Disclosure							
17	List the states with which a copy of this Form 990 is required to be filed ▶GA							
 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) a	vailab	le					
	for public inspection. Indicate how you made these available. Check all that apply.							
	X Own website X Another's website X 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	i finan	cial					
	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: ALLISON BARNETT - 404-546-7982 233 PEACHTREE STREET NE. SILTE 1600. ATLANTA. GA. 30303							
	AND EDACTIFED STREET NE. SUITE IDUU. ATDANTA. GA. 30303							

Page 7

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.

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

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

(A)	(B)			((C)			(D)	(E)	(F)
Name and Title	Average hours per week	box	not c , unle	ss pe	more rson	than is bot or/trus	h an	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) ROBIN AIKEN DIRECTOR	1.00	x						0.	0.	0.
(2) BARBARA BORCZAK	2.00					T		· ,		
TREASURER		Х		X				0.	0.	0.
(3) C.J. CASH	1.00					\vdash				
DIRECTOR		Х					İ	0.	0.	0.
(4) JOSEPH CRONK	1.00									
DIRECTOR		Х						0.	0.	0.
(5) LOUISA D'ANTIGNAC	1.00									
DIRECTOR		X						0.	0.	0.
(6) MELODY DARCH	1.00									
DIRECTOR		X						0.	0.	0.
(7) JOE FINLEY	1.00								_	
DIRECTOR		Х						0.	0.	0.
(8) COURTNEY FLETCHER	1.00	 								
DIRECTOR	1 00	X	Щ					0.	0.	0.
(9) EDRICK HARRIS	1.00	,,						_	•	0
DIRECTOR (10) LEE HARROP	1.00	Х				_		0.	0.	0.
DIRECTOR	1.00	x						0.		0
(11) MATTHEW HICKS	1.00	^		_					0.	0.
DIRECTOR	1.00	x						0.	0.	0.
(12) SANDRA JIMENEZ	1.00	<u> </u>		-		\vdash		0.	0.	
DIRECTOR	100	х		ļ				0.	0.	0.
(13) BARBARA LEVY	1.00	-								
DIRECTOR		х						0.	0.	0.
(14) BLAKE LYONS	2.00									
SECRETARY		х		X				0.	0.	0.
(15) DAVID MOSS	1.00	l.			4	-	ij			
DIRECTOR		Х						0.	0.	· · · · · · · · · · · · · · · · · · ·
(16) BOB MULLEN	1.00									
DIRECTOR		X						0.	0.	0.
(17) CARLOS PEREZ	2.00									
VICE PRESIDENT		X		X				0.	0.	0 -

F/K/A PARK PRIDE ATLANTA, INC.

Part VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees/	, an	d Hi	ighe	st C	Compensated Employe	es (continued)				
(A)	(B)			- (6	C)			(D)	(E)			(F)	
Name and title	Average	(40			sition	1 than	one	Reportable	Reportable		Es	stimate	d
	hours per	ю́ох	, unle	ss pe	erson	is bot	h an	compensation	compensation		ar	nount (of
	week	├─	cer an	d a c	directo	or/trus	itee)	from	from related			other	
	(list any	ector		İ	1			the	organizations			pensa	
	hours for	声	93			ated		organization	(W-2/1099-MISC	"		rom the	
,	related organizations	stee	truste		٦	Seas		(W-2/1099-MISC)			_	anızatı	
	below	la T	oual		ploye	E e						d relate anızatıc	
	line)	Individual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former				org	ailizatio	JI 13
(18) SADLER POE	5.00	프	쁘	5	<u> </u>	출장	<u></u>			\dashv			
PRESIDENT	3.00	x		X				0.		٥.			0.
(19) JAKATHRYN ROSS	1.00	H		<u> </u>	t	1					-		
DIRECTOR		x						0.		0.			0.
(20) LINDSEY ISON SONES	1.00	 							-	\neg			
DIRECTOR		x						0.		0.			0.
(21) ESTHER STOKES	1.00				1	1				ヿ			
DIRECTOR		x						0.		0.			0.
(22) CAROLINE VROON	1.00			-	T	1				\neg			
DIRECTOR		Х						0.		0.			0.
(23) ELLEN WICKERSHAM	1.00												
DIRECTOR		X						0.		0.			0.
(24) CHRISTOPHER WILLIAMS	1.00												
DIRECTOR		X						0.		0.			0.
(25) MICHAEL HALICKI	40.00												
EXECUTIVE DIRECTOR		X			L			136,496.		0.		9,6	<u>08.</u>
							L	126 406	<u></u>	${}$		0 6	<u> </u>
1b Sub-total								136,496.		0.		9,6	0.
c Total from continuation sheets to Part V	I, Section A							136,496.		$\frac{0}{0}$		9,6	
d Total (add lines 1b and 1c)							<u> </u>	<u> </u>				9,0	00.
2 Total number of individuals (including but n	ot limited to th	ose	liste	ed a	bov	e) wl	no r	eceived more than \$100	0,000 of reportable				1
compensation from the organization								- · · · · · · · · · · · · · · · · · · ·		—		Yes	No
• • • • • • • • • • • • • • • • • • •			_ 1					humbant same amounted o	malayaa aa	Г			1
3 Did the organization list any former officer,			е, ке	y e	mpic	oyee	, or	nignest compensated e	трюуее оп	ŀ	3		$\overline{\mathbf{x}}$
line 1a? If "Yes," complete Schedule J for s					a t.a.		٠.	har componentian from	the erganization	}	<u> </u>		 -
For any individual listed on line 1a, is the su and related organizations greater than \$150	ım or reportab	e co	omp mol	ens:	Sch	n and	3 OL	for such individual	the organization	ŀ	<u> </u>		
									idual for services	ŀ			
5 Did any person listed on line 1a receive or a rendered to the organization? If "Yes," com							Ciai	ted organization of malv	idual for services				X
Section B. Independent Contractors	piete ochedar		0, 3,	30,,	рсп	3011		-	-				
Complete this table for your five highest co	mnensated in	den	ende	ent c	cont	racto	ors 1	that received more than	\$100,000 of comp	ens:	ation	from	
the organization. Report compensation for												=	
(A)	trio outorrugir y			5			Ī	(B)	,		((C)	
Name and business	address	N	INC	3				Description of s	services	C		nsatioi	n
									ĺ				
-													
							4						
							7		•				
						_	_	-				_	
2 Total number of independent contractors (i		ot li	mıte	d to			stec	d above) who received n	nore than				
\$100,000 of compensation from the organi	zation -					0				`			

Form **990** (2017)

Form 990 (2017) F/K/A PA

PARK PRIDE, INC. F/K/A PARK PRIDE ATLANTA, INC.

I		Check if Schedule O cont	tains a response	or note to any lii	ne in this Part VIII	•		
		Oneskii Gareadie G Gari	and a response	or moto to any m	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
nts	1 a	Federated campaigns	1a					
<u> </u>	b	Membership dues	1b					
Am,	c	Fundraising events	1c					
필	d	Related organizations	1d					
S, E	е	Government grants (contribut	tions) 1e	153,300.				
i ti	f	All other contributions, gifts, gran						i
혈취		similar amounts not included abo	ve [1f 3 ,	791,072.				
Contributions, Gifts, Grants and Other Similar Amounts	q	Noncash contributions included in lines	1a-1f \$					
<u>8</u> 0	<u>h</u>	Total. Add lines 1a-1f		T	3,944,372.	, 4 ' ' .	200	. ', ''
				Business Code		100 770		
ice	2 a		NACE CON	900099	190,779.	190,779.		
le G	b		ACE CON	900099	170,959. 245.	170,959. 245.		
E E	c			900099	245.	245.		
Reg	d					-		<u>. </u>
Program Service Revenue	e	All other program control				_		
	'	All other program service reve Total. Add lines 2a-2f	nue	. •	361,983.		181 9 1 1 1	90 t 6.00
	3	Investment income (including	dividends intere		302,303.			
		other similar amounts)	dividende, and	>	12,656.			12,656.
ľ	4	Income from investment of ta	x-exempt bond p	proceeds				
	5	Royalties	. ,	•				
			(i) Real	(II) Personal				
	6 a	Gross rents						
	b	Less. rental expenses						
i	C	Rental income or (loss)	_					
	d	Net rental income or (loss)		<u> </u>				
Ì	7 a	Gross amount from sales of	(i) Securities	(II) Other				
		assets other than inventory						
	b	Less: cost or other basis						
		and sales expenses						į
		Gain or (loss)						J
		Net gain or (loss) Gross income from fundraising	a ayanta (nat	_				1
Other Revenue	o a	including \$	g events (not of					
Şe		contributions reported on line						
ř.		Part IV, line 18	а	56,236.				
ŧ	b	Less direct expenses	b	13,400.				
°		Net income or (loss) from fund	draising events		42,836.			42,836.
	9 a	Gross income from gaming ac	tivities. See					
- 1		Part IV, line 19	а					
- 1	b	Less direct expenses	b					
	C	Net income or (loss) from gam	ing activities					
	10 a	Gross sales of inventory, less	returns					
		and allowances	а		;			
		Less. cost of goods sold	b	L				
- 1	С	Net income or (loss) from sale		<u> </u>				
}	4.4	Miscellaneous Revenu	е	Business Code				
- [11 a						-	
	b							·
	4	All other revenue						
	e	Total. Add lines 11a-11d		•				1
	12	Total revenue. See instructions.		•	4,361,847.	361,983.	0.	55,492.

Form 990 (2017)

F/K/A PARK PRIDE ATLANTA, INC.

Part IX | Statement of Functional Expenses

	Check if Schedule O contains a respon	se or note to any line in (A)	this Part IX (B)	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	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				
	ındivıduals. 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,	146,104.	101,543.	33,604.	10,957
_	trustees, and key employees	140,104.	101,343.	33,004.	10,557
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		612,554.	459,416.	61,255.	91,883
7 8	Other salaries and wages Pension plan accruals and contributions (include			,	==,
5	section 401(k) and 403(b) employer contributions)	57,758.	43,318.	5,776.	8,664
9	Other employee benefits	13,988.	10,491.	1,399.	8,664 2,098
10	Payroll taxes	55,523.	41,091.	6,856.	7,576
11	Fees for services (non-employees)				
а	Management				_
b	Legal				
С	Accounting	11,072.		11,072.	
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 Sch 0.)				
12	Advertising and promotion	12 044	0 210	3,187.	539
13	Office expenses	12,944.	9,218. 5,169.	2,584.	2,584
14	Information technology	10,337.	3,103.	2,304.	2,304
15	Royalties	127,605.	98,256.	22,969.	6,380
16	Occupancy	127,003.	30,230.	22,303.	0,300
17 18	Travel Payments of travel or entertainment expenses				
10	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	10,259.	6,053.	4,206.	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	6,201.		6,201.	
23	Insurance	6,480.		6,480.	
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 0.) PARK IMPROVEMENT PROJEC	1,266,323.	1,266,323.	0.	0
a b	PROGRAM EVENTS	44,312.	43,497.		815
C	FUNDRAISING	32,849.	0.	0.	32,849
d	MARKETING	25,610.	19,463.	5,443.	704
-	All other expenses	20,162.	10,644.	9,518.	
25	Total functional expenses. Add lines 1 through 24e	2,460,081.	2,114,482.	180,550.	165,049
<u>20</u> 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)				
					- 000

Pa	rt X	Balance Sheet			<u> </u>		•
		Check if Schedule O contains a response or not	te to any line in	this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing				1	
	2	Savings and temporary cash investments			3,379,419.	2	5,865,760.
	3	Pledges and grants receivable, net			7,010,000	3	0,000,1001
	4	Accounts receivable, net	122,300.	4	131,663.		
	5	Loans and other receivables from current and for		 -	202,000		
	"	trustees, key employees, and highest compensation	•	· ·			
		Part II of Schedule L	atou omployou	s. complete		5	
	6	Loans and other receivables from other disquali	ified persons (a	s detined under	11 / 164 041 1 16 45	,,	Sales of the give
		scction 4958(f)(1)), persons described in section			nie de Brond	, ₂₀	the open three or eath milly the many
	1	employers and sponsoring organizations of section		•	14 7 11 2		***
y,		employees' beneficiary organizations (see instr).		=		6	
Assets	7	Notes and loans receivable, net	. Complete r an	0. 00.7 2		7	
As	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			<u>.</u>	9	
	l	Land, buildings, and equipment cost or other	1 1			Ť	
		basis Complete Part VI of Schedule D	10a	70,849.	AND BUT OF A STATE OF THE STATE	ļ.,.	and a think to the state of the
	ь	Less. accumulated depreciation	10b	44,900.	32,150.	10c	25,949.
	11	Investments - publicly traded securities				11	
	12	Investments - other securities. See Part IV, line 1	11			12	
	13	Investments - program-related. See Part IV, line		13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11		15			
	16	Total assets. Add lines 1 through 15 (must equal	al line 34)		3,533,869.	16	6,023,372.
	17	Accounts payable and accrued expenses			31,003.	17	28,015.
	18	Grants payable				18	
	19	Deferred revenue			914,043.	19	1,504,768.
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete I	Part IV of Sche	dule D		21	
Sa	22	Loans and other payables to current and former	r officers, direct	ors, trustees,			
III		key employees, highest compensated employee	es, and disqual	fied persons.	மையும் முன்ற அம்வ சம்பர் முது முறு	<i></i>	dere it mateure en en superiore de
Liabilities		Complete Part II of Schedule L				22	
_	23	Secured mortgages and notes payable to unrela	ated third partie	es		23	
	24	Unsecured notes and loans payable to unrelated	d third parties			24	
1	25	Other liabilities (including federal income tax, pa	yables to relate	ed third			
		parties, and other liabilities not included on lines	s 17-24). Compl	ete Part X of			
		Schedule D			0.45	25	4 500 500
	26	Total liabilities. Add lines 17 through 25		[••]	945,046.	26	1,532,783.
		Organizations that follow SFAS 117 (ASC 958		► X and	"""""""""""""""""。""""""""。""""""。""""""。""""。""""。""""。""""。""""""。""""""。""""""""。""	, m, .	14 海黑山北部門鄉山北部111
ses		complete lines 27 through 29, and lines 33 an	id 34.		1 512 200		330 556
<u>a</u>	27	Unrestricted net assets			1,513,397.	27	339,556.
Ва	28	Temporarily restricted net assets			1,075,426.	28	4,151,033.
Ē	29	Permanently restricted net assets				29	<u> </u>
Ę		Organizations that do not follow SFAS 117 (A	SC 958), checl	r here ▶ll	and the transfer of the angle of the angle of	ner sam	் பிருவியான புராச்சு முரார்
Net Assets or Fund Balances		and complete lines 30 through 34.					
set	30	Capital stock or trust principal, or current funds				30	
As	31	Paid-in or capital surplus, or land, building, or eq				31	
et	32	Retained earnings, endowment, accumulated in	come, or other	funds	2 500 002	32	4 400 500
_	33	Total net assets or fund balances			2,588,823.	33	4,490,589.
	34=	Total liabilities and net assets/fund balances—			3,533,869.	34	6,023,372.

PARK PRIDE, INC. F/K/A PARK PRIDE ATLANTA, 58-1883895 INC. Form 990 (2017) Part XI Reconciliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI 4,361,847. Total revenue (must equal Part VIII, column (A), line 12) 2,460,081. 2 2 Total expenses (must equal Part IX, column (A), line 25) 1,901,766. 3 3 Revenue less expenses, Subtract line 2 from line 1 2,588,823. Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4 4 5 Net unrealized gains (losses) on investments 5 6 Donated services and use of facilities 6 7 7 Investment expenses 8 8 Prior period adjustments 9 Other changes in net assets or fund balances (explain in Schedule O) 9 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, 10 4,490,589 10 column (B)) Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII Yes No X Accrual Accounting method used to prepare the Form 990 Cash Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. X 2a 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. Both consolidated and separate basis Consolidated basis Separate basis X 2b **b** Were the organization's financial statements audited by an independent accountant? If "Yes." check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, X review, or compilation of its financial statements and selection of an independent accountant? **2**c If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit

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

3a

X

Act and OMB Circular A-133?

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

Open to Public Inspection

Name of the organization PARK PRIDE, INC. Employer identification number F/K/A PARK PRIDE ATLANTA, INC. 58-1883895 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 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i), 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, 4 city, and state. An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 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) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 X 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.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3), Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12q, Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. ☐ Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type IIII functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other n your governing document (described on lines 1-10 organization support (see instructions) support (see instructions) Yes above (see instructions))

Schedule A (Form,990 or 990-EZ) 2017 F/K/A PARK PRIDE ATLANTA, INC. 58-1883895 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) (d) 2016 (e) 2017 (f) Total (a) 2013 **(b)** 2014 (c) 2015 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 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 4 Total. Add lines 1 through 3 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) 6 Public support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) **(b)** 2014 **(c)** 2015 (d) 2016 (e) 2017 (f) Total (a) 2013 7 Amounts from line 4 Gross income from interest. dividends, payments received on securities loans, rents, royalties, and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 14 Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f)) 15 15 Public support percentage from 2016 Schedule A, Part II, line 14 16a 33 1/3% support test - 2017. 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 - 2016. If the organization did not check a 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 - 2017. 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 VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10% -facts-and-circumstances test - 2016. 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 VI how the organization meets the fracts-and-circumstances" test. The organization qualifies as a publicly supported organization 18 Private foundation of the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2017

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to

<u>e</u> ~	qualify under the tests listed b	ciow, picase comp	olete i dit ii.j				
_	ction A. Public Support	(-) 0040	45.004.4	4-10045	/.N.0010		(O.T.)
	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not	1110666	2147750	2400604	1700074	2662467	12200450
	include any "unusual grants.")	1119666.	3147759.	3480684.	1788874.	3663467.	13200450.
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	237,034.	231,847.	330,306.	318,087.	571,519.	1688793.
3	Gross receipts from activities that					-	
	are not an unrelated trade or bus-						
4	Tax revenues levied for the organ-						
*	ization'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	113,801.	45,500.		157,400.		474,306.
6	Total. Add lines 1 through 5	1470501.	3425106.	3840990.	2264361.	4362591.	15363549.
7 a	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						0.
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						0.
_	Add lines 7a and 7b						0.
	Public support. (Subtract line 7c from line 6.)					,	15363549.
Sec	etion B. Total Support						133033431
_							
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
	ndar year (or fiscal year beginning in)	(a) 2013 1470501.	(b) 2014 3425106.	(c) 2015 3840990.	(d) 2016 2264361.	(e) 2017 4362591.	(f) Total 15363549.
9	ndar year (or fiscal year beginning in) Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	(a) 2013 1470501. 12,484.	3425106.	(c) 2015 3840990.	(d) 2016 2264361. 10,686.	4362591.	15363549.
9 10a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties,	1470501.	(b) 2014 3425106. 16,131.	3840990.	2264361.	(e) 2017 4362591.	15363549.
9 10a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	1470501.	3425106.	3840990.	2264361.	4362591.	15363549.
9 10a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses	1470501.	3425106.	3840990.	10,686.	12,656.	61,038.
9 10a b	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	12,484.	16,131.	9,081.	2264361.	4362591.	15363549.
9 10a b	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital	12,484.	16,131. 16,131.	9,081.	10,686.	12,656.	61,038.
9 10a b	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain	12,484.	16,131.	9,081.	10,686.	12,656. 12,656.	61,038.
9 10a b	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	12,484. 12,484. 12,484.	3425106. 16,131. 16,131.	9,081. 9,081.	10,686. 10,686. 2275047.	12,656. 12,656. 4375247.	61,038. 61,038. 15424587.
9 10a b	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12)	12,484. 12,484. 12,484.	3425106. 16,131. 16,131.	9,081. 9,081.	10,686. 10,686. 2275047.	12,656. 12,656. 4375247.	61,038. 61,038. 15424587.
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9 10a b c 11 12 13 14 Sec 15	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for check this box and stop here etion C. Computation of Public	12,484. 12,484. 12,484. 1482985. the organization's ic Support Perine 8, column (f) di	3425106. 16,131. 16,131. 3441237. If first, second, third recentage vided by line 13, c	3840990. 9,081. 9,081. 3850071. d, fourth, or fifth ta	10,686. 10,686. 2275047.	12,656. 12,656. 4375247.	15363549. 61,038. 61,038. 15424587. zation, 99.60 %
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Schedule A (Form 990 or 990 EZ) 2017 F/K/A PARK PRIDE ATLANTA, INC.

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

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

	Yes	No
1		
2		
3a		
3b		
3c		
4a		
		i
4b		
4c		
- Sa		
5b		
5c		
6		
7		
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9a		
9b		
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10a		
10b		

PARK PRIDE, INC. Schedule A (Form 990 or 990-EZ) 2017 F/K/A PARK PRIDE ATLANTA,

	dule A (Form 990 or 990-EZ) 2017 F/K/A PARK PRIDE ATLANTA, INC. 58-18	8389	5 Pa	age 5
Pa	rt IV Supporting Organizations _(continued)	<u> </u>	۴	
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?	1	1	
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a	<u> </u>	
	A family member of a person described in (a) above?	11b	L	
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		L
Sec	tion B. Type I Supporting Organizations			
_			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or	1	ŀ	
	controlled the organization's activities. If the organization had more than one supported organization,			İ
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
•	organizations and what conditions or restrictions, if any, applied to such powers during the tax year	_1_		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s)	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (II) a copy of the Form 990 that was most recently filed as of the date of notification, and (III) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
500	supported organizations played in this regard	3		
	tion E. Type III Functionally Integrated Supporting Organizations			
1 a	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yeatsee instructions The organization satisfied the Activities Test. Complete line 2 below.) .		
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
C	The organization is the parent of each of its supported organizations. The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instance).	tructions	z)	
2	Activities Test. Answer (a) and (b) below.	ili de lion i	Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			.,,
_	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			į
	those supported organizations and explain how these activities directly furthered their exempt purposes,			i
	how the organization was responsive to those supported organizations, and how the organization determined			İ
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for,the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard	3b	<u>-</u>	

Schedule A (Form 990 or 990-EZ) 2017 F/K/A PARK PRIDE ATLANTA, INC.

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

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Charle have 6th a great act and the lateral Part Test and a well-			Dart VII \ Can implemention
1 Check here if the organization satisfied the Integral Part Test as a qualif	-		Part VI.) See Instruction
other Type III non-functionally integrated supporting organizations must	complete Se	ctions A through E.	(B) Comment Veer
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		<u></u>
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
ection B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other			
factors (explain in detail in Part VI)			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3	_	
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
see instructions)	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	_5		
6 Multiply line 5 by .035	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
ection C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2		
3 Mınımum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions)	6		
7 Check here if the current year is the organization's first as a non-function	nally integrate	ed Type III supporting org	janization (see

Schedule A (Form 990 or 990-EZ) 2017

instructions).

58-1883895 Page 7 Schedule A (Form 990 or 990-EZ) 2017 F/K/A PARK PRIDE ATLANTA, Part Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Section D - Distributions **Current Year** Amounts paid to supported organizations to accomplish exempt purposes Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity Administrative expenses paid to accomplish exempt purposes of supported organizations 4 Amounts paid to acquire exempt-use assets Qualified set-aside amounts (prior IRS approval required) 5 Other distributions (describe in Part VI). See instructions. 6 7 Total annual distributions. Add lines 1 through 6. 8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions Distributable amount for 2017 from Section C, line 6 Line 8 amount divided by line 9 amount 10 (i) (ii) (iii) **Underdistributions** Distributable Section E - Distribution Allocations (see instructions). **Excess Distributions** Pre-2017 Amount for 2017 种类学 医眼神经 医皮肤 Distributable amount for 2017 from Section C, line 6 Underdistributions, if any, for years prior to 2017 (reasonable cause required- explain in Part VI). See instructions **美力的理想的现在分词 建設的工業的主義的** Excess distributions carryover, if any, to 2017 a Committee and the control of the c **b** From 2013 **建筑型的设置** 是是是一个一个 **建筑设置建筑设置** c From 2014 d From 2015 **李华里的**是他们的 e From 2016 Total of lines 3a through e g Applied to underdistributions of prior years **英語 1988年 1988年 1988年 1988年 第2章第四章第二章第二章第二章** h Applied to 2017 distributable amount Carryover from 2012 not applied (see instructions) Remainder. Subtract lines 3g, 3h, and 3i from 3f. Distribution's for 2017 from Section D. a Applied to underdistributions of prior years b Applied to 2017 distributable amount c Remainder. Subtract lines 4a and 4b from 4. Remaining underdistributions for years prior to 2017, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions. Remaining underdistributions for 2017. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. Excess distributions carryover to 2018. Add lines 31 and 4c. Breakdown of line 7: a Excess from 2013 b Excess from 2014 **亚亚洲国际地名**

Schedule A (Form 990 or 990-EZ) 2017

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c Excess from 2015

d Excess from 2016

Excess from 2017

Schedule A	(Form 990 or 990-	EZ) 2017 -	<u> F/K/A</u>	PARK	PRIDE	ATLANTA	, INC.		28-188383	75 Page 8
Part VI	Supplementa Part IV, Section A line 1, Part IV, Se Section D, lines 5 (See instructions	I Inform I lines 1, 2 ction D, lin I, 6, and 8,	ation. Pro , 3b, 3c, 4b es 2 and 3;	vide the , 4c, 5a, 6 Part IV, S	explanations 5, 9a, 9b, 9c Section E, lin	s required by Pa , 11a, 11b, and es 1c, 2a, 2b, 3	irt II, line 10, P 11c, Part IV, S a, and 3b; Par	ection B, lines 1 t V, line 1; Part V,	and 2, Part IV, Sed Section B, line 1e	ction C,
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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.

PARK PRIDE, INC.

PARK PRIDE, INC.

Open to Public Inspection

OMB No 1545-0047

Name of the organization

F/K/A PARK PRIDE ATLANTA, INC.

Employer identification number 58-1883895

Pa	rt I Organizations Maintaining Donor Advise	ed Funds or Other Similar Fund	s or Accounts.Complete if the
	organization answered "Yes" on Form 990, Part IV, Iir	ne 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 advi	sed 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 a	advisors in writing that grant funds can be	e used only
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose	conferring
	impermissible private benefit?		Yes No
Pa	rt II Conservation Easements. Complete if the organization	ganization answered "Yes" on Form 990,	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organizat		
	Preservation of land for public use (e.g., recreation or e	education) Preservation of a his	torically important land area
	Protection of natural habitat	Preservation of a cer	tified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form	
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic str	• •	2c
d	Number of conservation easements included in (c) acquired	after 7/25/06, and not on a historic struct	ure
_	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by th	e organization during the tax
_	year ▶		
4	Number of states where property subject to conservation ea		
5	Does the organization have a written policy regarding the pe		
_	violations, and enforcement of the conservation easements		☐ Yes ☐ No
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing con	servation easements during the year
_		all a conference of the confer	
7	Amount of expenses incurred in monitoring, inspecting, hand > \$	aling of violations, and enforcing conserva	ation easements during the year
8	Does each conservation easement reported on line 2(d) above	va catisfy the requirements of coation 170	0/b)/4//P)/4)
•	and section 170(h)(4)(B)(ii)?	ve satisfy the requirements of section 170	Yes No
9	In Part XIII, describe how the organization reports conservati	ion easements in its revenue and expens	
Ŭ	include, if applicable, the text of the footnote to the organization	•	
	conservation easements.	tion's imanolal statements that describes	the organization s accounting to
Pa	rt III Organizations Maintaining Collections o	f Art, Historical Treasures, or C	Other Similar Assets.
	Complete if the organization answered "Yes" on Form		
1a	If the organization elected, as permitted under SFAS 116 (AS	SC 958), not to report in its revenue state	ment and balance sheet works of art,
	historical treasures, or other similar assets held for public ext		
	the text of the footnote to its financial statements that descri		,
b	If the organization elected, as permitted under SFAS 116 (AS	SC 958), to report in its revenue statemen	t and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed		
	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 tre	asures, or other similar assets for financia	al gain, provide
	the following amounts required to be reported under SFAS 1		•
а	Revenue included on Form 990, Part VIII, line 1	· -	▶ \$
b	Assets included in Form 990. Part X		S

PARK PRIDE, INC. F/K/A PARK PRIDE ATLANTA, 58-1883895 Page 2 INC. Schedule D (Form 990) 2017 Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets(continued) 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). Loan or exchange programs Public exhibition а Scholarly research Other h Preservation for future generations Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII 4 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? Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or Part IV 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 Yes on Form 990, Part X? **b** If "Yes," explain the arrangement in Part XIII and complete the following table. Amount 1c c Beginning balance 1d d Additions during the year 1e e Distributions during the year 1f f Ending balance _ Yes No 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? b If "Yes." explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII. Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. (d) Three years back (a) Current year (b) Prior year (c) Two years back (e) Four years back 1a Beginning of year balance **b** Contributions c Net investment earnings, gains, and losses d Grants or scholarships Other expenditures for facilities and programs f Administrative expenses g End of year balance 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 ▶

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

(i) unrelated organizations

(ii) related organizations b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? Describe in Part XIII the intended uses of the organization's endowment funds

3a(i)	
3a(ii)	
3b	

Yes No

Part VI Land, Buildings, and Equipment.

what of the experience engineered "Yes" on Form 200, Part IV, line 11a, See Form 200, Part Y, 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				. <u> </u>
b Buildings				·
c Leasehold improvements				
d Equipment		70,849.	44,900.	25,949
e Other				
otal. Add lines 1a through 1e. (Column (d) mus	st equal Form 990, Part X, colui	mn (B), line 10c.)	>	25,949

Schedule D (Form 990) 2017

58-1883895 Page	58	8-18	383	889	5	Page	3
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Schedule D (Form 990) 20		PRIDE ATL	ANTA, INC.	58	-1883895	Page 3
	nts - Other Securities.	F 000 D	- N. I 445 - O 5 0	100 Dayl V 1 40		•
	the organization answered "Yes' or category (including name of security)	on Form 990, Par (b) Book val		90, Part X, line 12. of valuation: Cost or end	d of your montret	- chic
	or category (including name or security)	(b) Book var	de (C) Metriod	or valuation. Cost or end	1-01-year market v	value
(1) Financial derivatives	tavaata					
(2) Closely-held equity in	terests					
(3) Other						
(A)	-	<u> </u>				
(B)	-	 				
(C)		1				
(D)		 				
<u>(E)</u>				.		. —
<u>(F)</u>						
(G)		 				
(H)	orm 990, Part X, col. (B) line 12.)					
	nts - Program Related.	l				
	_	l F 000 B	. N. I	00 Da + V III - 40		
	the organization answered "Yes" ition of investment	(b) Book value		90, Part X, line 13. of valuation Cost or end	l-of-vear market v	مرادر
	tion of investment	(b) Book vali	de (c) Metriod			alue
(1)		-			***	
(2)						
(3)						
(4)	- ·					· · · · · ·
(5)						
(6)						
(7)						
(8)						
(9)	orm 990, Part X, col. (B) line 13.)					
Part IX Other Ass		.l	I			
L	the organization answered "Yes"	on Form 990 Part	IV line 11d See Form 9	90 Part X line 15		
- Complete ii		Description	114, IIII 114, OCC 1 01111 0	30, 1 dit X, iii 6 10.	(b) Book va	alue
(1)					(1,	
(2)	· · · · · ·			-		
(3)						
(4)			•			
(5)			-			
(6)						
(7)						
(8)						
(9)						
	qual Form 990, Part X, col (B) lin	ne 15.)	<u></u>	•		
Part X Other Lia			· · · · · · · · · · · · · · · · · · ·			
Complete if t	the organization answered "Yes"	on Form 990, Part	IV, line 11e or 11f. See F	Form 990, Part X, line 25		
1.	(a) Description of liability		(b) Book value			
(1) Federal income ta	xes					
(2)						
(3)			<u> </u>			
(4) .		······	 			
(5)						
(6)		-		_		
(7)				\exists		
(8)	-	-		\neg		

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

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

DADK DOTOR

	FARR FRIDE, INC.			
Sche	dule D (Form 990) 2017 F/K/A PARK PRIDE ATLANTA,			1883895 Page 4
	t XI Reconciliation of Revenue per Audited Financial Staten	nents With Revenue pe	r Returr	า.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	?a.		
1	Total revenue, gains, and other support per audited financial statements		1	4,375,247.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
а	Net unrealized gains (losses) on investments	2a		
ь	Donated services and use of facilities	2b		
С	Recoveries of prior year grants	2c	\neg	
	Other (Describe in Part XIII.)	2d 13,40	0.	
	Add lines 2a through 2d		2e	13,400.
3	Subtract line 2e from line 1		3	4,361,847.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1.			<u> </u>
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
_		4b		
b	Add lines 4a and 4b	40	4c	0.
`	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	4,361,847.
5 D a	t XII Reconciliation of Expenses per Audited Financial State	ments With Expenses		
I a	Complete if the organization answered "Yes" on Form 990, Part IV, line 12		po:	
			1	2,473,481.
1	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25		'-	2/2/0/2020
2	, , ,	2a		
	Donated services and use of facilities	2b		
	Prior year adjustments	· · · · · · · · · · · · · · · · · · ·	\dashv	
	Other losses	2c 2d 13,40	<u>. </u>	
	Other (Describe in Part XIII)	2d 13,40		13,400.
е	Add lines 2a through 2d		2e	2,460,081.
3	Subtract line 2e from line 1		3	2,400,001.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1.	1 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		•
С	Add lines 4a and 4b		4c	0.
5			5	2,460,081.
	t XIII Supplemental Information.	<u> </u>		
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Pa		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 ac	dditional information.		
PAI	RT X, LINE 2:			
MAI	NAGEMENT HAS ANALYZED THE TAX POSITIONS T	AKEN BY THE ORG	ANIZA	TION AND
HAS	S CONCLUDED THAT AS OF DECEMBER 31, 2017	THERE ARE NO UN	ICERTA	IN TAX
POS	SISTIONS TAKEN OR EXPECTED TO BE TAKEN TH	AT WOULD REQUIR	E REC	OGNITION OF
— А І	JIABILITY OR DISCLOSURE IN THE FINANCIAL	STATEMENTS. TH	E ORG	ANIZATION
	SUBJECT TO ROUTINE AUDITS BY TAXING AUTH		TLY T	HERE ARE NO
	DITS IN PROCESS FOR ANY TAX PERIODS. MAN	-		
LON	IGER SUBJECT TO INCOME TAX EXAMINATIONS F	OR YEARS PRIOR	TO 20	14.

SCH. D, PART XI & PART XII

TOTAL REVENUE PER THE ORGANIZATION'S AUDITED FINANCIAL STATEMENTS INCLUDES GROSS FUNDRAISING REVENUE; TOTAL REVENUE PER FORM 990 INCLUDES FUNDRAISING

F/K/A PARK PRIDE ATLANTA, INC. 58-1883895 Page 5 Schedule D (Form 990) 2017 Part XIII | Supplemental Information (continued) REVENUE NET OF RELATED COSTS, IN THE AMOUNT OF \$13,400. THE DIFFERENCE IN REPORTING REQUIRES AN ADJUSTING ENTRY ON SCH. D, PAGE 4, PART XI AND XII TO RECONCILE TOTAL REVENUE AND TOTAL EXPENSES TO THE CORRESPONDING AMOUNTS REPORTED IN THE ORGANIZATION'S AUDITED FINANCIAL STATEMENTS.

PARK PRIDE, INC.

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

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

Go to www.lrs.gov/Form990 for the latest instructions.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

PARK PRIDE, INC. **Employer identification number** Name of the organization 58-1883895 F/K/A PARK PRIDE ATLANTA, INC. Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. Mail solicitations Solicitation of non-government grants Solicitation of government grants Internet and email solicitations Phone solicitations Special fundraising events c In-person solicitations d 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or No Yes key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (v) Amount paid (iii) Did (vi) Amount paid (iv) Gross receipts (i) Name and address of individual to (or retained by) have custody or control of contributions? to (or retained by) (ii) Activity fundraiser or entity (fundraiser) from activity organization listed in col. (i) Yes No Total List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

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

Schedule G (Form 990 or 990-EZ) 2017

PARK PRIDE, INC. Schedule G (Form 990 or 990-EZ) 2017 F/K/A PARK PRIDE ATLANTA, INC. 58-1883895 Page 2 Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other events (d) Total events PINTS FOR PLAID NONE (add col (a) through PARKS PALOOZA col. (c)) (event type) (total number) (event type) 39,131. 17,105. 56,236. Gross receipts 0. 2 Less Contributions 39,131 17,105. 56,236. Gross income (line 1 minus line 2) 4 Cash prizes Noncash prizes Direct Expenses Rent/facility costs 7 Food and beverages 8 Entertainment 9,440. 3,960 13,400. Other direct expenses 13,400. 10 Direct expense summary. Add lines 4 through 9 in column (d) 42,836. 11 Net income summary. Subtract line 10 from line 3, column (d) Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add Revenue (a) Bingo (c) Other gaming bingo/progressive bingo col. (a) through col. (c)) Gross revenue 2 Cash prizes Direct Expenses 3 Noncash prizes 4 Rent/facility costs 5 Other direct expenses Yes Yes % Yes 6 Volunteer labor No No No 7 Direct expense summary. Add lines 2 through 5 in column (d) Net gaming income summary. Subtract line 7 from line 1, column (d)

a Is the organization licensed to conduct gaming activities in each b If "No," explain.	of these states?	Yes No
10a Were any of the organization's gaming licenses revoked, suspen	nded, or terminated during the tax year?	Yes No
732082 09-13-17	Schedu	ile G (Form 990 or 990-EZ) 2017

Sch	nedule G (Form 990 or 990 EZ) 2017 F/K/A PARK PRIDE ATLANTA, INC. 58-	1883832	Page 3
11	Does the organization conduct gaming activities with nonmembers?	└─ Yes	L No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed		
	to administer charitable gaming?	Yes	☐ No
13	Indicate the percentage of gaming activity conducted in		
	The organization's facility	13a	%
	•	13b	
	An outside facility	130	70
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records.		
	Name ▶	<u>.</u>	
	Address >		
15	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes	□ No
ı	o If "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount		
	of gaming revenue retained by the third party > \$		
(o If "Yes," enter name and address of the third party		
	Name ▶		
	Address ►		
16	Gaming manager information:		
	Name		
			
	Gaming manager compensation > \$		
	Description of services provided		
	Director/officer Employee Independent contractor		
17	Mandatory distributions:		
	a Is the organization required under state law to make charitable distributions from the gaming proceeds to		
•	retain the state gaming license?	Yes	☐ No
	• Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the		
<u></u>	organization's own exempt activities during the tax year > \$	lance 0. Ob. 16	h 15h
Pē	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	, lines 9, 90, 10	
			
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_			

		PARK F	PRIDE,	INC.				50 400005	
Schedule G	(Form 990 or 990-EZ) Supplemental Infor	F/K/A	PARK	PRIDE	ATLANTA	, INC.		58-1883895	
a diciv	Oupplemental infor	mation (co.	nunueu)		<u>. </u>		.		
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SCHEDULE I (Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

2017 Open to Public

OMB No 1545-0047

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

INC.

F/K/A PARK PRIDE ATLANTA,

PARK PRIDE,

Name of the organization

Department of the Treasury Internal Revenue Service

Inspection
Employer identification number

58-1883895

2

		X Yes	
Part I . General Information on Grants and Assistance	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?	
-Pa	-		•

(h) Purpose of grant or assistance Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any (g) Description of noncash assistance (f) Method of valuation (book, FMV, appraisal, other) (e) Amount of non-cash assistance Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (d) Amount of cash grant (c) IRC section (if applicable) (b) EIN 1 (a) Name and address of organization or government Part II

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	er total number of other organizations listed in the line 1 table
2 Enter total number of section	Enter total number of other orga
Ø	ო

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

Schedule I (Form 990) (2017)

58-1883895 PARK PRIDE, INC. F/K/A PARK PRIDE ATLANTA, INC. Schedule I (Form 990) (2017) Part III

Page 2

Schedule I (Form 990) (2017) (f) Description of noncash assistance (e) Method of valuation (book, FMV, appraisal, other) Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. (d) Amount of non-cash assistance (c) Amount of cash grant (b) Number of recipients (a) Type of grant or assistance 732102 11-01-17

SCHEDULE 0

(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.

Open to Public

OMB No 1545-0047

Inspection

Name of the organization

PARK PRIDE, INC.

F/K/A PARK PRIDE ATLANTA, INC. Employer identification number 58-1883895

Schedule O (Form 990 or 990-EZ) (2017)

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:
WE OFFERED 7 WORKSHOPS TO HELP INDIVIDUALS AND COMMUNITIES BUILD
LEADERSHIP SKILLS, SHARE RESOURCES, AND LEARN HOW TO IMPROVE LOCAL
PARKS. WE SHARED OPPORTUNITIES FOR NETWORKING ACROSS PARKS AND BUILDING
RELATIONSHIPS WITH PARK LEADERSHIP, SUCH AS MONTHLY PARC (PARK ATLANTA
RESCUE COALITION) MEETINGS AND MEETINGS WITH ATLANTA'S PARKS
COMMISSIONER AND DEKALB'S CITIZEN ADVISORY BOARD.
FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:
COMMUNITY TO IMPROVE ITS QUALITY OF LIFE, BUT ALSO BECOMES A POWERFUL
TOOL TO SOLICIT FUNDING. AS A RESULT, MORE THAN \$14 MILLION IN PRIVATE
AND PUBLIC FUNDING HAS GONE TOWARD IMPLEMENTING THESE COMMUNITY CREATED
PARK VISIONS.
IN 2017, PARK PRIDE WORKED WITH COMMUNITY MEMBERS TO DEVELOP VISIONS
FOR KNIGHT PARK AND SOUTH ATLANTA PARK IN ATLANTA AND LITHONIA PARK AND
N.H. SCOTT PARK IN DEKALB COUNTY. PARK PRIDE ALSO HOSTED TWO DESIGN
WORKSHOPS WHICH PAIRED PROFESSIONAL LANDSCAPE ARCHITECTS WITH FRIENDS
OF THE PARK GROUPS RESULTING IN DESIGN PLANS FOR 11 LOCAL PARKS.
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:
COMMUNITY ENGAGEMENT AND EDUCATION
ANNUAL PARKS & GREENSPACE CONFERENCE
IN 2017, PARK PRIDE PRESENTED OUR 16TH ANNUAL PARKS & GREENSPACE
CONFERENCE, "CONNECTING WITH PARKS". OVER 400 ATTENDEES, INCLUDING
PARKS & RECREATION PROFESSIONALS, COMMUNITY ACTIVISTS, URBAN PLANNERS,

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

Name of the organization PARK PRIDE, INC.

F/K/A PARK PRIDE ATLANTA, INC.

 $\begin{array}{c} \textbf{Employer identification number} \\ 58-1883895 \end{array}$

GOVERNMENT OFFICIALS, ARCHITECTS AND LANDSCAPE ARCHITECTS,

ENVIRONMENTAL AND CIVIL ENGINEERS, REAL ESTATE DEVELOPERS,

ENVIRONMENTAL LAWYERS, AND PARK LOVERS GATHERED TO HEAR KEYNOTE

SPEAKERS: AUDREY PETERMAN, PRESIDENT OF EARTHWISE PRODUCTIONS AND KAID

BENEFIELD, SENIOR COUNSEL AT PLACEMAKERS LLC, AS WELL AS A VARIETY OF

BREAKOUT SESSIONS EXPLORING VARIOUS FACETS OF THE RELATIONSHIP BETWEEN

ADOPT-THE-ATLANTA BELTLINE

ENGAGED COMMUNITIES AND SUCCESSFUL PARKS.

THROUGH A PARTNERSHIP WITH THE ATLANTA BELTLINE PARTNERSHIP AND ATLANTA
BELTLINE, INC., PARK PRIDE COORDINATES THE ADOPT-THE-ATLANTA BELTLINE
PROGRAM, PROVIDING AN OPPORTUNITY FOR COMMUNITY GROUPS, ORGANIZATIONS
AND BUSINESSES TO ADOPT AND MAINTAIN 1/4-MILE SEGMENTS OF THE ATLANTA
BELTLINE. IN 2017, 48 ADOPTER GROUPS PARTICIPATED IN THE PROGRAM, WITH
777 VOLUNTEERS CONTRIBUTING 1640 VOLUNTEER HOURS OF SERVICE ON THEIR
ADOPTED SEGMENTS.

COMMUNITY GARDENS

COMMUNITY GARDENS ARE A GREAT WAY TO BUILD RELATIONSHIPS, REVITALIZE

PUBLIC SPACES, PROVIDE ACCESS TO HEALTHY, AFFORDABLE FOODS AND CREATE

AN ENJOYABLE ACTIVITY FOR PEOPLE OF ALL AGES. IN 2017 PARK PRIDE

HELPED TO PASS LEGISLATION ALLOWING COMMUNITY GARDENS IN ATLANTA PARKS.

THROUGH THE COMMUNITY GARDENING PROGRAM, PARK PRIDE CONNECTS GARDENERS

TO LOCAL RESOURCES FOR GARDENING AND PROVIDES OPPORTUNITIES FOR

GARDENERS TO NETWORK, SHARE IDEAS AND GAIN INSPIRATION FROM EACH OTHER.

IN 2017, PARK PRIDE PROVIDED ONGOING SUPPORT FOR 22 NEIGHBORHOOD GROUPS
AND NON-PROFIT ORGANIZATIONS THAT HAVE ESTABLISHED COMMUNITY GARDENS IN

Name of the organization PARK PRIDE, INC.

F/K/A PARK PRIDE ATLANTA, INC.

Employer identification number 58-1883895

CITY OF ATLANTA PARKS.

FISCAL PARTNERS

THROUGH THE FISCAL PARTNERS SERVICE, PARK PRIDE ADMINISTERS ACCOUNTS

FOR FRIENDS OF THE PARK GROUPS TO RECEIVE CONTRIBUTIONS FOR PARK

IMPROVEMENTS. THE PROGRAM HAS ENABLED NEIGHBORHOODS THROUGHOUT ATLANTA

AND DEKALB COUNTY TO REALIZE THEIR DREAMS OF NEW PLAYGROUNDS, ENHANCED

LANDSCAPING, PARK AMENITIES AND PRESERVED GREENSPACE. TO DATE, MORE

THAN \$4 MILLION HAS BEEN RAISED FOR PARKS THROUGH THE FISCAL PARTNERS

PROGRAM.

IN 2017, PARK PRIDE HAD 45 ACTIVE FISCAL PARTNERS WHO RAISED \$432,745

FOR CAPITAL IMPROVEMENTS TO THEIR PARKS. FISCAL PARTNERS REPRESENT A

DIVERSE GROUP OF PARK ADVOCATES FROM NEIGHBORHOODS THROUGHOUT THE CITY,

WORKING ON A WIDE RANGE OF PROJECTS. PARTNER PROJECTS INCLUDED:

PLANTINGS, SECURITY PATROLS, RECREATION FACILITIES, PLAYGROUND

EQUIPMENT, EDUCATIONAL SIGNAGE, COMMUNITY GARDENS, TRAILS, A SPLASHPAD,

AND PARK PROGRAMMING.

VOLUNTEERS

PARK PRIDE COORDINATES THOUSANDS OF VOLUNTEERS EACH YEAR TO HELP MAKE

AESTHETIC AND FUNCTIONAL IMPROVEMENTS TO PARKS THROUGHOUT OUR SERVICE

AREA. CORPORATE, STUDENT, COMMUNITY, AND OTHER NON-PROFIT GROUPS

LOOKING TO GIVE BACK TO THEIR COMMUNITIES RELY ON PARK PRIDE TO

ORGANIZE MEANINGFUL AND IMPACTFUL PROJECTS. PARK PRIDE ORGANIZES GROUPS

FROM 5 TO 300 VOLUNTEERS IN PROJECTS RANGING FROM PICKING UP LITTER TO

BUILDING COMMUNITY GARDENS AND EVERYTHING IN-BETWEEN. PROJECTS ARE

PLANNED WITH INPUT FROM FRIENDS OF THE PARK GROUPS TO MAKE SURE THEY

Employer identification number 58-1883895

ARE ALIGNED WITH THE COMMUNITY'S GOALS.

IN 2017, PARK PRIDE COORDINATED 7,215 VOLUNTEERS IN PARKS ACROSS

ATLANTA AND DEKALB COUNTY. CORPORATE GROUPS, STUDENT GROUPS AND CIVIC

MINDED ORGANIZATIONS MADE SIGNIFICANT IMPACTS TO PARKS BY LACING UP

THEIR BOOTS AND GETTING THEIR HANDS DIRTY. THE GROUPS, RANGING FROM

FIVE VOLUNTEERS TO MORE THAN TWO HUNDRED, ACCOMPLISHED A VARIETY OF

PROJECTS INCLUDING: INVASIVE REMOVAL, EROSION CONTROL, FOREST

RESTORATION, NEW TRAIL CONSTRUCTION AND BEAUTIFICATION. THESE GROUPS

PROVIDED A TOTAL OF 23,614 HOURS OF VOLUNTEER SERVICE TO PARKS

THROUGHOUT ATLANTA AND DEKALB COUNTY.

EXPENSES \$ 793,243. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

FORM 990, PART VI, SECTION B, LINE 11B:

EACH MEMBER OF THE FINANCE COMMITTEE REVIEWS FORM 990 AND PROVIDES

COMMENTARY AND REVISIONS AS NECESSARY. AFTER COMMENTS AND CHANGES ARE

INCORPORATED, THE TREASURER DOES A FINAL REVIEW OF THE RETURN BEFORE

SIGNING AND FILING.

FORM 990, PART VI, SECTION B, LINE 12C:

THE ORGANIZATION REGULARLY AND CONSISTENTLY MONITORS AND ENFORCES

COMPLIANCE WITH ITS CONFLICTS OF INTEREST POLICY.

FORM 990, PART VI, SECTION B, LINE 15:

THE EXECUTIVE DIRECTOR'S COMPENSATION IS DETERMINED BY (1) A THOROUGH

STUDY OF THE COMPENSATION PAID TO THE EXECUTIVE DIRECTORS OF OTHER

COMPARABLE ORGANIZATIONS AND (2) EVALUATION OF THE EXECUTIVE DIRECTOR'S

PERFORMANCE. AN INDEPENDENT COMMITTE OF THE ORGANIZATION'S BOARD OF

Schedule O (Form 990 or 990-EZ) (2017)	Page 2
Name of the organization PARK PRIDE, INC. F/K/A PARK PRIDE ATLANTA, INC.	Employer identification number 58-1883895
DIRECTORS REVIEWS AND APPROVES THE EXECUTIVE DIRECTOR'S O	COMPENSATION.
THE EXECUTIVE DIRECTOR DETERMINES COMPENSATION FOR ALL OF	THER EMPLOYEES OF
THE ORGANIZATION BASED ON THEIR PERFORMANCE AND THE SALAR	RIES PAID FOR
COMPARABLE ROLES IN OTHER, SIMILAR ORGANIZATION.	
FORM 990, PART VI, SECTION C, LINE 19:	
THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICTS	S OF INTEREST
POLICY, AND ITS FINANCIAL STATEMENTS AVAILABLE TO THE PUB	BLIC UPON REQUEST.
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