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Form 990

Return of Organization Exempt From Income Tax

OMB No 1545-0047

2018

Open to Public Inspection

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

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

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

Department of the Treasury
Internal Revenue Service

A For the 2019 calendar year, or tax year beginning 07-01-2018 , and ending 06-30-2019

B Check if applicable

☐ Address change

☐ Name change

☐ Initial return

☐ Final return/terminated

☐ Amended return

☐ Application pending

C Name of organization

HARLEM CHILDREN'S ZONE INC

% SARA ALVARADO

Doing business as

Number and street (or P O box if mail is not delivered to street address) Room/suite

35 East 125th Street

City or town, state or province, country, and ZIP or foreign postal code

New York, NY 10035

F Name and address of principal officer

anne williams-isom

35 EAST 125TH STREET

NEW YORK, NY 10035

H(a) Is this a group return for subordinates?

☐ Yes ☒ No

H(b) Are all subordinates included?

☐ Yes ☐ No

If "No," attach a list (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status

☒ 501(c)(3) ☐ 501(c) () ◀(insert no) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ WWW HCZ ORG

K Form of organization

☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation 1970

M State of legal domicile NY

Part I

Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities

HCZ is a pioneering, non-profit community BASED ORGANIZATION THAT WORKS TO ENHANCE THE QUALITY OF LIFE FOR CHILDREN AND FAMILIES IN SOME OF NYC'S MOST DEVASTATED NEIGHBORHOODS

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

3 Number of voting members of the governing body (Part VI, line 1a)

4 Number of independent voting members of the governing body (Part VI, line 1b)

5 Total number of individuals employed in calendar year 2018 (Part V, line 2a)

6 Total number of volunteers (estimate if necessary)

7a Total unrelated business revenue from Part VIII, column (C), line 12

7b Net unrelated business taxable income from Form 990-T, line 34

Revenue

8 Contributions and grants (Part VIII, line 1h)

9 Program service revenue (Part VIII, line 2g)

10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)

11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)

12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)

Expenses

13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)

14 Benefits paid to or for members (Part IX, column (A), line 4)

15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)

16a Professional fundraising fees (Part IX, column (A), line 11e)

b Total fundraising expenses (Part IX, column (D), line 25) ▶2,116,766

17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)

18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)

19 Revenue less expenses Subtract line 18 from line 12

Net Assets or Fund Balances

20 Total assets (Part X, line 16)

21 Total liabilities (Part X, line 26)

22 Net assets or fund balances Subtract line 21 from line 20

Prior Year

Current Year

Beginning of Current Year

End of Year

Part II

Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here

Signature of officer

JAMES D HUTTER cfo

Type or print name and title

2020-05-08

Date

Paid Preparer Use Only

Print/Type preparer's name

Firm's name ▶ GRANT THORNTON LLP

Firm's address ▶ 757 THIRD AVENUE 3RD FLOOR

NEW YORK, NY 100172013

Preparer's signature

Firm's EIN ▶

Phone no (212) 599-0100

Check ☐ if self-employed

PTIN P00741490

May the IRS discuss this return with the preparer shown above? (see instructions)

☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form 990 (2018)

Part III**Statement of Program Service Accomplishments**Check if Schedule O contains a response or note to any line in this Part III ☒**1** Briefly describe the organization's mission

HARLEM CHILDREN'S ZONE IS COMMITTED TO BREAKING THE CYCLE OF POVERTY IN CENTRAL HARLEM BY WORKING AT SCALE TO BUILD COMMUNITY, STRENGTHEN FAMILIES, AND ENSURE OUR CHILDREN SUCCEED FROM BIRTH THROUGH COLLEGE GRADUATION CONTINUED IN SCHEDULE O

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

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

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

If "Yes," describe these changes on Schedule O

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

4a	(Code)	(Expenses \$	52,946,270	including grants of \$	6,082,307	(Revenue \$	0)
See Additional Data							

4b	(Code)	(Expenses \$	13,602,606	including grants of \$	59,506	(Revenue \$	0)
See Additional Data							

4c	(Code)	(Expenses \$	9,884,252	including grants of \$	1,476,245	(Revenue \$	0)
See Additional Data							
























See Additional Data Table

4d Other program services (Describe in Schedule O)

(Expenses \$	12,376,169	including grants of \$	167,062	(Revenue \$	0)
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4e	Total program service expenses ▶	88,809,297
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Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 	1 Yes	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 	2 Yes	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	No
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	No
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	No
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	No
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 	7	No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 	8	No
9 Did the organization report an amount in Part X, line 21 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	No
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 Yes	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 	11a Yes	
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 	11b Yes	
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 	11c	No
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	No
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 	11e Yes	
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 Yes	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 	12a	No
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 	12b Yes	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	No
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	No
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, 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 Yes	
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	No
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	No
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) 	17 Yes	
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 	18 Yes	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 	19	No
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	No
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 Yes	
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 	22 Yes	

Part IV Checklist of Required Schedules (continued)

		Yes	No	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
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? <i>If "Yes," complete Schedule L, Part II</i>	26		No
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? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33	Yes	
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
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	Yes	

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

		Yes	No	
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	293	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0	
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	

2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		2a	2,587	2b	Yes	
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?				3a		No
b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O				3b		
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? . . .				4a		No
b If "Yes," enter the name of the foreign country ▶ _____ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)						
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . .				5a		No
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?				5b		No
c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?				5c		
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?				6a		No
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?				6b		
7 Organizations that may receive deductible contributions under section 170(c).						
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?				7a	Yes	
b If "Yes," did the organization notify the donor of the value of the goods or services provided?				7b	Yes	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?				7c		No
d If "Yes," indicate the number of Forms 8282 filed during the year				7d		
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?				7e		No
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . .				7f		No
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?				7g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?				7h		
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?						
				8		
9a Did the sponsoring organization make any taxable distributions under section 4966?				9a		
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?				9b		
10 Section 501(c)(7) organizations. Enter						
a Initiation fees and capital contributions included on Part VIII, line 12				10a		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities				10b		
11 Section 501(c)(12) organizations. Enter						
a Gross income from members or shareholders				11a		
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)				11b		
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?						
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year				12b		
13 Section 501(c)(29) qualified nonprofit health insurance issuers.						
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O				13a		
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans				13b		
c Enter the amount of reserves on hand				13c		
14a Did the organization receive any payments for indoor tanning services during the tax year?				14a		No
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O				14b		
15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N						
				15		No
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O						
				16		No

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

Section A. Governing Body and Management

	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year		
1a 19		
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O		
b Enter the number of voting members included in line 1a, above, who are independent		
1b 16		
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	No
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3	No
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	No
5 Did the organization become aware during the year of a significant diversion of the organization's assets?	5	No
6 Did the organization have members or stockholders?	6	No
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	No
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	No
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
a The governing body?	8a Yes	
b Each committee with authority to act on behalf of the governing body?	8b Yes	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	No

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

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

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed: NY

18 Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
☒ Own website ☐ Another's website ☒ Upon request ☐ Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records.
 ► SARA ALVARADO 35 EAST 125TH STREET NEW YORK, NY 10035 (212) 360-3255

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 ☐

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, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

[illegible]

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

[illegible]

1b Sub-Total			
c Total from continuation sheets to Part VII, Section A			
d Total (add lines 1b and 1c)	3,965,265	0	698,673

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ 49

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

Section B. Independent Contractors

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

(A)	(B)	(C)
Name and business address	Description of services	Compensation
GRANT THORNTON LLP, 33570 TREASURY CENTER CHICAGO, IL 60694	AUDIT	278,255
Precision Athletic Surfaces Cooper, PO Box 5 WESTON, VT 05161	Construction	219,650
Creative Sports Concepts LLC, 825 south schodack road CASTLETON, NY 12033	Construction	187,734
Gerald Lewis, 301 cascade park drive SW ATLANTA, GA 30331	Consulting Services	176,670
JM Facilities LLC, 77 tarrytown rd WHITE PLAINS, NY 10607	cleaning services	175,927

<p>2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ► 9</p>	
--	--

Part VIII Statement of RevenueCheck if Schedule O contains a response or note to any line in this Part VIII ☒**Contributions, Gifts, Grants and Other Similar Amounts**

	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
1a Federated campaigns	1a			
b Membership dues	1b			
c Fundraising events	1c	7,705,532		
d Related organizations	1d			
e Government grants (contributions)	1e	9,862,624		
f All other contributions, gifts, grants, and similar amounts not included above	1f	94,770,300		
g Noncash contributions included in lines 1a - 1f \$	215,499			
h Total. Add lines 1a-1f	112,338,456			

Program Service Revenue

	Business Code			
2a				
b				
c				
d				
e				
f All other program service revenue		0		
g Total. Add lines 2a-2f		0		

Other Revenue

3 Investment income (including dividends, interest, and other similar amounts)		12,417			12,417
4 Income from investment of tax-exempt bond proceeds		0			
5 Royalties		0			
6a Gross rents	(i) Real	(ii) Personal			
b Less rental expenses					
c Rental income or (loss)	0	0			
d Net rental income or (loss)			0		
7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other			
b Less cost or other basis and sales expenses					
c Gain or (loss)					
d Net gain or (loss)			-39,000		-39,000
8a Gross income from fundraising events (not including \$ 7,705,532 of contributions reported on line 1c) See Part IV, line 18	a	137,888			
b Less direct expenses	b	350,133			
c Net income or (loss) from fundraising events			-212,245		-212,245
9a Gross income from gaming activities See Part IV, line 19	a	0			
b Less direct expenses	b	0			
c Net income or (loss) from gaming activities			0		
10a Gross sales of inventory, less returns and allowances	a	0			
b Less cost of goods sold	b	0			
c Net income or (loss) from sales of inventory			0		
Miscellaneous Revenue	Business Code				
11a RECOVERY OF PRIOR YEAR INV WRITEOFF	900099	111,302			111,302
b MISCELLANEOUS	900099	180,719			180,719
c					
d All other revenue					
e Total. Add lines 11a-11d		292,021			
12 Total revenue. See Instructions		112,391,649			53,193

Part IX Statement of Functional Expenses

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

Check if Schedule O contains a response or note to any line in this Part IX ☐**Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.**

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.	4,630,454	4,630,454		
2 Grants and other assistance to domestic individuals. See Part IV, line 22.	3,154,666	3,154,666		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16.	0			
4 Benefits paid to or for members.	0			
5 Compensation of current officers, directors, trustees, and key employees.	2,218,667	1,980,212	171,716	66,739
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).	0			
7 Other salaries and wages.	47,311,458	42,226,579	3,661,715	1,423,164
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions).	1,225,514	1,081,510	100,621	43,383
9 Other employee benefits.	8,272,535	7,371,187	589,109	312,239
10 Payroll taxes.	4,537,669	4,143,250	276,215	118,204
11 Fees for services (non-employees):				
a Management.	0			
b Legal.	87,508		87,508	
c Accounting.	215,155		215,155	
d Lobbying.	0			
e Professional fundraising services. See Part IV, line 17.	70,000			70,000
f Investment management fees.	6,438,964		6,438,964	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	6,418,475	5,809,669	608,806	
12 Advertising and promotion.	184,506		184,506	
13 Office expenses.	300,741	267,300	30,026	3,415
14 Information technology.	992,635	710,597	257,693	24,345
15 Royalties.	0			
16 Occupancy.	8,363,180	7,474,255	888,800	125
17 Travel.	1,307,760	1,251,336	53,378	3,046
18 Payments of travel or entertainment expenses for any federal, state, or local public officials.	0			
19 Conferences, conventions, and meetings.	0			
20 Interest.	0			
21 Payments to affiliates.	0			
22 Depreciation, depletion, and amortization.	2,351,469	1,573,751	777,718	
23 Insurance.	628,876		628,876	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O):				
a FOOD	1,639,418	1,595,330	39,723	4,365
b EQUIPMENT RENTAL & MAINT	1,172,486	1,004,371	158,592	9,523
c TELEPHONE	939,381	728,256	207,255	3,870
d ADMISSIONS	869,632	851,118	18,514	
e All other expenses	3,581,461	2,955,456	591,657	34,348
25 Total functional expenses. Add lines 1 through 24e.	106,912,610	88,809,297	15,986,547	2,116,766
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

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

				(A) Beginning of year		(B) End of year	
Assets	1	Cash—non-interest-bearing		294,274	1	183,392	
	2	Savings and temporary cash investments		26,579,766	2	21,832,815	
	3	Pledges and grants receivable, net		6,860,004	3	37,684,155	
	4	Accounts receivable, net		439,352	4	474,279	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		0	5	0	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		0	6	0	
	7	Notes and loans receivable, net		0	7	0	
	8	Inventories for sale or use		0	8	0	
	9	Prepaid expenses and deferred charges		952,578	9	1,002,727	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D.	10a	167,990,654			
	b	Less: accumulated depreciation	10b	42,417,216	124,715,442	10c	125,573,438
	11	Investments—publicly traded securities		0	11	0	
	12	Investments—other securities. See Part IV, line 11		489,060,113	12	475,122,352	
	13	Investments—program-related. See Part IV, line 11		0	13	0	
	14	Intangible assets		0	14	0	
	15	Other assets. See Part IV, line 11		728,762	15	728,762	
16	Total assets. Add lines 1 through 15 (must equal line 34)		649,630,291	16	662,601,920		
Liabilities	17	Accounts payable and accrued expenses		11,457,461	17	12,326,958	
	18	Grants payable		65,951,246	18	64,119,267	
	19	Deferred revenue		0	19	0	
	20	Tax-exempt bond liabilities		0	20	0	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		0	21	0	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		0	22	0	
	23	Secured mortgages and notes payable to unrelated third parties		0	23	0	
	24	Unsecured notes and loans payable to unrelated third parties		0	24	0	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D		21,282,250	25	21,350,826	
	26	Total liabilities. Add lines 17 through 25		98,690,957	26	97,797,051	
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.						
	27	Unrestricted net assets		534,953,660	27	515,017,744	
	28	Temporarily restricted net assets		11,345,712	28	45,147,163	
	29	Permanently restricted net assets		4,639,962	29	4,639,962	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.						
	30	Capital stock or trust principal, or current funds			30		
	31	Paid-in or capital surplus, or land, building or equipment fund			31		
	32	Retained earnings, endowment, accumulated income, or other funds			32		
33	Total net assets or fund balances		550,939,334	33	564,804,869		
34	Total liabilities and net assets/fund balances		649,630,291	34	662,601,920		

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	112,391,649
2	Total expenses (must equal Part IX, column (A), line 25)	2	106,912,610
3	Revenue less expenses Subtract line 2 from line 1	3	5,479,039
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	550,939,334
5	Net unrealized gains (losses) on investments	5	8,386,496
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	564,804,869

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

- 1** Accounting method used to prepare the Form 990 ☐ Cash ☒ Accrual ☐ Other _____
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?
If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both
☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis
- b** Were the organization's financial statements audited by an independent accountant?
If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both
☐ Separate basis ☒ Consolidated basis ☐ Both consolidated and separate basis
- c** If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

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

Additional Data

Software ID:
Software Version:
EIN: 23-7112974
Name: HARLEM CHILDREN'S ZONE INC

Form 990 (2018)

Form 990, Part III, Line 4a:

HARLEM CHILDREN'S ZONE OFFERS A COMPREHENSIVE NETWORK OF EDUCATION, SOCIAL-SERVICE AND COMMUNITY-BUILDING PROGRAMS ACROSS A 97-BLOCK AREA OF CENTRAL HARLEM. HARLEM CHILDREN'S ZONE SUPPORTS CHILDREN FROM BIRTH THROUGH COLLEGE AS WELL AS WORKING WITH THE ADULTS AROUND THEM. THE ORGANIZATION SERVES 13,230 CHILDREN - MOST OF WHOM GO TO TRADITIONAL PUBLIC SCHOOLS - AND 13,379 ADULTS. AFTERSCHOOL PROGRAMS WE PROVIDE SUPPORT FOR STUDENTS IN THE TRADITIONAL PUBLIC ELEMENTARY SCHOOLS WITHIN HARLEM CHILDREN'S ZONE AFTER SCHOOL PROGRAM. WE WORK WITH MIDDLE-SCHOOL AND HIGH-SCHOOL STUDENTS THROUGH SEVERAL AFTER-SCHOOL PROGRAMS, MAKING SURE THEY ARE READY FOR COLLEGE. HCZ's College Preparatory Program provides comprehensive academic enrichment year-round to students across all of our high-school sites. Services include one-on-one tutoring, standardized test prep, and assistance with college essays and financial aid applications. Students also take trips to visit college campuses and participate in a host of extracurricular activities, including robotics, chess, fashion design, music and video production, creative writing, and much, much more. In building on our students' passions, these activities also help them gain confidence, discover the rewards of commitment, and even get exposure to potential career paths. At the heart of our College Prep programming is our unique Academic Case Management (ACM) approach. Through ACM, all middle-school, high-school, and college students are assigned a Student Advocate. Whereas guidance counselors in New York City public schools have an average caseload of 400 students, Student Advocates advise an average of 25 students, working closely with each and every one to create individualized action plans with concrete, targeted strategies to help advance both academic and personal development. Like everything we do at HCZ, helping our students' achieve college readiness is a team effort. In order to better foster and track their progress, Student Advocates collaborate with parents, teachers, tutors, social workers, and other stakeholders. It is also a multi-pronged effort. College readiness calls for a robust knowledge base in core subject areas, certainly. Yet it also calls for strong study habits and academic behaviors, as well as non-cognitive skills, such as curiosity, grit, persistence, and resourcefulness. Across sites and grades, we help students develop both the character traits and the soft skills they need to face the many challenges that college brings and achieve their long-term academic, professional, and personal goals. Ultimately, our College Prep Program consists of far more than campus visits and case management. Throughout our pipeline, HCZ's dedicated staff consistently aim to cultivate a college-going culture in which each and every child is empowered to aim high and is equipped with the resilience and tools to follow through.

Form 990, Part III, Line 4b:

Early childhood SCIENTIFIC RESEARCH HAS SHOWN CONCLUSIVELY THAT THE VERY FIRST YEARS OF A CHILD'S LIFE ARE OF ENORMOUS IMPORTANCE TO BRAIN DEVELOPMENT AND CHANCES FOR ACADEMIC SUCCESS THAT IS WHY AT HCZ EARLY CHILDHOOD EDUCATION IS THE CRITICAL STARTING LINE FOR OUR CHILDREN IN THEIR JOURNEY TO COLLEGE GRADUATION OUR EARLY CHILDHOOD PROGRAMS OFFER A HOLISTIC COMBINATION OF EDUCATIONAL SUPPORT AND SERVICES THAT COACH PARENTS TO FACILITATE THEIR CHILD'S HEALTHY DEVELOPMENT, ENCOURAGE STRONG PARENT-CHILD BONDS, PROMOTE LITERACY-RICH INTERACTIONS, AND PREPARE CHILDREN TO ENTER KINDERGARTEN FULLY READY FOR SCHOOL THE ORGANIZATION HAS BEEN SUCCESSFUL IN TEACHING NEW PARENTS HOW TO ENGAGE WITH THEIR CHILDREN TO OPTIMIZE BRAIN DEVELOPMENT, WHICH SETS THE STAGE FOR LATER ACADEMIC SUCCESS THE BABY COLLEGE PARENTING WORKSHOPS HAVE GRADUATED MORE THAN 6,000 PARENTS AND CAREGIVERS SINCE IT BEGAN IN 2000 THE BABY COLLEGE GIVES EXPECTANT PARENTS AND PARENTS OF CHILDREN AGES 0-3 A STRONG UNDERSTANDING OF CHILD DEVELOPMENT AND THE SKILLS TO RAISE HAPPY, HEALTHY BABIES THROUGH WORKSHOPS AND HOME VISITS THE BABY COLLEGE GRADS PROGRAM DEEPENS PARENTS' UNDERSTANDING OF CHILD DEVELOPMENT AND THEIR RELATIONSHIPS WITH THEIR CHILDREN, ALSO THROUGH WORKSHOPS AND HOME VISITS HCZ CREATED THE THREE-YEAR-OLD JOURNEY PROGRAM TO CONTINUE THE PARENTING-SKILLS DEVELOPMENT THROUGH PARENT WORKSHOPS AND GROUP ACTIVITIES FOR CHILDREN THE FINAL STEP IN OUR EARLY-CHILDHOOD PIPELINE, HARLEM GEMS OFFERS A HIGH-QUALITY, YEAR-ROUND, FULL-DAY PRE-KINDERGARTEN PROGRAM THAT ENSURES THAT EVERY STUDENT ENTERS KINDERGARTEN SCHOOL-READY IN THE HARLEM GEMS PRE-KINDERGARTEN PROGRAMS, THREE- AND FOUR-YEAR-OLDS ATTEND AN ALL-DAY, YEAR-ROUND PROGRAM THAT TEACHES IN ENGLISH, SPANISH AND FRENCH IN 2018, 99.5% OF THE CHILDREN WHO COMPLETED THE HARLEM GEMS PRE-SCHOOL PROGRAM HAVE BEEN ASSESSED AS "SCHOOL READY," AS DETERMINED BY THE NATIONALLY RECOGNIZED BRACKEN SCALE ASSESSMENT

Form 990, Part III, Line 4c:

COLLEGE AND CAREER WE HAVE 946 STUDENTS IN COLLEGE AND TO MAKE SURE THEY ARE SUCCESSFUL, OUR Center for Higher Education and Career Support (CHECS) OFFERS A VARIETY OF SUPPORTS TUTORING, SCHOLARSHIPS, FINANCIAL AID COUNSELING, TIME MANAGEMENT CLASSES, AS WELL AS RESUME-WRITING AND INTERVIEW WORKSHOPS EACH STUDENT IS ASSIGNED AN ADVISOR WHO STAYS IN REGULAR CONTACT AND VISITS THE SCHOOL TO MAKE SURE THE STUDENT IS GETTING THE SUPPORTS THEY NEED AND IS STAYING ON TRACK FOR GRADUATION WE ALSO HELP STUDENTS WITH GETTING WORKPLACE EXPERIENCE THROUGH PAID INTERNSHIPS IN COMPANIES, HEALTH-CARE INSTITUTIONS, GOVERNMENT AGENCIES AND NON-PROFITS AS WELL AS EMPLOYING THEM TO HELP WITH PROGRAMS AT HCZ Part III, Line 4D OTHER PROGRAMS PREVENTIVE SERVICES HCZ'S FOSTER-CARE PREVENTIVE PROGRAMS WORK TO STRENGTHEN FAMILIES IN CRISIS SO THAT THE FAMILIES CAN STAY WHOLE AND NOT HAVE CHILDREN PLACED INTO FOSTER CARE Community Centers HCZ HAS ESTABLISHED PIONEERING COMMUNITY CENTERS FOR CHILDREN AND ADULTS DURING EVENING, WEEKEND AND SUMMER HOURS FOR STUDENTS, THE CENTERS PROVIDE CRITICAL ACADEMIC SUPPLEMENTS AND PERSONALIZED TUTORING, AS WELL AS A SAFE, ENRICHING PLACE TO SPEND THEIR OUT-OF-SCHOOL HOURS FOR ADULTS, THE CENTER OFFER RECREATIONAL AND SPORTS PROGRAMS OVERALL, THE CENTERS ARE SORELY NEEDED RESOURCES IN NEIGHBORHOODS THAT ARE BEREFT OF PLACES FOR CHILDREN AND ADULTS TO GATHER, HAVE FUN, LEARN NEW SKILLS AND IMPROVE THEIR FITNESS

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

Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

(Code)	(Expenses \$	7,642,918	including grants of \$	32,593) (Revenue \$	0)
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Preventive Services

(Code)	(Expenses \$	4,733,251	including grants of \$	134,469) (Revenue \$	0)
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OTHER PROGRAM SERVICES

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Geoffrey Canada President	40 0 2 0	X		X				195,944	0	33,651
Anne Williams-Isom Chief Executive Officer	40 0 2 0	X		X				568,326	0	143,903
Stanley F Druckenmiller Chairman	1 0 2 0	X		X				0	0	0
Mitch Kurz Treasurer	1 0 2 0	X		X				0	0	0
Matthew C Blank Secretary	1 0 0 0	X		X				0	0	0
Wallis Annenberg board member	1 0 0 0	X						0	0	0
Keith Meister vice chairman	1 0 0 0	X		X				0	0	0
Joseph DiMenna board member	1 0 0 0	X						0	0	0
mark Kingdon board member	1 0 0 0	X						0	0	0
Kenneth G Langone board member	1 0 2 0	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Laura samberg board member	1 0 0 0	X						0	0	0
Caroline Turner board member	1 0 0 0	X						0	0	0
Richard Witten Board Member	1 0 0 0	X						0	0	0
Brian Higgins Board Member	1 0 0 0	X						0	0	0
Jeffrey Talpins Board Member (thru 10/2018)	1 0 0 0	X						0	0	0
Zachary J Schreiber board member	1 0 0 0	X						0	0	0
Eric w Mandelblatt board member	1 0 0 0	X						0	0	0
Philippe Laffont Board Member	1 0 0 0	X						0	0	0
Ashok Varadhan Board Member	1 0 0 0	X						0	0	0
Doug Buckminster board member	1 0 0 0	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Mindy Miller VP of development	40 0 0 0			X				452,589	0	32,398
Kwame Owusu-Kesse chief operating officer	40 0 0 0			X				280,902	0	93,598
James d Hutter Chief financial officer	40 0 0 0			X				363,182	0	94,464
Betina Jean Louis director of evaluation	40 0 0 0					X		253,870	0	74,888
Conrad Pinnock Senior Advisor	40 0 0 0					X		297,161	0	62,198
Tracey Jenkins chief procurement officer	40 0 0 0					X		271,308	0	60,725
MARILYN JOSEPH thru 092018 MANAGER, COMM & PARENT ENG	40 0 2 0					X		426,342	0	30,355
MURONJI C INMAN-MCCRAW thru 0718 DIR , CURRICULUM & INSTRUCTION	40 0 2 0					X		334,199	0	29,087
Debbie Feliciano-Gonzalez thru718 Senior Mgr, Compl & Support	40 0 0 0						X	521,442	0	43,406

SCHEDULE A

(Form 990 or 990EZ)

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 the latest information.

OMB No 1545-0047

2018

Open to Public Inspection

Name of the organization

HARLEM CHILDREN'S ZONE INC

Employer identification number

23-7112974

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).**
- 4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state
- 5

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)
- 6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7

☒

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II)
- 8

☐

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 9

☐

An agricultural research organization described in **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

☐

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)
- 11

☐

An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**
- 12

☐

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 12g
- a

☐

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.**
- 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.**
- 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.**
- d

☐

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.**
- e

☐

Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization
- f

Enter the number of supported organizations
- g

Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

Part II

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv), 170(b)(1)(A)(vi), and 170(b)(1)(A)(ix)

(Complete only if you checked the box on line 5, 7, 8, or 9 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) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant ")	193,520,296	85,147,323	120,267,600	72,230,873	112,338,456	583,504,548
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0
4	Total. Add lines 1 through 3	193,520,296	85,147,323	120,267,600	72,230,873	112,338,456	583,504,548
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)						211,403,358
6	Public support. Subtract line 5 from line 4						372,101,190

Section B. Total Support							
Calendar year (or fiscal year beginning in) ►		(a)2014	(b)2015	(c)2016	(d)2017	(e)2018	(f)Total
7	Amounts from line 4	193,520,296	85,147,323	120,267,600	72,230,873	112,338,456	583,504,548
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,700,863	1,751,871	11,213	23,921	12,417	3,500,285
9	Net income from unrelated business activities, whether or not the business is regularly carried on	0	0	0	0	0	0
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	2,014,195	2,298,179	997,033	1,040,627	429,909	6,779,943
11	Total support. Add lines 7 through 10						593,784,776
12	Gross receipts from related activities, etc. (see instructions)					12	0
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 ► <input type="checkbox"/>						

Section C. Computation of Public Support Percentage		
14	Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f))	14 62.666 %
15	Public support percentage for 2017 Schedule A, Part II, line 14	15 64.775 %
16a	33 1/3% support test—2018. 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. ► <input checked="" type="checkbox"/>	
b	33 1/3% support test—2017. 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. ► <input type="checkbox"/>	
17a	10%-facts-and-circumstances test—2018. 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. ► <input type="checkbox"/>	
b	10%-facts-and-circumstances test—2017. 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 "facts-and-circumstances" test. The organization qualifies as a publicly supported organization. ► <input type="checkbox"/>	
18	Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions. ► <input type="checkbox"/>	

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 qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ► ☐

Section C. Computation of Public Support Percentage

15 Public support percentage for 2018 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2017 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2018 (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from 2017 Schedule A, Part III, line 17	18	

19a 33 1/3% support tests—2018. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ► ☐

b 33 1/3% support tests—2017. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ► ☐

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ► ☐

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of 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

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>	1	
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>	2	
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>	3a	
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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>	3b	
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>	3c	
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>	4a	
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>	4b	
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)? <i>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.</i>	4c	
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>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).</i>	5a	
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?	5b	
c Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c	
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 filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>	6	
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? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>	7	
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>	8	
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))? <i>If "Yes," provide detail in Part VI.</i>	9a	
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? <i>If "Yes," provide detail in Part VI.</i>	9b	
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? <i>If "Yes," provide detail in Part VI.</i>	9c	
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)? <i>If "Yes," answer line 10b below.</i>	10a	
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>	10b	

Part IV

Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a 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?		
b A family member of a person described in (a) above?		
c A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI</i>		

Section 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? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, 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.</i>		
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? <i>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.</i>		

Section 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)? <i>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).</i>		

Section 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?		
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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
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? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)		
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2 Activities Test. Answer (a) and (b) below.		
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? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>		
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? <i>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.</i>		
3 Parent of Supported Organizations. Answer (a) and (b) below.		
a 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? <i>Provide details in Part VI.</i>		
b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations			
<div><div>1</div><div><input type="checkbox"/></div><div>Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.</div></div>			
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
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	
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1	
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	
Section 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	Minimum 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	<div><div><input type="checkbox"/></div><div>Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions).</div></div>		

Part V

Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI) See instructions	
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	
9 Distributable amount for 2018 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1 Distributable amount for 2018 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2018 (reasonable cause required-- explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2018			
a From 2013.			
b From 2014.			
c From 2015.			
d From 2016.			
e From 2017.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2018 distributable amount			
i Carryover from 2013 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2018 from Section D, line 7 \$			
a Applied to underdistributions of prior years			
b Applied to 2018 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2018, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI See instructions			
6 Remaining underdistributions for 2018 Subtract lines 3h and 4b from line 1 If the amount is greater than zero, explain in Part VI See instructions			
7 Excess distributions carryover to 2019. Add lines 3j and 4c			
8 Breakdown of line 7			
a Excess from 2014.			
b Excess from 2015.			
c Excess from 2016.			
d Excess from 2017.			
e Excess from 2018.			

Additional Data

Software ID:
Software Version:
EIN: 23-7112974
Name: HARLEM CHILDREN'S ZONE INC

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1, Part V, Section B, line 1e, Part V Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional information (See instructions)

Facts And Circumstances Test

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

OMB No 1545-0047

2018

Open to Public Inspection

Name of the organization
HARLEM CHILDREN'S ZONE INC

Employer identification number
23-7112974

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?

☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

☐ Yes ☐ No

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

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

☐ Preservation of land for public use (e g , recreation or education)

☐ Preservation of an historically important land area

☐ Protection of natural habitat

☐ Preservation of a certified historic structure

☐ Preservation of open space

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

	Held at the End of the Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d

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

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

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes ☐ No

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

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

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

☐ Yes ☐ No

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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

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

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

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

► \$

(ii) Assets included in Form 990, Part X

► \$

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

a Revenue included on Form 990, Part VIII, line 1

► \$

b Assets included in Form 990, Part X

► \$

Part III

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

3

Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

a

☐ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other

4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☐ No

Part IV

Escrow and Custodial Arrangements.

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

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIII and complete the following table

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?

☐ Yes

☐ No

b

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

☐

Part V

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

	(a)Current year	(b)Prior year	(c)Two years back	(d)Three years back	(e)Four years back
1a Beginning of year balance	466,183,291	438,718,755	404,031,411	387,460,570	287,313,069
b Contributions	0	0	4,471,008	34,162,285	41,874,250
c Net investment earnings, gains, and losses	866,151	46,347,788	30,382,231	-17,478,276	58,330,749
d Grants or scholarships	65,965	325,315	165,895	113,168	57,498
e Other expenditures for facilities and programs	15,240,492	18,557,937			
f Administrative expenses					
g End of year balance	451,742,985	466,183,291	438,718,755	404,031,411	387,460,570

2

Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

a

Board designated or quasi-endowment

98 720 %

b

Permanent endowment

1 280 %

c

Temporarily restricted endowment

0 %

The percentages on lines 2a, 2b, and 2c should equal 100%

3a

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

(i) unrelated organizations

3a(i)

Yes

No

(ii) related organizations

3a(ii)

No

b

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

3b

4

Describe in Part XIII the intended uses of the organization's endowment funds

Part VI

Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		14,156,007		14,156,007
b Buildings		132,723,600	27,871,954	104,851,646
c Leasehold improvements		14,099,693	8,100,188	5,999,505
d Equipment		4,771,858	4,404,452	367,406
e Other		2,239,496	2,040,622	198,874
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))				125,573,438

Schedule D (Form 990) 2018

Part VII

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A) ALTERNATIVE INVESTMENTS	363,028,906	F
(B) LIMITED PARTNERSHIPS	95,020,888	F
(C) ALT. INVESTMENT REDEMPTION	17,072,558	F
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶	475,122,352	

Part VIII

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

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

Part IX

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

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

Part X

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

(a) Description of liability	(b) Book value
(1) Federal income taxes	0
DEFERRED COMPENSATION PAYABLE	5,666,650
DUE TO RELATED PARTY	11,184,176
REFUNDABLE ADVANCE	4,500,000
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	21,350,826

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

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

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

1	Total revenue, gains, and other support per audited financial statements	1	116,088,873
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains (losses) on investments	2a	8,386,496
b	Donated services and use of facilities	2b	1,749,692
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	
e	Add lines 2a through 2d	2e	10,136,188
3	Subtract line 2e from line 1	3	105,952,685
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	6,438,964
b	Other (Describe in Part XIII)	4b	
c	Add lines 4a and 4b	4c	6,438,964
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)	5	112,391,649

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

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

1	Total expenses and losses per audited financial statements	1	102,223,338
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	1,749,692
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII)	2d	
e	Add lines 2a through 2d	2e	1,749,692
3	Subtract line 2e from line 1	3	100,473,646
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 :		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	6,438,964
b	Other (Describe in Part XIII)	4b	
c	Add lines 4a and 4b	4c	6,438,964
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)	5	106,912,610

Part XIII Supplemental Information

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

Return Reference	Explanation
See Additional Data Table	

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

Additional Data

Software ID:
Software Version:
EIN: 23-7112974
Name: HARLEM CHILDREN'S ZONE INC

Supplemental Information

Return Reference	Explanation
Schedule D, part V endowments	HARLEM CHILDREN'S ZONE'S ENDOWMENTS ARE INTENDED TO SUPPORT THE ORGANIZATION'S SOCIAL, CULTURAL AND EDUCATIONAL PROGRAMS (AS DESCRIBED IN PART III OF THE FORM 990) AND TO FUND A TAX-DEFERRED EMPLOYEE SAVINGS PLAN HCZ HAS ADOPTED INVESTMENT AND SPENDING POLICIES FOR ENDOWMENT ASSETS THAT ATTEMPT TO PROVIDE A PREDICTABLE STREAM OF FUNDING WHILE SEEKING TO MAINTAIN THE EARNINGS POWER OF THE ENDOWMENT ASSETS The organization has modified its endowment footnote from its presentation in prior years to reflect a net drawdown to fund operations on Line 1(e) In years in which the organization's net fund transfers into the endowment exceed its annual drawdown, those amounts have been included with contributions on Line 1(b) Amounts reported on Line 1(b) and Line 1(e) represent either the net addition to, or drawdown from, the endowment in each given year

Supplemental Information

Return Reference	Explanation
Schedule d, part x Fin 48	<p>HCZ follows guidance that clarifies the accounting for uncertainty in tax positions taken or expected to be taken in a tax return, including issues relating to financial statement recognition and measurement. This guidance provides that the tax effects from an uncertain tax position can only be recognized in the consolidated financial statements if the position is "more-likely-than-not" to be sustained if the position were to be challenged by a taxing authority. The assessment of the tax position is based solely on the technical merits of the position, without regard to the likelihood that the tax position may be challenged. HCZ is exempt from federal income tax under IRC section 501(c)(3), though it is subject to tax on income unrelated to its exempt purpose, unless that income is otherwise excluded by the Code. HCZ has processes presently in place to ensure the maintenance of its tax-exempt status, to identify and report unrelated business income, to determine its filing and tax obligations in jurisdictions for which it has nexus, and to identify and evaluate other matters that may be considered tax positions. HCZ has determined that there are no material uncertain tax positions that require recognition or disclosure in the financial statements. In addition, HCZ has not recorded a provision for income taxes as it has no material tax liability from unrelated business income activities.</p>

SCHEDULE F
(Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.
► Attach to Form 990.
► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

2018

Open to Public Inspection

Name of the organization
HARLEM CHILDREN'S ZONE INC

Employer identification number
23-7112974

Part I

General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

- 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☐ Yes ☐ No
- 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States

3 Activities per Region (The following Part I, line 3 table can be duplicated if additional space is needed)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
Central America and the Caribbean			Investments		363,028,906
3a Sub-total					363,028,906
b Total from continuation sheets to Part I					
c Totals (add lines 3a and 3b)					363,028,906

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)

- 2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ► _____
- 3 Enter total number of other organizations or entities ► _____

Part III	Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.
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Part III can be duplicated if additional space is needed.

[illegible]

Part IV Foreign Forms

- 1 Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* ☒ Yes ☐ No
- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U S Owner (see Instructions for Forms 3520 and 3520-A, don't file with Form 990)* ☐ Yes ☒ No
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U S Persons with Respect to Certain Foreign Corporations (see Instructions for Form 5471)* ☒ Yes ☐ No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)* ☒ Yes ☐ No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U S Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* ☒ Yes ☐ No
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713, don't file with Form 990)* ☐ Yes ☒ No

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

990 Schedule F, Supplemental Information

Return Reference	Explanation
Form 990, Schedule F	HARLEM CHILDREN'S ZONE INVESTS DIRECTLY IN A VARIETY OF ALTERNATIVE INVESTMENTS THESE ALTERNATIVE INVESTMENTS ARE EITHER DOMICILED IN THE UNITED STATES AS LIMITED PARTNERSHIPS OR IN FOREIGN JURISDICTIONS AS CORPORATIONS OR PARTNERSHIPS BY VIRTUE OF ITS OWNERSHIP IN THESE INVESTMENTS, HARLEM CHILDREN'S ZONE MAY OWN AN INTEREST IN A FOREIGN CORPORATION, PASSIVE FOREIGN INVESTMENT COMPANY, OR FOREIGN PARTNERSHIP TO THE EXTENT THAT HARLEM CHILDREN'S ZONE IS REQUIRED TO COMPLETE A FORM 926, 5471, 8621 OR 8865 BECAUSE ITS INVESTMENT EXCEEDS THE FILING THRESHOLD, THOSE FORMS HAVE BEEN ATTACHED TO THE ORGANIZATION'S FORM 990-T FILING

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)
		Award Dinner (event type)	(event type)	0 (total number)	Total events (add col (a) through col (c))
Revenue	1 Gross receipts	7,843,420			7,843,420
	2 Less Contributions	7,705,532			7,705,532
	3 Gross income (line 1 minus line 2)	137,888			137,888
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages	203,993			203,993
	8 Entertainment				
	9 Other direct expenses	146,140			146,140
	10 Direct expense summary Add lines 4 through 9 in column (d) ▶				350,133
11 Net income summary Subtract line 10 from line 3, column (d) ▶				-212,245	

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

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

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

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

b If "No," explain _____

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

b If "Yes," explain _____

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

Name ►

Address ►

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

Name ►

Address ►

16 Gaming manager information

Name ►

Gaming manager compensation ► \$

Description of services provided ►

☐ Director/officer

☐ Employee

☐ Independent contractor

17 Mandatory distributions

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

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

Return Reference	Explanation
Form 990, Schedule G, Part I - Fundraising	EVENT ASSOCIATES, INC ASSISTS HARLEM CHILDREN'S ZONE WITH THE ORGANIZATION'S ANNUAL GALA EVENT THE EVENT RAISES SIGNIFICANT FUNDS TO SUPPORT THE ORGANIZATION'S CHARITABLE MISSION, THESE FUNDS ARE RAISED THROUGH THE COMBINED EFFORTS OF HARLEM CHILDREN ZONE'S DEVELOPMENT OFFICE (AND OTHER DEDICATED PERSONNEL) AND EVENT ASSOCIATES QUANTIFYING PRECISELY HOW MUCH WAS RAISED BY EVENT ASSOCIATES FOR SCHEDULE G PURPOSES IS NOT FEASIBLE

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Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization
HARLEM CHILDREN'S ZONE INC

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

OMB No 1545-0047

2018

Open to Public Inspection

Employer identification number
23-7112974

Part IGeneral Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ Yes☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed

(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) Harlem Children's Zone Promise Academy I 245 West 129th Street New York, NY 10027	76-0756768	501(c)(3)	2,522,898				EDUCATION
(2) Harlem Children's Zone Promise Academy II 35 East 125th Street New York, NY 10035	34-2049530	501(c)(3)	2,096,806				EDUCATION

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table2
- 3 Enter total number of other organizations listed in the line 1 table0

Part III **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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1) Educational Stipends	1107	1,636,479			
(2) H CZ Hardship Assistance	437	613,755			
(3) scholarships	399	915,182			
(3)					
(4)					
(5)					
(6)					
(7)					

Part IV **Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Return Reference	Explanation
Schedule I, part III	<p>THE NEED IN CENTRAL HARLEM CHILDREN IN CENTRAL HARLEM TYPICALLY FACE MULTIPLE CHALLENGES TO THEIR SUCCESS FAILING SCHOOLS, INADEQUATE HEALTH CARE, LACK OF SAFE PLACES TO SPEND OUT-OF-SCHOOL TIME, THE EVER-PRESENT THREAT OF PHYSICAL VIOLENCE NUMEROUS STUDIES HAVE DOCUMENTED THE OBSTACLES TO SUCCESS FOR LOW-INCOME STUDENTS, PARTICULARLY THOSE OF COLOR A BLACK BOY BORN IN 2001 HAS A ONE IN THREE CHANCE OF GOING TO PRISON IN HIS LIFETIME ONE STUDY FOUND THAT BY THE AGE OF THREE, CHILDREN IN POOR FAMILIES WERE EXPOSED TO 30 MILLION FEWER WORDS THAN CHILDREN IN HIGH-INCOME HOMES TO ADDRESS THE MULTIPLICITY OF CHALLENGES OUR KIDS FACE, HARLEM CHILDREN'S ZONE HAS CREATED A FREE, HOLISTIC, BIRTH-THROUGH-COLLEGE PIPELINE OF SUPPORTS AND SERVICES TO ENSURE THAT CHILDREN REACH THEIR POTENTIAL AT EACH STAGE OF THEIR DEVELOPMENT IN ADDITION TO WORKING FOR YEARS WITH BOYS AND GIRLS, WE WORK TO STRENGTHEN THE FAMILIES AND COMMUNITY AROUND OUR CHILDREN WE DO WHATEVER IT TAKES TO ADDRESS ALL THE BARRIERS TO OUR CHILDREN'S SUCCESS IN ADDITION TO OUR PRIMARY FOCUS ON ACADEMICS, WE CONSIDER THE WHOLE CHILD OFFERING CHILDREN EXPOSURE TO THE ARTS AND CULTURE, COMMUNITY SERVICE, REGULAR PHYSICAL EXERCISE, AND NUTRITION WORKSHOPS TO HELP DEVELOP LIFE-LONG HEALTHY HABITS WE ALSO HELP THEM DEVELOP THEIR NON-COGNITIVE SKILLS, SUCH AS PERSISTENCE AND RESILIENCE, AS WELL AS ADDRESSING ANY SOCIAL AND EMOTIONAL NEEDS TO HELP ENSURE OUR HIGH-SCHOOL STUDENTS REMAIN ENGAGED IN OUR PROGRAMS, WE OFFER THEM THE OPPORTUNITY TO EARN STIPENDS THE STIPENDS RELIEVE SOME OF THE FINANCIAL STRESS ON CHILDREN AND THEIR FAMILIES, SO CHILDREN DO NOT NEED TO CHOOSE BETWEEN ENRICHING ACTIVITIES AND TAKING ON A PART-TIME JOB THE STIPENDS ARE DESIGNED TO BE A PRE-EMPLOYMENT MODEL SO THAT STUDENTS BEGIN TO LEARN THE WORKPLACE STANDARD OF GETTING REWARDS FOR HARD WORK THE STIPEND AMOUNTS ARE BASED ON PARTICIPATION AND DISTRIBUTED TWICE A MONTH THE SECOND PROGRAM ON SCHEDULE I IS A HARDSHIP ASSISTANCE/INCENTIVE PROGRAM THAT OFFERS DIFFERENT TYPES OF AID DEPENDING ON THE NEEDS OF THE INDIVIDUAL THE CHILDREN AND FAMILIES WE SERVE ARE SOME OF THE MOST DISENFRANCHISED AND HAVE FEW RESOURCES OF THEIR OWN FOR THAT REASON, H CZ SETS ASIDE FUNDS FOR SPECIAL CLIENT SERVICES TO DEAL WITH FAMILIES' SHORT-TERM CRISES, AS WELL AS FOR INCENTIVES TO ENCOURAGE PARTICIPANTS TO STAY FOCUSED ON THEIR ACADEMIC SUCCESS AND WELL-BEING IN ADDITION, THE PROGRAM IS DESIGNED TO REWARD AND HELP GRADUATING HIGH-SCHOOL SENIORS AS THEY MOVE ON TO COLLEGE WE OFFER EACH SENIOR THE CHOICE OF A \$1,000 SCHOLARSHIP OR A LAPTOP COMPUTER, WHICH IS A NECESSITY FOR TODAY'S COLLEGE STUDENT THE INCENTIVE PAYMENTS ARE ONLY MADE IN THE FORM OF A LAPTOP OR A DIRECT SCHOLARSHIP PAYMENT MADE DIRECTLY TO THEIR COLLEGE ON THEIR BEHALF H CZ ALSO OFFERS SCHOLARSHIPS THROUGH DONATED FUNDS TO REDUCE POTENTIAL DEBT FOR OUR COLLEGE STUDENTS THESE FUNDS ARE CRITICALLY IMPORTANT FOR OUR STUDENTS, MANY OF WHOM HAVE FEW - IF ANY -FUNDS OF THEIR OWN TO PAY FOR THEIR COLLEGE EXPENSES</p>

Schedule J (Form 990)	<div>Compensation Information</div> <div>For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees</div> <div>▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23. ▶ Attach to Form 990.</div> <div>▶ Go to www.irs.gov/Form990 for instructions and the latest information.</div>	OMB No 1545-0047
		2018
		Open to Public Inspection

Department of the Treasury Internal Revenue Service	Name of the organization HARLEM CHILDREN'S ZONE INC	Employer identification number 23-7112974
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Part I Questions Regarding Compensation		Yes	No
1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use		
<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence		
<input type="checkbox"/> Tax indemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees		
<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)		
b If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain.		1b	
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?		2	
3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.			
<input type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract		
<input type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study		
<input checked="" type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee		
4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:			
a Receive a severance payment or change-of-control payment?		4a	Yes
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?		4b	Yes
c Participate in, or receive payment from, an equity-based compensation arrangement?		4c	No
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:			
a The organization?		5a	No
b Any related organization?		5b	No
If "Yes," on line 5a or 5b, describe in Part III.			
6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:			
a The organization?		6a	No
b Any related organization?		6b	No
If "Yes," on line 6a or 6b, describe in Part III.			
7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III.		7	Yes
8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.		8	No
9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?		9	

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

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

See Additional Data Table**Schedule J (Form 990) 2018**

Part III Supplemental Information

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

Return Reference	Explanation
Form 990, Schedule J, Line 4(a)	<p>Three individuals reported in Schedule of the Form 990 received severance payments in calendar year 2018: 1 Senior manager of compliance and support in Social Services, Debbie Feliciano Gonzalez; 2 Senior Manager of Community Pride and Parent Engagement, Marilyn Joseph; 3 Director of Curriculum & Instruction, Muronji C Inman-McCraw. These severance amounts are reported in Schedule J, Part II, Column (b)(iii). In addition, both Ms. Gonzalez and Ms. Joseph received a severance payment that will not be paid out until calendar year 2019, the deferred severance amount has been reported in Schedule J, Part II, column (c). Form 990, Schedule J, Line 4(b) HARLEM CHILDREN'S ZONE HAS A SECTION 457(F) PLAN FOR CERTAIN ELIGIBLE EMPLOYEES. THIS GROWTH FUND PLAN ("THE PLAN") IS A TAX-DEFERRED EMPLOYEE SAVINGS PLAN THAT AIMS TO SERVE AS A RETENTION TOOL FOR DIRECTORS, OFFICERS, PRINCIPALS AND SENIOR STAFF. HARLEM CHILDREN'S ZONE MAKES AN ANNUAL DEPOSIT INTO THE PLAN THAT IS VALUED AT 150% OF THE INDIVIDUAL EMPLOYEE'S BONUS FOR THE CURRENT YEAR. THE EMPLOYEE'S ACCOUNT ACCUMULATES ASSOCIATED EARNINGS OR LOSSES ON THE INVESTMENT OF THE CONTRIBUTED AMOUNT IN THE NO MARGIN SENIOR GROWTH FUND, WHICH IS MANAGED BY DUQUESNE FAMILY OFFICE, AT NO COST TO HARLEM CHILDREN'S ZONE OR THE EMPLOYEE. THE AMOUNTS CONTRIBUTED BY HARLEM CHILDREN'S ZONE, ALONG WITH THE ASSOCIATED EARNINGS OR LOSSES, VEST AFTER FIVE YEARS FROM THE DATE OF THE INITIAL CONTRIBUTION AND WILL BE PAID TO ELIGIBLE EMPLOYEES WHEN VESTED. TERMINATED EMPLOYEES BECOME VESTED IMMEDIATELY AT THE DATE OF THEIR TERMINATION. EMPLOYEES WHO MEET THE AGE AND SERVICE PROVISIONS OF THE PLAN (AGE VESTING) ARE VESTED IMMEDIATELY UPON MEETING THOSE PROVISIONS. HOWEVER, IF A PARTICIPATING EMPLOYEE LEAVES VOLUNTARILY, INCLUDING RETIREMENT IF THEY HAVE NOT REACHED THE AGE VESTING PROVISIONS, THEN THEIR CUMULATIVE UNVESTED CONTRIBUTION MADE BY HCZ AND ASSOCIATED EARNINGS OR LOSSES ARE FORFEITED. FOR CALENDAR YEAR 2018, EMPLOYEES RECEIVED A PAYOUT OF DEFERRED COMPENSATION FROM THE PLAN AND THOSE AMOUNTS HAVE BEEN RECORDED IN SCHEDULE J, PART II, COLUMN (B)(II) AND, BECAUSE THAT PAYOUT REPRESENTS COMPENSATION THAT WAS REPORTED ON PREVIOUS FORMS 990 AS DEFERRED COMPENSATION IN SCHEDULE J, PART II, COLUMN (C), IT IS RECORDED IN SCHEDULE J, PART II, COLUMN (F). Geoffrey Canada and Mindy Miller, officers of HCZ, met the age and service provisions of the 457 (F) Plan (Age Vesting) for calendar year 2018 that resulted in immediate vesting of HCZ's Growth Fund contribution. This amount is included in Form 990, Schedule J, Column B (ii). The following individuals reported as Highly Compensated Employees on the organization's Form 990 received a payout of their accumulated earnings in the Harlem Children's Zone Growth Fund Plan in calendar year 2018: Marilyn Joseph - Manager, Comm. and Parent Engagement, and Muronji C. Inman-McCraw, Director of Curriculum and Instruction. Former Highly Compensated Employee, Debbie Feliciano Gonzalez - Senior Manager, Compliance and Support, also received such a payout in 2018. This Growth Fund payout is disclosed in Form 990, Schedule J, Part II, Column (b)(ii).</p>

Return Reference	Explanation
Schedule J, Line 7	HARLEM CHILDREN'S ZONE PROVIDES ANNUAL PERFORMANCE BONUSES TO ITS EMPLOYEES THE BONUSES ARE DETERMINED AND APPROVED BY THE CEO, ANNE WILLIAMS-ISOM BONUSES ARE APPROVED IN JUNE AND PAID OUT IN JULY (WHICH IS THE FOLLOWING FISCAL YEAR), HOWEVER, FOR 990 REPORTING PURPOSES, THE BONUS IS BOTH APPROVED AND PAID IN THE SAME CALENDAR YEAR (BUT DIFFERENT FISCAL YEARS), ACCORDINGLY, THE BONUSES ARE REPORTED AS CURRENT COMPENSATION IN COLUMN (B)(II)



Additional Data

Software ID:
Software Version:
EIN: 23-7112974
Name: HARLEM CHILDREN'S ZONE INC

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
Geoffrey Canada President	(i)	120,944	75,000	0	4,236	29,415	229,595	0
	(ii)	0	0	0	0	0	0	0
Mindy Miller VP of development	(i)	327,589	125,000		9,148	23,250	484,987	0
	(ii)	0	0	0	0	0	0	0
Anne Williams-Isom Chief Executive Officer	(i)	288,463	279,863		134,149	9,754	712,229	99,863
	(ii)	0	0	0	0	0	0	0
Betina Jean Louis director of evaluation	(i)	168,946	84,924		51,638	23,250	328,758	54,924
	(ii)	0	0	0	0	0	0	0
Conrad Pinnock Senior Advisor	(i)	192,264	104,897		52,444	9,754	359,359	74,897
	(ii)	0	0	0	0	0	0	0
Kwame Owusu-Kesse chief operating officer	(i)	240,902	40,000	0	68,859	24,739	374,500	0
	(ii)	0	0	0	0	0	0	0
James d Hutter Chief financial officer	(i)	323,182	40,000	0	69,149	25,315	457,646	0
	(ii)	0	0	0	0	0	0	0
Tracey Jenkins chief procurement officer	(i)	183,894	87,414	0	44,448	16,277	332,033	62,414
	(ii)	0	0	0	0	0	0	0
Debbie Feliciano-Gonzalez thru7 Senior Mgr, Compl & Support	(i)	88,715	350,682	82,045	31,398	12,008	564,848	288,182
	(ii)	0	0	0	0	0	0	0
MARILYN JOSEPH thru 092018 MANAGER, COMM & PARENT ENG	(i)	103,826	297,276	25,240	25,318	5,037	456,697	234,776
	(ii)	0	0	0	0	0	0	0
MURONJI C INMAN- MCCRAW thru 071 DIR , CURRICULUM & INSTRUCTION	(i)	66,795	248,173	19,231	5,340	23,747	363,286	185,673
	(ii)	0	0	0	0	0	0	0

Schedule L

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Transactions with Interested Persons

▶ Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.
▶ Attach to Form 990 or Form 990-EZ.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2018

Open to Public Inspection

Name of the organization
HARLEM CHILDREN'S ZONE INC

Employer identification number
23-7112974

Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only)
Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

1	(a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected?	
				Yes	No

2 Enter the amount of tax incurred by organization managers or disqualified persons during the year under section 4958 ▶ \$

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ▶ \$

Part II Loans to and/or From Interested Persons.
Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
			To	From			Yes	No	Yes	No	Yes	No
Total							▶ \$					

Part III Grants or Assistance Benefiting Interested Persons.
Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) Zachary Schreiber	board of trustee	72,398,233	See Part V		No
(2) zachary schreiber	board of trustee	1,724,692	see Part V		No
(3) Stanley Druckenmiller	chairman of board	46,238,283	see part V		No
(4) Eric Mandelblatt	board of trustee	43,928,818	See Part V		No
(5) Eric Mandelblatt	board of trustee	1,006,919	See Part V		No

Part V Supplemental Information

Provide additional information for responses to questions on Schedule L (see instructions)

Return Reference	Explanation
Schedule L, Part IV	ZACHARY SCHREIBER, BOARD OF TRUSTEES MEMBER, CO-MANAGES A LIMITED PARTNERSHIP INVESTMENT FUND IN WHICH HARLEM CHILDREN'S ZONE INVESTS THE VALUE OF THE ORGANIZATION'S INVESTMENT IN THIS LIMITED PARTNERSHIP INVESTMENT AS OF JULY 30, 2019 IS APPROXIMATELY \$72.4 MILLION NEITHER MR. SCHREIBER NOR THE FUND CHARGE HARLEM CHILDREN'S ZONE ANY MANAGEMENT, ADVISORY OR SUPERVISORY FEES FOR MANAGING THE ORGANIZATION'S PORTFOLIO. NEVERTHELESS, THE VALUE OF THESE CONTRIBUTED SERVICES IS \$1,724,692. STANLEY DRUCKENMILLER, CHAIRMAN OF THE BOARD, RUNS AN ALTERNATIVE INVESTMENT FUND IN WHICH HARLEM CHILDREN'S ZONE INVESTS THE VALUE OF THE ORGANIZATION'S INVESTMENT IN THIS FUND AS OF JUNE 30, 2019 IS \$46.2 MILLION NEITHER MR. DRUCKENMILLER NOR THE FUND CHARGE HARLEM CHILDREN'S ZONE ANY MANAGEMENT, ADVISORY OR SUPERVISORY FEES FOR MANAGING THE ORGANIZATION'S PORTFOLIO. ERIC MANDELBLATT, BOARD OF TRUSTEES MEMBER, RUNS AN ALTERNATIVE INVESTMENT FUND IN WHICH HARLEM CHILDREN'S ZONE INVESTS THE VALUE OF THE ORGANIZATION'S INVESTMENT IN THIS FUND AS OF JUNE 30, 2019 IS \$43.9 MILLION. HARLEM CHILDREN'S ZONE PAID MANAGEMENT AND PERFORMANCE FEES TOTALING \$1,006,919.

SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

►Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
► Attach to Form 990.
►Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2018

Open to Public Inspection

Name of the organization
HARLEM CHILDREN'S ZONE INC

Employer identification number
23-7112974

Part I

Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods	X		25,000	FMV
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	10	190,499	FMV
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► ()				
26 Other ► ()				
27 Other ► ()				
28 Other ► ()				

29

Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement

29

30a

During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?

Yes

No

30a

No

b If "Yes," describe the arrangement in Part II

31

Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?

Yes

No

31

32a

Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

Yes

No

32a

Yes

b If "Yes," describe in Part II

33

If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II

Yes

No

33

Part II **Supplemental Information.**

Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference	Explanation
Schedule M, Line 32A	To the extent that Harlem Children's Zone receives donations of securities, HCZ's third-party broker disposes of those securities, all proceeds therefrom are used to support the organization's charitable mission

efile GRAPHIC print - DO NOT PROCESS		As Filed Data -	DLN: 93493130004000
SCHEDULE O (Form 990 or 990-EZ)	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 <u>www.irs.gov/Form990</u> for the latest information.		OMB No 1545-0047
			2018
Department of the Treasury			Open to Public Inspection
Name of the organization HARLEM CHILDREN'S ZONE INC		Employer identification number 23-7112974	

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART III, LINE 1	<p>ORGANIZATION'S MISSION (CONTINUED) WE HAVE CREATED AN INTERLOCKING NETWORK OF PROGRAMS SO THAT OUR STUDENTS CAN SUCCESSFULLY GRADUATE FROM COLLEGE, ENTER THE HIGH-SKILLS JOB MARKET AND BECOME PRODUCTIVE, TAX-PAYING MEMBERS OF SOCIETY OUR GOAL IS TO ENSURE THAT OUR KIDS GROW UP TO BECOME WELL-ROUNDED, SUCCESSFUL, HEALTHY, CIVIC-MINDED CITIZENS HCZ'S UNIQUE APPROACH IS TO PROVIDE SUPPORTS FOR EACH STAGE OF A CHILD'S DEVELOPMENT AND ADDRESS ANY BARRIER TO HIS OR HER ACADEMIC SUCCESS OUR EARLY-CHILDHOOD PROGRAMS HELP BUILD A STRONG FOUNDATION FOR LATER LEARNING OUR TWO K THROUGH 12 CHARTER SCHOOLS ARE STAFFED WITH DEDICATED, QUALITY TEACHERS AND SPECIALISTS TO ENSURE OUR STUDENTS STAY ON TRACK FOR COLLEGE SUCCESS WE ALSO OFFER AFTER-SCHOOL PROGRAMS FOR ELEMENTARY, MIDDLE-SCHOOL AND HIGH-SCHOOL STUDENTS WHO LIVE IN THE CHILDREN'S ZONE AND ATTEND TRADITIONAL PUBLIC SCHOOLS - WORKING CLOSELY WITH THEM, THEIR TEACHERS AND PARENTS TO MAKE SURE THEY GRADUATE ON TIME AND ARE READY FOR COLLEGE WHETHER STUDENTS ATTEND LOCAL COLLEGES OR ARE OUT-OF-TOWN, OUR Center for Higher Education and Career Support (CHECS) HELPS THEM WITH EVERYTHING FROM TIME MANAGEMENT TO TUTORING TO GETTING PAID INTERNSHIPS, WHICH ARE SO IMPORTANT TO EARNING EXTRA INCOME AND GAINING INVALUABLE WORK EXPERIENCE WE HAVE THE SAME EXPECTATIONS OF SUCCESS FOR THE CHILDREN WE SERVE FROM TRADITIONAL PUBLIC SCHOOLS AS WE DO FROM OUR CHARTER SCHOOLS THOUGH OUR PROGRAMS WORK WITH THOUSANDS OF CHILDREN, WE MAKE SURE EACH CHILD GETS HIS OR HER SPECIFIC NEEDS MET AND IS FOCUSED ON GRADUATING FROM COLLEGE CHILDREN FROM SIXTH GRADE AND UP ARE ASSIGNED AN ADVOCATE WHO CREATES AN ONGOING ASSESSMENT OF WHAT SERVICES ARE NECESSARY AND MAKES SURE THE STUDENT GETS THEM, WHETHER IT IS RELATED TO HEALTH CARE, A CHAOTIC HOME LIFE OR AN ACADEMIC STUMBLING BLOCK IN ADDITION TO OUR DIRECT WORK WITH CHILDREN, WE HAVE PROGRAMS AIMED AT STRENGTHENING FAMILIES AND THE VERY FABRIC OF THE COMMUNITY - TRANSFORMING THE NEIGHBORHOOD FROM ONE Mired IN POVERTY TO ONE OF ECONOMIC STABILITY AND A POSITIVE CULTURE SINCE WE ARE CONCERNED WITH THE ENTIRE CHILD, WE ALSO HAVE DEVELOPED PROGRAMS TO IMPROVE THE HEALTH OF OUR CHILDREN BECAUSE OBESITY THREATENS THE HEALTH OF SO MANY OF OUR CHILDREN AND ADULTS, WE CREATED AN ORGANIZATION-WIDE PROGRAM CALLED HEALTHY HARLEM WE CREATED A DATABASE OF THE HEIGHT, WEIGHT AND BODY MASS INDEX OF ALL PARTICIPANTS TO TRACK THEIR PROGRESS THE PROGRAM OFFERS ONE HOUR A DAY OF EXERCISE AND ONE NUTRITION EDUCATION CLASS EACH WEEK TO THOUSANDS OF OUR STUDENTS CHILDREN WITH THE MOST SEVERE OBESITY PROBLEMS RECEIVE MORE INDIVIDUALIZED ATTENTION HEALTHY HARLEM ALSO WORKS WITH PARENTS, OFFERING EXERCISE CLASSES, HEALTHY COOKING CLASSES AND A SUBSIDIZED FARMERS MARKET WE HAVE BECOME A NATIONAL MODEL FOR FIGHTING POVERTY AND EDUCATING AT-RISK YOUTH HUNDREDS OF DELEGATIONS FROM AROUND THE WORLD HAVE VISITED US OR TAKEN WORKSHOPS TO LEARN ABOUT WHAT WE DO PRESIDENT BARACK OBAMA CREATED THE</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART III, LINE 1	<p>PROMISE NEIGHBORHOODS PROGRAM TO USE FEDERAL MATCHING GRANTS TO REPLICATE OUR COMPREHENSIVE MODEL IN OTHER POOR COMMUNITIES ACROSS THE COUNTRY AND WE HAVE PROVIDED ADVICE TO THESE COMMUNITIES FORM 990, PART IV LINE 4 - LOBBYING DISCLOSURE HARLEM CHILDREN'S ZONE DOES NOT UNDERTAKE ANY LOBBYING ACTIVITIES HCZ PRESIDENT GEOFFREY CANADA IS A VERY PROMINENT INDIVIDUAL IN THE COMMUNITY AND HE MAY UNDERTAKE ADVOCACY EFFORTS THAT HAVE ANCILLARY BENEFITS TO HARLEM CHILDREN'S ZONE MR CANADA'S ADVOCACY EFFORTS, TO THE EXTENT THERE ARE ANY, ARE UNDERTAKEN AT HIS OWN BEHEST AND ARE FUNDED FROM HIS OWN PERSONAL FINANCES, HARLEM CHILDREN'S ZONE DOES NOT SUBSIDIZE THOSE EFFORTS FORM 990, PART VI POLICIES LINE 11 - PROCESSES USED TO REVIEW FORM 990 THE FORM 990 WAS PREPARED BY A NATIONALLY RENOWNED ACCOUNTING FIRM IN CONJUNCTION WITH THE ORGANIZATION'S FINANCE DEPARTMENT A COPY OF THE DRAFT FORM 990 WAS CIRCULATED TO THE AUDIT COMMITTEE FOR DISCUSSION AND COMMENT EACH AUDIT COMMITTEE MEMBER WAS PROVIDED AMPLE OPPORTUNITY TO COMMENT ON THE INFORMATION CONTAINED IN THE 990 PRIOR TO ITS FILING WITH THE INTERNAL REVENUE SERVICE THE AUDIT COMMITTEE WILL SUMMARIZE ITS FINDING ON THE FORM 990 TO THE FULL BOARD OF DIRECTORS LINE 12 - ENFORCEMENT AND MONITORING OF CONFLICT OF INTEREST POLICY ALL EMPLOYEES ARE EXPECTED TO USE HONESTY, GOOD JUDGEMENT AND HIGH ETHICAL STANDARDS IN ALL PROFESSIONAL DEALINGS ALL EMPLOYEES MUST AVOID ANY ACTIONS THAT COULD CREATE A CONFLICT OF INTEREST OR THE APPEARANCE OF SUCH A CONFLICT OR REFLECT UNFAVORABLY ON THEM OR ON HARLEM CHILDREN'S ZONE AN EMPLOYEE MUST DISCLOSE IF SHE/HE OR AN IMMEDIATE FAMILY MEMBER HAS ANY POTENTIAL CONFLICT OF INTEREST SUCH AS A RELATIONSHIP TO A THIRD PARTY VENDOR WHO SEEKS OR HAS A BUSINESS RELATIONSHIP WITH HARLEM CHILDREN'S ZONE AN EMPLOYEE'S VIOLATION OF THIS POLICY, ESPECIALLY A FAILURE TO REPRESENT ACCURATELY HIS OR HER CONNECTION OR ACTION ON BEHALF OF HARLEM CHILDREN'S ZONE AND A THIRD PARTY WILL CONSTITUTE GROUNDS FOR DISCIPLINARY ACTION, UP TO AND INCLUDING TERMINATION OF EMPLOYMENT LINE 15 - PROCESS FOR DETERMINING COMPENSATION THE ORGANIZATION UNDERTAKES A THOROUGH PROCESS TO ENSURE THAT THE EXECUTIVE COMPENSATION IT PAYS TO ITS TOP MANAGEMENT OFFICIAL AND ALL OF ITS OFFICERS AND KEY EMPLOYEES IS REASONABLE GIVEN THE MARKET IN WHICH THE ORGANIZATION OPERATES THE BOARD UTILIZES COMPARABILITY AND BENCHMARKING SURVEYS TO ENSURE THAT THE ORGANIZATION COMPENSATES ITS EXECUTIVES COMMENSURATE WITH THE MARKET</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI disclosures	LINE 19 - AVAILABILITY OF DOCUMENTS TO THE PUBLIC THE ORGANIZATION MAKES ITS FORM 990 AVAILABLE TO THE PUBLIC BY RETAINING A COPY AT ITS PLACE OF BUSINESS THE FORM 990 IS LIKEWISE PUBLISHED ON THE INTERNET AT WWW GUIDESTAR ORG THE ORGANIZATION POSTS ITS AUDITED FINANCIAL STATEMENTS AND FORM 990 ON ITS WEBSITE, BUT ITS GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE AVAILABLE UPON REQUEST AND PROVIDED AT MANAGEMENT'S DISCRETION

990 Schedule O, Supplemental Information

Return Reference	Explanation
form 990, part VIII, line 7	The Harlem Children's Zone invests in non-exchange traded alternative investments (as identified in Schedule D, Part VII) Since these investments are not traded on traditional investment markets, the organization relies on its investment brokers to identify its gains and losses during the fiscal year Historically, the organization's investment brokers have reported all gains as unrealized gains on investments and not segregated any realized gains Accordingly, Harlem Children's Zone is unable to identify realized gains for reporting on Form 990, Part VIII, Line 7

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

2018

Open to Public Inspection

Name of the organization
HARLEM CHILDREN'S ZONE INC

Employer identification number
23-7112974

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.					
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) Rheedlen 125th Street LLC 35 EAST 125TH STREET New York, NY 10035	Hold property	NY	0	0	HCZ
(2) HCZ Promise LLC 35 east 125th Street New York, NY 10035 27-2392634	hold property	NY	0	0	HCZ
(3) 168 Titicus Rd LLC 168 Titicus Road North Salem, NY 10560	Hold Property	NY	0	0	HCZ

Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.							
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1)HCZ PROMISE ACADEMY CHARTER SCHOOL 245 W 129th Street NEW YORK, NY 10027 76-0756768	EDUCATION	NY	501(c)(3)	2	NA		No
(2)HCZ PROMISE ACADEMY CHARTER SCHOOL II 35 EAST 125TH STREET NEW YORK, NY 10035 34-2049530	EDUCATION	NY	501(c)(3)	2	NA		No

Part III Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Section 512(b) (13) controlled entity?	
								Yes	No

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a Receipt of (i) interest, (ii)annuities, (iii) royalties, or(iv) rent from a controlled entity

b Gift, grant, or capital contribution to related organization(s)

c Gift, grant, or capital contribution from related organization(s)

d Loans or loan guarantees to or for related organization(s)

e Loans or loan guarantees by related organization(s)

f Dividends from related organization(s)

g Sale of assets to related organization(s)

h Purchase of assets from related organization(s)

i Exchange of assets with related organization(s)

j Lease of facilities, equipment, or other assets to related organization(s)

k Lease of facilities, equipment, or other assets from related organization(s)

l Performance of services or membership or fundraising solicitations for related organization(s)

m Performance of services or membership or fundraising solicitations by related organization(s)

n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

o Sharing of paid employees with related organization(s)

p Reimbursement paid to related organization(s) for expenses

q Reimbursement paid by related organization(s) for expenses

r Other transfer of cash or property to related organization(s)

s Other transfer of cash or property from related organization(s)

Yes

No

1a Yes

1b Yes

1c

1d

1e

1f

1g

1h

1i

1j Yes

1k

1l Yes

1m

1n Yes

1o Yes

1p Yes

1q Yes

1r Yes

1s Yes

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved

Schedule R (Form 990) 2018

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

[illegible]

Part VII **Supplemental Information**

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference	Explanation
Schedule R, Related Party Transactions	PURSUANT TO THE TERMS OF COMMITMENT LETTERS BETWEEN HCZ AND THE PROMISE ACADEMY CHARTER SCHOOLS, ("PACS"), HCZ, AS THE PACS'S INSTITUTIONAL PARTNER, COMMITTED TO PROVIDE THE PACS CERTAIN SERVICES AT NO COST. PACS ARE TWO HIGH-QUALITY CHARTER SCHOOLS AFFILIATED WITH THE ORGANIZATION. THESE SERVICES INCLUDE FINANCIAL MANAGEMENT, SOCIAL, TECHNOLOGY, FUNDRAISING, PUBLIC RELATIONS, AND TEACHING ASSISTANCE SERVICES. BOTH CHARTER SCHOOLS HAVE RENEWED THEIR COMMITMENT LETTERS WITH HARLEM CHILDREN'S ZONE FOR A FIVE-YEAR PERIOD THAT RUNS THROUGH JUNE 2019. HCZ'S CONTRIBUTED SPACE AND SERVICES PROVIDED TO THE PACS FOR THE YEAR ENDED JUNE 30, 2019 AMOUNTED TO \$2,682,717. HARLEM CHILDREN'S ZONE INCLUDES WITHIN ITS SECTION 457(F) AND TEACHERS SUPPLEMENTAL BONUS PLAN, CERTAIN EMPLOYEES OF BOTH CHARTER SCHOOLS AND, FOR THE YEAR ENDED JUNE 30, 2019, PROVIDED THE CHARTER SCHOOLS A SUBSIDY OF \$2,312,577 TO COVER THIS COST.

