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Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

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

OMB No. 1545-0047

2019

Open to Public Inspection

A For the 2019 calendar year, or tax year beginning 04-01-2019 , and ending 03-31-2020

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

C Name of organization
NEW YORK ROAD RUNNERS INC
C/O FINANCE DEPARTMENT

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) | Room/suite
156 WEST 56TH STREET

City or town, state or province, country, and ZIP or foreign postal code
NEW YORK, NY 100193800

D Employer identification number
13-2949483

E Telephone number
(646) 758-9656

G Gross receipts $ 142,322,842

F Name and address of principal officer:
JEANMARIE COONEY
156 WEST 56TH STREET
NEW YORK, NY 100193800

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.NYRR.ORG

K Form of organization: ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation: 1979

M State of legal domicile: NY

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities:
NEW YORK ROAD RUNNERS (NYRR) IS A NOT-FOR PROFIT ORGANIZATION ENGAGED IN ACTIVITIES THAT PROMOTE THE HEALTH, FITNESS AND WELL-BEING OF ADULTS AND CHILDREN OF ALL ABILITIES THROUGH YEAR-ROUND PHYSICAL ACTIVITY IN THE FORM OF RUNNING EVENTS, TRAINING AND FREE YOUTH AND COMMUNITY PROGRAMS, SERVING NEARLY 660,000 IN NEW YORK CITY, THE US AND AROUND THE WORLD.

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

3	Number of voting members of the governing body (Part VI, line 1a)	3	26
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	25
5	Total number of individuals employed in calendar year 2019 (Part V, line 2a)	5	1,030
6	Total number of volunteers (estimate if necessary)	6	26,568
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	269,937
b	Net unrelated business taxable income from Form 990-T, line 39	7b	0

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	45,648,672	48,864,383
	9	Program service revenue (Part VIII, line 2g)	50,035,918	46,753,689
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	12,460,700	2,904,378
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	4,971,390	6,328,121
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	113,116,680	104,850,571
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	1,657,356	3,016,694
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	29,775,443	30,467,089
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶876,090		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	68,533,435	69,567,350
	18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	99,966,234	103,051,133
	19	Revenue less expenses. Subtract line 18 from line 12	13,150,446	1,799,438
			Beginning of Current Year	**End of Year**
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	104,968,923	107,156,497
	21	Total liabilities (Part X, line 26)	55,214,484	62,175,136
	22	Net assets or fund balances. Subtract line 21 from line 20	49,754,439	44,981,361

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

****** 2021-02-10
Signature of officer Date

JEANMARIE COONEY SENIOR VP OF FINANCE
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
		2021-02-10		P00543209

Firm's name ▶ PKF O'CONNOR DAVIES LLP | Firm's EIN ▶ 27-1728945

Firm's address ▶ 665 FIFTH AVENUE NEW YORK, NY 10022 | Phone no. (212) 286-2600

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

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

BY FOSTERING A LIFE-LONG COMMITMENT TO RUNNING & FITNESS, NEW YORK ROAD RUNNERS (NYRR) WORKS TO ENHANCE THE LIVES OF PEOPLE OF ALL AGES AND ABILITIES THROUGH POSITIVE PHYSICAL ACTIVITY AND COMMUNITY ENGAGEMENT.

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 $ 46,643,811 including grants of $ 115,000) (Revenue $ 32,746,603)

See Additional Data

4b (Code:) (Expenses $ 30,600,928 including grants of $ 271,572) (Revenue $ 12,822,884)

See Additional Data

4c (Code:) (Expenses $ 13,470,367 including grants of $ 2,609,121) (Revenue $ 379,150)

See Additional Data

(Code:) (Expenses $ 1,000,993 including grants of $ 21,000) (Revenue $ 805,052)

OTHER PROGRAM SERVICES INCLUDE PUBLICATIONS, CLASSES AND MERCHANDISING.

4d Other program services (Describe in Schedule O.)

(Expenses $ 1,000,993 including grants of $ 21,000) (Revenue $ 805,052)

4e **Total program service expenses** ▶ 91,716,099

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	Yes	
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		No
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		No
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	Yes	
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		No
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		No
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18	Yes	
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		No
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	

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
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	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a*	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? *If "Yes," complete Schedule L,* Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L,* Part I	25b		No
26	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? *If "Yes," complete Schedule L, Part II*	26		No
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? *If "Yes," complete Schedule L,*Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? *If "Yes," complete Schedule L, Part IV*	28a		No
b	A family member of any individual described in line 28a? *If "Yes," complete Schedule L, Part IV*	28b		No
c	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? *If "Yes," complete Schedule L, Part IV*	28c		No
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		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? *If "Yes," complete Schedule R, Part I*	33		No
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1*	34		No
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)? *If "Yes," complete Schedule R, Part V, line 2*	35b		
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 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 Compliance

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

					Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	268			
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		

Part V **Statements Regarding Other IRS Filings and Tax Compliance** *(continued)*

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** 1,030			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? **Note.** If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	**2b**	Yes	
3a	Did the organization have unrelated business gross income of $1,000 or more during the year? . . .	**3a**	Yes	
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**	Yes	
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**		
9	**Sponsoring organizations maintaining donor advised funds.**			
a	Did the sponsoring organization make any taxable distributions under section 4966?	**9a**		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? . . .	**9b**		
10	**Section 501(c)(7) organizations.** Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12 . . . **10a**			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities **10b**			
11	**Section 501(c)(12) organizations.** Enter:			
a	Gross income from members or shareholders **11a**			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) **11b**			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?	**12a**		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year. **12b**			
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**			
a	Is the organization licensed to issue qualified health plans in more than one state? . . . . . **Note.** See the instructions for additional information the organization must report on Schedule O.	**13a**		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans **13b**			
c	Enter the amount of reserves on hand **13c**			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	**14a**		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** 26			
	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** 25			
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**	Yes	
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**	Yes	

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed▶
NJ , NY , CA , MA , PA , IL , AL , AR , FL , GA , HI , KS , KY , ME , MD , MI , MN , NH , NC , ND , OK , OR , RI , SC , TN , UT , VA , WV , WI , MS , NM

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:
▶JEANMARIE COONEY 156 WEST 56TH STREET NEW YORK, NY 100193800 (646) 758-9739

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than $100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, 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.

See instructions for the order in which to list the persons above.

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

(A) Name and title	**(B)** Average hours per week (list any hours for related organizations below dotted line)	**(C)** Position (do not check more than one box, unless person is both an officer and a director/trustee)						**(D)** Reportable compensation from the organization (W-2/1099-MISC)	**(E)** Reportable compensation from related organizations (W-2/1099-MISC)	**(F)** Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
See Additional Data Table										

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee): Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(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
See Additional Data Table										
1b Sub-Total . . . . . ▶										
c Total from continuation sheets to Part VII, Section A . . . . ▶										
d Total (add lines 1b and 1c) . . . . . ▶								2,785,770	0	363,785

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 ▶ 59

			Yes	No
3	Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	**3**	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? *If "Yes," complete Schedule J for such individual*	**4**	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization?*If "Yes," complete Schedule J for such person*	**5**		No

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
JRM CONSTRUCTION MANAGEMENT 242 WEST 36TH STREET NEW YORK, NY 10018	OFFICE SPACE BUILD OUT	5,692,918
CITY OF NEW YORK DEPARTMENT OF FINANCE 253 BROADWAY 6TH FLOOR NEW YORK, NY 10007	NYPD TRAFFIC FEES	3,183,302
TRANS WORLD INTERNATIONAL INC PO BOX 17470 PALATINE, IL 600557470	PRODUCTION OF NYC MARATHON BROADCAST	2,674,740
STRAN & COMPANY INC 2 HERITAGE DRIVE 600 QUINCY, MA 02171	YOUTH INCENTIVES AND RACE PRODUCTS	1,911,686
ICREON TECH INC 597 FIFTH AVENUE 12TH FLOOR NEW YORK, NY 10017	CONSULTING AND TECH DEVELOPMENT	1,667,505

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 ▶ 102

Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts						
1a Federated campaigns	1a					
b Membership dues	1b	2,567,145				
c Fundraising events	1c	1,280,062				
d Related organizations	1d					
e Government grants (contributions)	1e	397,000				
f All other contributions, gifts, grants, and similar amounts not included above	1f	44,620,176				
g Noncash contributions included in lines 1a - 1f: $	1g	8,929,677				
h **Total.** Add lines 1a-1f ▶			48,864,383			
Program Service Revenue	Business Code					
2a EVENT ENTRY REVENUE	900099		42,267,464	42,267,464		
b MARATHON AUXILIARY REVENUE	900099		3,698,114	3,698,114		
c CLASSES REVENUE	900099		718,172	718,172		
d CLUB NIGHT REVENUE	900099		21,925	21,925		
e						
f All other program service revenue.			48,014	48,014		
g **Total.** Add lines 2a–2f. ▶	46,753,689					
Other Revenue						
3 Investment income (including dividends, interest, and other similar amounts) ▶			1,613,616			1,613,616
4 Income from investment of tax-exempt bond proceeds ▶						
5 Royalties ▶			2,816,219			2,816,219
	(i) Real	(ii) Personal				
6a Gross rents 6a	1,810,500					
b Less: rental expenses 6b	214,818					
c Rental income or (loss) 6c	1,595,682					
d Net rental income or (loss) ▶			1,595,682			1,595,682
	(i) Securities	(ii) Other				
7a Gross amount from sales of assets other than inventory 7a	38,291,340					
b Less: cost or other basis and sales expenses 7b	37,000,578					
c Gain or (loss) 7c	1,290,762					
d Net gain or (loss) ▶			1,290,762			1,290,762
8a Gross income from fundraising events (not including $ 1,280,062 of contributions reported on line 1c). See Part IV, line 18	8a	283,300				
b Less: direct expenses	8b	256,875				
c Net income or (loss) from fundraising events ▶			26,425			26,425
9a Gross income from gaming activities. See Part IV, line 19	9a					
b Less: direct expenses	9b					
c Net income or (loss) from gaming activities ▶						
10a Gross sales of inventory, less returns and allowances	10a					
b Less: cost of goods sold	10b					
c Net income or (loss) from sales of inventory ▶						
Miscellaneous Revenue	Business Code					
11a INSURANCE PROCEEDS	900099		1,500,000			1,500,000
b SPONSORSHIP INCOME	900099		260,241		260,241	
c REVERSAL OF RACE COUPON LIABILITY	900099		119,858			119,858
d All other revenue			9,696		9,696	
e **Total.** Add lines 11a–11d ▶			1,889,795			
12 **Total revenue.** See instructions ▶			104,850,571	46,753,689	269,937	8,962,562

Part IX Statement of Functional Expenses

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

Check if Schedule O contains a response or note to any line in this Part IX . . . . . ☑

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	2,702,559	2,702,559		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	314,135	314,135		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	1,494,931	382,836	1,112,095	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	23,704,350	19,637,550	3,555,653	511,147
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	1,044,260	835,408	156,639	52,213
9 Other employee benefits	2,268,196	1,882,603	340,229	45,364
10 Payroll taxes	1,955,352	1,622,942	293,303	39,107
11 Fees for services (non-employees):				
a Management	136,012	54,405	81,607	
b Legal	460,487	138,146	322,341	
c Accounting	663,626	265,450	398,176	
d Lobbying	78,055			78,055
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	169,687		169,687	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	736,205	388,535	347,670	
12 Advertising and promotion	1,616,540	1,603,365	2,080	11,095
13 Office expenses	1,220,353	845,344	365,225	9,784
14 Information technology	4,977,474	3,772,413	1,193,566	11,495
15 Royalties				
16 Occupancy	4,359,301	3,861,883	438,898	58,520
17 Travel	523,083	473,394	44,345	5,344
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	170,874	153,207	17,667	
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	3,633,536	3,090,307	519,675	23,554
23 Insurance	1,908,351	1,747,479	141,946	18,926
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 NYC MARATHON	28,046,034	27,762,769	280,460	2,805
b WEEKLY EVENTS	16,635,048	16,423,000	207,792	4,256
c YOUTH & COMMUNITY SERV.	3,617,800	3,561,204	54,250	2,346
d STAFF EXPENSE (TRAINING	604,040	186,321	415,640	2,079
e All other expenses	10,844	10,844		
25 **Total functional expenses.** Add lines 1 through 24e	103,051,133	91,716,099	10,458,944	876,090
26 **Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if following SOP 98-2 (ASC 958-720).				

Part X Balance Sheet

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

				(A) Beginning of year		(B) End of year
Assets	1	Cash–non-interest-bearing		11,685,201	1	12,334,215
	2	Savings and temporary cash investments		2,247,727	2	1,615,109
	3	Pledges and grants receivable, net		445,723	3	623,392
	4	Accounts receivable, net		8,066,032	4	11,521,786
	5	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons			5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		2,469,458	9	2,012,055
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 28,389,973			
	b	Less: accumulated depreciation	10b 11,667,239	14,115,475	10c	16,722,734
	11	Investments—publicly traded securities		59,393,369	11	56,796,203
	12	Investments—other securities. See Part IV, line 11		6,545,938	12	5,531,003
	13	Investments—program-related. See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets. See Part IV, line 11			15	
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)		104,968,923	16	107,156,497
Liabilities	17	Accounts payable and accrued expenses		16,686,039	17	19,410,527
	18	Grants payable			18	
	19	Deferred revenue		38,528,445	19	42,764,609
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D			21	
	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons			22	
	23	Secured mortgages and notes payable to unrelated third parties			23	
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D			25	
	26	**Total liabilities.** Add lines 17 through 25		55,214,484	26	62,175,136
Net Assets or Fund Balances		**Organizations that follow FASB ASC 958, check here ▶ ☑ and complete lines 27, 28, 32, and 33.**				
	27	Net assets without donor restrictions		48,504,794	27	43,578,184
	28	Net assets with donor restrictions		1,249,645	28	1,403,177
		Organizations that do not follow FASB ASC 958, check here ▶ ☐ and complete lines 29 through 33.				
	29	Capital stock or trust principal, or current funds			29	
	30	Paid-in or capital surplus, or land, building or equipment fund			30	
	31	Retained earnings, endowment, accumulated income, or other funds			31	
	32	Total net assets or fund balances		49,754,439	32	44,981,361
	33	Total liabilities and net assets/fund balances		104,968,923	33	107,156,497

Part XI Reconcilliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	104,850,571
2	Total expenses (must equal Part IX, column (A), line 25)	2	103,051,133
3	Revenue less expenses. Subtract line 2 from line 1	3	1,799,438
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	49,754,439
5	Net unrealized gains (losses) on investments	5	-6,572,516
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	0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	44,981,361

Part XII Financial Statements and Reporting

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

			Yes	No
1	Accounting method used to prepare the Form 990: ☐ Cash ☑ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No
	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?	2b	Yes	
	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?	2c	Yes	
	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?	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b		

Additional Data

Software ID:

Software Version:

EIN: 13-2949483

Name: NEW YORK ROAD RUNNERS INC
C/O FINANCE DEPARTMENT

Form 990 (2019)

Form 990, Part III, Line 4a:

MARATHON:IN FISCAL YEAR 2020, NEW YORK ROAD RUNNERS (NYRR) HELD THE 49TH RUNNING OF THE NEW YORK CITY MARATHON, WHICH WAS AGAIN THE LARGEST MARATHON IN THE WORLD. APPROXIMATELY 144,000 PEOPLE FROM OVER 150 COUNTRIES APPLIED TO PARTICIPATE WITH AROUND 53,000 PEOPLE FINISHING THE RACE. THE MARATHON WAS HELD ON NOVEMBER 3, 2019.

Form 990, Part III, Line 4b:

OTHER COMMUNITY EVENTS AND PROGRAMS: IN FISCAL YEAR 2020, 247,000 ADULTS AND YOUNG ADULTS UNDER 18 PARTICIPATED IN APPROXIMATELY 50 IN-PERSON NEW YORK ROAD RUNNERS (NYRR) EVENTS, INCLUDING A WIDE VARIETY OF RACES OF VARYING DISTANCES FOR ADULT AND YOUNG ADULT RUNNERS THROUGHOUT THE FIVE BOROUGHS OF NEW YORK CITY. EVENTS INCLUDED FOUR OF THE FIVE BOROUGH SERIES (BRONX 10-MILE, STATEN ISLAND HALF, QUEENS 10K AND BROOKLYN HALF EXCLUDING NEW YORK CITY HALF WHICH WAS CANCELLED DUE TO THE PANDEMIC), AS WELL AS WEEKLY AND NYRR HERITAGE RACES. AN ADDITIONAL 83,000 ADULTS AND YOUNG ADULTS PARTICIPATED IN VIRTUAL RACES ONLINE FROM ALL AROUND THE WORLD.

Form 990, Part III, Line 4c:

YOUTH AND COMMUNITY PROGRAM SERVICES:THE NYRR YOUTH AND COMMUNITY SERVICES PROVIDED FREE RUNNING PROGRAMS AND INITIATIVES TO 249,000 STUDENTS FOSTERING PHYSICAL FITNESS, CHARACTER DEVELOPMENT, AND PERSONAL ACHIEVEMENT. FEATURING THE RISING NEW YORK ROAD RUNNERS AND RUN FOR THE FUTURE, NYRR'S YOUTH RUNNING EFFORTS SERVED CHILDREN IN HUNDREDS OF UNDERSERVED SCHOOLS AND COMMUNITY CENTERS THROUGHOUT NEW YORK CITY AND THE NATION. NYRR COMMUNITY SERVICES ALSO PROVIDED CRITICAL HEALTH AND WELLNESS PROGRAMS TO SENIORS, ADULTS AND CHILDREN IN ALL FIVE BOROUGHS OF NEW YORK CITY.

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			
MICHAEL CAPIRASO PRESIDENT/CEO/BOARD MEMBER	40.00	X		X				569,566	0	39,200
JAMES HEIM SVP/TECH. DIRECTOR EV DEV & OPS	40.00				X			320,041	0	49,369
LINDA FRANKEN SVP OF FINANCE/ASST. TR. (THRU 1/20)	40.00			X				306,894	0	44,122
JAMES GROOMS SVP OF LEGAL/ASST. SECRETARY	40.00			X				316,830	0	32,630
RACHEL PRATT SVP OF YOUTH & COMM. SVCS	40.00					X		257,406	0	46,210
CHRISTOPHER WEILLER VP MEDIA, PR & PRO ATHLETICS	40.00					X		247,667	0	42,601
JEFFERY CARNEVALE VP INFORMATION TECHNOLOGY	40.00					X		237,670	0	35,793
CHRISTINE BURKE VP MARKETING & DIGITAL	40.00					X		241,447	0	31,295
MICHAEL RODGERS VP BUS DEV/STRATEGIC PARTNERSHIPS	40.00					X		223,718	0	25,266
PETER CIACCIA FORMER PRESIDENT OF EVENT & RD	0.00						X	64,531	0	17,299

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			
JEANMARIE COONEY SVP OF FINANCE/ASST. TR. AS OF 3/20	40.00			X				0	0	0
GEORGE HIRSCH CHAIRMAN/BOARD MEMBER	10.00	X		X				0	0	0
MICHAEL FRANKFURT SECRETARY/BOARD MEMBER	3.00	X		X				0	0	0
ANNE BEANE RUDMAN ASSISTANT SECRETARY/BOARD MEMBER	3.00	X		X				0	0	0
THOMAS LABRECQUE JR TREASURER/BOARD MEMBER	3.00	X		X				0	0	0
PRISCILLA ALMODOVAR BOARD MEMBER	1.00	X						0	0	0
DEAN BELL BOARD MEMBER	1.00	X						0	0	0
MARK BILSKY BOARD MEMBER	1.00	X						0	0	0
RICHARD BYRNE BOARD MEMBER (THRU 7/2019)	1.00	X						0	0	0
STACY CREAMER BOARD MEMBER	1.00	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (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			
RAUL DAMAS BOARD MEMBER (THRU 7/2019)	1.00	X						0	0	0
CHRISTOPHER FOSTER BOARD MEMBER	1.00	X						0	0	0
JASON GOREVIC BOARD MEMBER	1.00	X						0	0	0
MICHAEL GROSS BOARD MEMBER (THRU 7/2019)	1.00	X						0	0	0
JED LASKOWITZ BOARD MEMBER	1.00	X						0	0	0
CATHY LASRY BOARD MEMBER	1.00	X						0	0	0
MARK LEVENFUS BOARD MEMBER	1.00	X						0	0	0
NNENNA LYNCH BOARD MEMBER	1.00	X						0	0	0
NNAMDI OKIKE BOARD MEMBER	1.00	X						0	0	0
STEVE PAMON BOARD MEMBER (THRU 7/2019)	1.00	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (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			
JOHN ROBERTS BOARD MEMBER	1.00	X						0	0	0
AMBER SABATHIA BOARD MEMBER	1.00	X						0	0	0
DANIELLE SERED BOARD MEMBER	1.00	X						0	0	0
EU-GENE SUNG BOARD MEMBER	1.00	X						0	0	0
CIDRA SEBASTIEN BOARD MEMBER	1.00	X						0	0	0
JUDY TURCHIN BOARD MEMBER	1.00	X						0	0	0
JURA URO BOARD MEMBER	1.00	X						0	0	0
ALICE VILMA BOARD MEMBER	1.00	X						0	0	0
DAVID WEIL BOARD MEMBER	1.00	X						0	0	0
JULIE WOOD BOARD MEMBER	1.00	X						0	0	0

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 instructions and the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
NEW YORK ROAD RUNNERS INC
C/O FINANCE DEPARTMENT

Employer identification number
13-2949483

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? Yes	(iv) No	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
Total						

Part II **Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization failed to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.") . .	30,018,779	36,258,442	44,405,173	45,648,672	48,864,383	205,195,449
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge..						
4 **Total.** Add lines 1 through 3	30,018,779	36,258,442	44,405,173	45,648,672	48,864,383	205,195,449
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). .						86,807,422
6 **Public support.** Subtract line 5 from line 4.						118,388,027

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7 Amounts from line 4. .	30,018,779	36,258,442	44,405,173	45,648,672	48,864,383	205,195,449
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . .	5,183,055	4,796,187	5,784,260	6,184,742	6,240,335	28,188,579
9 Net income from unrelated business activities, whether or not the business is regularly carried on . .						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). .		1,853,185	500,000		1,619,858	3,973,043
11 **Total support.** Add lines 7 through 10						237,357,071

12 Gross receipts from related activities, etc. (see instructions) **12** 230,624,249

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

Section C. Computation of Public Support Percentage

14 Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f)) . . . . . **14** 49.880 %

15 Public support percentage for 2018 Schedule A, Part II, line 14 . . . . . **15** 49.800 %

16a **33 1/3% support test—2019.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . . ▶ ☑

b **33 1/3% support test—2018.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . . ▶ ☐

17a **10%-facts-and-circumstances test—2019.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . . ▶ ☐

b **10%-facts-and-circumstances test—2018.** 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 . . . . . ▶ ☐

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions . . . . . ▶ ☐

Part III **Support Schedule for Organizations Described in 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) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(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) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(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 2019 (line 8, column (f) divided by line 13, column (f))	15	
16	Public support percentage from 2018 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2019** (line 10c, column (f) divided by line 13, column (f))	17	
18	Investment income percentage from **2018** Schedule A, Part III, line 17	18	

19a **33 1/3% support tests—2019.** 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—2018.** 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? *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.*	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)? *If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).*	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If "Yes," answer (b) and (c) below.*	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)? *If "Yes," describe in **Part VI** when and how the organization made the determination.*	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? *If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.*	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? *If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below.*	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.*	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)? *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.*	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? *If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in **Part VI,** including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).*	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? *If "Yes," provide detail in **Part VI.***	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? *If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ) .*	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? *If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).*	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))? *If "Yes," provide detail in **Part VI.***	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? *If "Yes," provide detail in **Part VI.***	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? *If "Yes," provide detail in **Part VI.***	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)? *If "Yes," answer line 10b below.*	10a		
b	Did the organization have any excess business holdings in the tax year? *(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).*	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?	**11a**		
b	A family member of a person described in (a) above?	**11b**		
c	A 35% controlled entity of a person described in (a) or (b) above? *If "Yes" to a, b, or c, provide detail in* ***Part VI****.*	**11c**		

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? *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.*	**1**		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? *If "Yes," explain in* ***Part VI*** *how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.*	**2**		

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)? *If "No," describe in* ***Part VI*** *how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).*	**1**		

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?	**1**		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? *If "No," explain in* ***Part VI*** *how the organization maintained a close and continuous working relationship with the supported organization(s).*	**2**		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? *If "Yes," describe in* ***Part VI*** *the role the organization's supported organizations played in this regard.*	**3**		

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 ☐ The organization satisfied the Activities Test. Complete **line 2** below.

b ☐ The organization is the parent of each of its supported organizations. Complete **line 3** below.

c ☐ The organization supported a governmental entity. Describe in **Part VI** how you supported a government entity (see instructions)

2 Activities Test. **Answer (a) and (b) below.**

			Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? *If "Yes," then in* ***Part VI identify 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.*	**2a**		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in* ***Part VI*** *the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.*	**2b**		

3 Parent of Supported Organizations. **Answer (a) and (b) below.**

			Yes	No
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? *Provide details in* ***Part VI.***	**3a**		
b	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? *If "Yes," describe in* ***Part VI.*** *the role played by the organization in this regard.*	**3b**		

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

1 ☐ 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.

	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 ☐ Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)

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 2019 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-2019**	**(iii) Distributable Amount for 2019**
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required-- explain in **Part VI**). See instructions.			
3 Excess distributions carryover, if any, to 2019:			
a From 2014.			
b From 2015.			
c From 2016.			
d From 2017.			
e From 2018.			
f **Total** of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2019 distributable amount			
i Carryover from 2014 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2019 from Section D, line 7: $			
a Applied to underdistributions of prior years			
b Applied to 2019 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2019, 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 2019. 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 2020.** Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2015.			
b Excess from 2016.			
c Excess from 2017.			
d Excess from 2018.			
e Excess from 2019.			

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

990 Schedule A, Supplemental Information

Return Reference	Explanation
SCHEDULE A, PART II, LINE 10, EXPLANATION OF OTHER INCOME:	BUILDING SALES DEPOSIT FORFEITURE - 2016 AMOUNT: $ 1,003,185. INSURANCE PROCEEDS - CLASS A CTION - 2016 AMOUNT: $ 850,000. REVERSAL OF RACE COUPON LIABILITY - 2017 AMOUNT: $ 500,000 . 2019 AMOUNT: $ 119,858. INSURANCE PROCEEDS - RACE CANCELLATION - 2019 AMOUNT: $ 1,500,00 0.

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ.
▶Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then
- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then
- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then
- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of the organization	Employer identification number
NEW YORK ROAD RUNNERS INC C/O FINANCE DEPARTMENT	13-2949483

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

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities")

2 Political campaign activity expenditures (see instructions) ..... ▶ $

3 Volunteer hours for political campaign activities (see instructions) .....

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

1 Enter the amount of any excise tax incurred by the organization under section 4955 ..... ▶ $

2 Enter the amount of any excise tax incurred by organization managers under section 4955 ..... ▶ $

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ..... ☐ Yes ☐ No

4a Was a correction made? ..... ☐ Yes ☐ No

b If "Yes," describe in Part IV.

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

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ..... ▶ $

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ..... ▶ $

3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b..... ▶ $

4 Did the filing organization file **Form 1120-POL** for this year? ..... ☐ Yes ☐ No

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

	(a) Name	**(b)** Address	**(c)** EIN	**(d)** Amount paid from filing organization's funds. If none, enter -0-.	**(e)** Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.
1					
2					
3					
4					
5					
6					

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

A Check ▶ ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).

B Check ▶ ☐ if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	**(a)** Filing organization's totals	**(b)** Affiliated group totals
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)		
b Total lobbying expenditures to influence a legislative body (direct lobbying)		
c Total lobbying expenditures (add lines 1a and 1b)		
d Other exempt purpose expenditures		
e Total exempt purpose expenditures (add lines 1c and 1d)		
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.		
g Grassroots nontaxable amount (enter 25% of line 1f)		
h Subtract line 1g from line 1a. If zero or less, enter -0-.		
i Subtract line 1f from line 1c. If zero or less, enter -0-.		

If the amount on line 1e, column (a) or (b) is:	**The lobbying nontaxable amount is:**
Not over $500,000	20% of the amount on line 1e.
Over $500,000 but not over $1,000,000	$100,000 plus 15% of the excess over $500,000.
Over $1,000,000 but not over $1,500,000	$175,000 plus 10% of the excess over $1,000,000.
Over $1,500,000 but not over $17,000,000	$225,000 plus 5% of the excess over $1,500,000.
Over $17,000,000	$1,000,000.

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? ☐ **Yes** ☐ **No**

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	**(a)** 2016	**(b)** 2017	**(c)** 2018	**(d)** 2019	**(e)** Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

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

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	(a) Yes	(a) No	(b) Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?		No	
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		No	
c Media advertisements?		No	
d Mailings to members, legislators, or the public?		No	
e Publications, or published or broadcast statements?		No	
f Grants to other organizations for lobbying purposes?		No	
g Direct contact with legislators, their staffs, government officials, or a legislative body?		No	
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No	
i Other activities?	Yes		78,055
j Total. Add lines 1c through 1i			78,055
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No	
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

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

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

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

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

Part IV **Supplemental Information**

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1. Also, complete this part for any additional information.

Return Reference	Explanation
PART II-B, LINE 1:	G. FONTAS ADVISORS, INC. AND FONTAS ADVISORS, NY LLC LOBBIED NEW YORK CITY COUNCIL MEMBERS IN SUPPORT OF NYRR'S YOUTH AND COMMUNITY PROGRAMS, LOBBYING ACTIVITIES INCLUDED MAKING TELEPHONE CALLS , SENDING EMAILS TO, AND SCHEDULING MEETINGS WITH, SUCH OFFICIALS AND MEMBERS OF THEIR STAFF, ATTENDING MEETINGS, HEARINGS, AND ANY RELATED PREPARATION FOR THE FOREGOING. ACTIVITIES ALSO INCLUDED FOLLOW-UP COMMUNICATIONS WITH OFFICIALS AND STAFF.

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
NEW YORK ROAD RUNNERS INC
C/O FINANCE DEPARTMENT

Employer identification number
13-2949483

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:

		Amount
c	Beginning balance	1c
d	Additions during the year	1d
e	Distributions during the year	1e
f	Ending balance	1f

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

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided 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					
b Contributions . . .					
c Net investment earnings, gains, and losses					
d Grants or scholarships . . .					
e Other expenditures for facilities and programs . . .					
f Administrative expenses					
g End of year balance					

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

a Board designated or quasi-endowment ▶ .....

b Permanent endowment ▶ .....

c Temporarily restricted endowment ▶ .....

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

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

		Yes	No
(i) unrelated organizations	3a(i)		
(ii) related organizations	3a(ii)		
b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?	3b		

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

Part VI **Land, Buildings, and Equipment.**
Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		12,034,417	1,579,620	10,454,797
d Equipment		14,145,475	9,512,614	4,632,861
e Other		2,210,081	575,005	1,635,076
Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* . . ▶				16,722,734

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	5,531,003	F
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 12.)* ▶	5,531,003	

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

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

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

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

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

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

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	97,855,261
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains (losses) on investments	2a	-6,572,516		
b	Donated services and use of facilities	2b	864,455		
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d	471,693		
e	Add lines **2a** through **2d**			2e	-5,236,368
3	Subtract line **2e** from line **1**			3	103,091,629
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	169,687		
b	Other (Describe in Part XIII.)	4b	1,589,255		
c	Add lines **4a** and **4b**			4c	1,758,942
5	Total revenue. Add lines **3** and **4c.** (This must equal Form 990, Part I, line 12.)			5	104,850,571

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	102,628,339
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a	Donated services and use of facilities	2a	864,455		
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII.)	2d	471,693		
e	Add lines **2a** through **2d**			2e	1,336,148
3	Subtract line **2e** from line **1**			3	101,292,191
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	169,687		
b	Other (Describe in Part XIII.)	4b	1,589,255		
c	Add lines **4a** and **4b**			4c	1,758,942
5	Total expenses. Add lines **3** and **4c.** (This must equal Form 990, Part I, line 18.)			5	103,051,133

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: 13-2949483
Name: NEW YORK ROAD RUNNERS INC
C/O FINANCE DEPARTMENT

Supplemental Information

Return Reference	Explanation
PART X, LINE 2:	MANAGEMENT RECOGNIZES THE EFFECT OF INCOME TAX POSITIONS ONLY IF THOSE POSITIONS ARE MORE LIKELY THAN NOT TO BE SUSTAINED. MANAGEMENT HAS DETERMINED THAT NYRR HAD NO UNCERTAIN TAX POSITIONS THAT WOULD REQUIRE FINANCIAL STATEMENT RECOGNITION OR DISCLOSURE. NYRR IS NO LON GER SUBJECT TO EXAMINATIONS BY THE APPLICABLE JURISDICTIONS FOR PERIODS PRIOR TO MARCH 31, 2017.

Supplemental Information

Return Reference	Explanation
PART XI, LINE 2D - OTHER ADJUSTMENTS:	RENTAL EXPENSES REPORTED ON PART VIII, LINE 6B: 214,818. SPECIAL EVENTS DIRECT EXPENSES REPORTED ON PART VIII, LINE 8C: 256,875.

Supplemental Information

Return Reference	Explanation
PART XI, LINE 4B - OTHER ADJUSTMENTS:	MEMBERSHIP DUE EXPENSES NETTED AGAINST REVENUE: 127,191. CREDIT CARD PROCESSING FEE NETTED AGAINST REVENUE: 1,342,206. REVERSAL OF RACE COUPON LIABILITY REPORTED ON PART VIII, LINE 11: 119,858.

Supplemental Information

Return Reference	Explanation
PART XII, LINE 2D - OTHER ADJUSTMENTS:	RENTAL EXPENSES REPORTED ON PART VIII, LINE 6B: 214,818. SPECIAL EVENTS DIRECT EXPENSES REPORTED ON PART VIII, LINE 8C: 256,875.

Supplemental Information

Return Reference	Explanation
PART XII, LINE 4B - OTHER ADJUSTMENTS:	MEMBERSHIP DUE EXPENSES NETTED AGAINST REVENUE: 127,191. CREDIT CARD PROCESSING FEE NETTED AGAINST REVENUE: 1,342,206. REVERSAL OF RACE COUPON LIABILITY REPORTED ON PART VIII, LINE 11: 119,858.

Supplemental Information

Return Reference	Explanation
PART VI, LAND, BUILDINGS, AND EQUIPMENT:	PART VI, LINE 1D INCLUDES FURNITURE, FIXTURES, HARDWARE AND SOFTWARE. PART VI, LINE 1E INCLUDES WORK IN PROGRESS AND AUTOMOBILES.

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

2019

Open to Public Inspection

Name of the organization
NEW YORK ROAD RUNNERS INC
C/O FINANCE DEPARTMENT

Employer identification number
13-2949483

Part I **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" on 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 Activites 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 the region	**(d)** Activities conducted in region (by type) (such as, 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 the region	**(f)** Total expenditures for and investments in the region
CENTRAL AMERICA AND THE CARIBBEAN			INVESTMENTS		4,131,138
3a Sub-total	0	0			4,131,138
b Total from continuation sheets to Part I . . .	0	0			0
c Totals (add lines 3a and 3b)	0	0			4,131,138

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" on 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 noncash assistance	(h) Description of noncash 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" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	**(b)** Region	**(c)** Number of recipients	**(d)** Amount of cash grant	**(e)** Manner of cash disbursement	**(f)** Amount of noncash assistance	**(g)** Description of noncash assistance	**(h)** Method of valuation (book, FMV, appraisal, other)

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
PART I, LINE 3:	THE ACTIVITIES REPORTED IN PART I, LINE 3 ARE ACCOUNTED FOR USING THE ACCRUAL METHOD OF ACCOUNTING IN CONFORMITY WITH AUDITED FINANCIAL STATEMENTS.

990 Schedule F, Supplemental Information

Return Reference	Explanation
PART III ACCOUNTING METHOD:	

990 Schedule F, Supplemental Information

Return Reference	Explanation
PART IV, FOREIGN FORMS, LINE 1:	THE ORGANIZATION IS REQUIRED TO FILE FORM 926 BECAUSE IT DOES MEET THE APPLICABLE THRESHOLD.

990 Schedule F, Supplemental Information

Return Reference	Explanation
PART IV, FOREIGN FORMS, LINE 3:	THE ORGANIZATION IS NOT REQUIRED TO FILE FORM 5471 BECAUSE IT DOES NOT MEET THE APPLICABLE THRESHOLD OWNERSHIP OR OTHER FILING REQUIREMENTS.

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

▶Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
NEW YORK ROAD RUNNERS INC
C/O FINANCE DEPARTMENT

Employer identification number
13-2949483

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

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

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

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

b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least $5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	**(ii)** Activity	**(iii)** Did fundraiser have custody or control of contributions?		**(iv)** Gross receipts from activity	**(v)** Amount paid to (or retained by) fundraiser listed in col. **(i)**	**(vi)** Amount paid to (or retained by) organization
		Yes	**No**			
Total . . . . . ▶						

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

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

		(a) Event #1 NIGHT OF CHAMPIONS (event type)	(b) Event #2 JINGLE BELL JOG (event type)	(c) Other events ____ (total number)	(d) Total events (add col. (a) through col. (c))
Revenue	1 Gross receipts	1,263,787	299,575		1,563,362
	2 Less: Contributions	1,045,130	234,932		1,280,062
	3 Gross income (line 1 minus line 2)	218,657	64,643		283,300
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs	10,392			10,392
	7 Food and beverages	163,975	10,509		174,484
	8 Entertainment	1,288	1,850		3,138
	9 Other direct expenses	16,577	52,284		68,861
	10 Direct expense summary. Add lines 4 through 9 in column (d) ▶				256,875
	11 Net income summary. Subtract line 10 from line 3, column (d) ▶				26,425

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	☐ Yes ____ % ☐ No	☐ Yes ____ % ☐ No	☐ Yes ____ % ☐ 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

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

Schedule I (Form 990)

Department of the Treasury
Internal Revenue Service

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

2019

Open to Public Inspection

Name of the organization
NEW YORK ROAD RUNNERS INC
C/O FINANCE DEPARTMENT

Employer identification number
13-2949483

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . . ☑ Yes ☐ No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to 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) See Additional Data							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . . ▶ 14

3 Enter total number of other organizations listed in the line 1 table . . . . . ▶ 1

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) SCHOLARSHIPS	297	314,135			
(2)					
(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
PART I, LINE 2:	GRANTS TO ORGANIZATIONS THE TRUST FOR PUBLIC LAND IS REQUIRED TO SUBMIT TO NYRR QUARTERLY NARRATIVE, FINANCIAL PROGRESS REPORTS AND ANNUALLY REPORT FOR THE SPECIFIC PLAYGROUNDS COVERED BY THE GRANT. SCHOLARSHIPS A TOTAL OF $186,939.82 INCLUDES $177,365.78 TUITION GRANTS ISSUED TO 93 PARTICIPANTS AND $9,574.04 FOR RELATED SCHOOL EXPENSES FOR 13 PARTICIPANTS IN THE RUN FOR THE FUTURE PROGRAM. RUN FOR THE FUTURE PARTICIPANTS ARE ELIGIBLE FOR THIS SCHOLARSHIP UPON SUCCESSFUL COMPLETION OF PROGRAM REQUIREMENTS (80%+ ATTENDANCE AT PRACTICES, A 5K RACE FINISH AND SPECIFIC NYRR EVENTS THROUGHOUT THE YEAR). THE INDIVIDUAL IS REQUIRED TO SUBMIT PROOF OF ENROLLMENT FROM THEIR COLLEGE OF CHOICE IN ORDER FOR US TO AWARD THE SCHOLARSHIP. RECIPIENTS ARE NOT REQUIRED TO REPORT ON THEIR USE OF THE GRANT, SINCE PAYMENT IS ISSUED DIRECTLY TO THE INSTITUTION AND RELATED SCHOOL EXPENSES ARE PURCHASED DIRECTLY AND/OR REQUIRE RECEIPTS FOR REIMBURSEMENT. ADDITIONALLY, 150 PARTICIPANTS WERE AWARDED THE RUNNING SCHOOL, OPERATED OUT OF CAMP CHIPINAW IN CATSKILLS MOUNTAIN, NY IN AUGUST 2019. A TOTAL OF $111,000 WAS GRANTED TO THE RUNNING SCHOOL TO COVER THE PARTICIPANTS' TUITION AND TRAVEL EXPENSES FOR THE CAMP. THE ONE-WEEK CAMP FOCUSES ON DEVELOPMENTALLY APPROPRIATE AEROBIC, STRENGTH AND FLEXIBILITY TRAINING, AS WELL AS PROVIDING ATHLETES WITH NUTRITION AND WELLNESS INFORMATION AND OVERALL BEST PRACTICES AS RUNNING ATHLETES. FINALLY, 41 PARTICIPANTS WERE AWARDED THE THE RUNNING WORKS CAMP, OPERATED IN CAMP CANADENSIS, PA IN AUGUST 2019. A TOTAL OF $16,195 WAS GRANTED TO THE RUNNINGWORKS CAMP TO COVER THE PARTICIPANTS' TUITION AND TRAVEL EXPENSES FOR THE CAMP. MIDDLE SCHOOL CAMPERS HAVE MILES OF TRAILS AROUND LAKE LENAPE. OLYMPIANS ON STAFF, SMALL GROUP INSTRUCTION, SCIENCE BASED TRAINING FOR EVERY LEVEL, STRENGTH, FLEXIBILITY, NUTRITION, GOAL SETTING, MENTAL PREPERATION, TACTICS, TEAM BUILDING & FUN CAMP ACTIVITIES.

Additional Data

Software ID:
Software Version:
EIN: 13-2949483
Name: NEW YORK ROAD RUNNERS INC
C/O FINANCE DEPARTMENT

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(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 non-cash assistance	**(h)** Purpose of grant or assistance
ARMORY FOUNDATION 216 FORT WASHINGTON AVENUE NEW YORK, NY 100323704	13-3680286	501(C)(3)	510,486				SPONSOR TRACK AND FIELD EVENTS, SUPPORT DR. SANDER LEGACY FUND AND THE ARMORY COLLEGE PREP PROGRAM, TSHIRTS OR OTHER VALUE-IN-KIND FOR ARMORY EVENTS AND RUNLOVE EVENT
CENTRAL PARK CONSERVANCY INC 14 EAST 60TH STREET NEW YORK, NY 10022	13-3022855	501(C)(3)	175,000				SUPPORT CENTRAL PARK PROGRAMS AND ACTIVITIES

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(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 non-cash assistance	**(h)** Purpose of grant or assistance
CENTRAL PARK TRACK CLUB 140 WEST 79TH STREET NEW YORK, NY 10024	71-1005273	501(C)(3)	8,000				BRONZE TABLE AND SEATS FOR PRESENTATION OF AWARDS
CITY PARKS FOUNDATION 830 FIFTH AVENUE NEW YORK, NY 10065	13-3561657	501(C)(3)	115,000				ENRICH AND IMPROVE PARKS AND COMMUNITIES ACROSS ALL FIVE BOROUGHS OF NYC

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(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 non-cash assistance	**(h)** Purpose of grant or assistance
FUND FOR PUBLIC SCHOOLS INC 52 CHAMBERS STREET NEW YORK, NY 10007	11-2656137	501(C)(3)	7,000				CITYWIDE RECOGNITION AWARD CELEBRATING NYC DOE EDUCATORS - SUPPORTS THE BIG APPLE PHYSICAL EDUCATION AWARD RECIPIENT
MAYOR'S FUND TO ADVANCE NEW YORK CITY 253 BROADWAY 6TH FLOOR NEW YORK, NY 10007	13-3783906	501(C)(3)	5,000				SPONSORSHIP FOR THE NYC DISABILITY PRIDE PARADE

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(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 non-cash assistance	**(h)** Purpose of grant or assistance
NEW YORKERS FOR PARKS 55 BROAD STREET 23RD FLOOR NEW YORK, NY 10004	13-6167879	501(C)(3)	20,000				OPEN RUN PLANTING MARATHON 2019, BREAKFAST IN SUPPORT OF NEW YORKERS FOR PARKS
PROSPECT PARK ALLIANCE INC 95 PROSPECT PARK WEST BROOKLYN, NY 11215	11-2843763	501(C)(3)	22,500				PROSPECT PARK ALLIANCE GALA BENEFIT, DONATION FOR THE 2019 DAY OF SERVICE

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(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 non-cash assistance	(h) Purpose of grant or assistance
RANDALL'S ISLAND PARK ALLIANCE INC 24 WEST 61ST STREET 4TH FLOOR NEW YORK, NY 10023	13-3787630	501(C)(3)	10,000				RANDALLS ISLAND PARK ALLIANCE 2019 GALA
THE ASPEN INSTITUTE INC ONE DUPONT CIRCLE NW NO 700 WASHINGTON, DC 20036	84-0399006	501(C)(3)	25,000				YEARLY SPONSORSHIP OF THE PROJECT PLAY SHARED GOALS INIITIATIVE ADVISORY GROUP. MULTIYEAR EFFORT BY LEADING ORGANIZIATIONS TO GROW NATIONAL SPORT PARTICIPATION RATES AND RELATED METRICS AMONG YOUTHS.

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(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 non-cash assistance	**(h)** Purpose of grant or assistance
THE GREATER HARLEM CHAMBER OF COMMERCE COMMUNITY FUND 200A W 136TH STREET NEW YORK, NY 10030	80-0790349	501(C)(3)	30,000				SPONSOR RACE EVENTS
THE TRUST FOR PUBLIC LAND 101 MONTGOMERY STREET SUITE 900 SAN FRANCISCO, CA 94104	23-7222333	501(C)(3)	12,500				GALA IN SUPPORT OF THE TRUST FOR PUBLIC LAND

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(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 non-cash assistance	**(h)** Purpose of grant or assistance
THE TRUST FOR PUBLIC LAND 666 BROADWAY 9TH FLOOR NEW YORK, NY 10012	23-7222333	501(C)(3)	1,700,000				DEVELOP PLAYGROUNDS FOR NYC SCHOOL AND COMMUNITY
VAN CORTLANDT PARK CONSERVANCY 1 BRONX RIVER PARKWAY BRONX, NY 10462	80-0361646	501(C)(3)	30,000				GENERAL MAINTENANCE OF THE HISTORIC CROSS COUNTRY RUNNING TRAIL AND ITS SURROUNDING AREAS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(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 non-cash assistance	**(h)** Purpose of grant or assistance
WOMEN IN SPORTS AND EVENTS INC 244 FIFTH AVENUE SUITE 2087 NEW YORK, NY 10001	13-4119533	501(C)(3)	7,125				BRONZE TABLE PARTNER FOR THE WISE WOMEN OF THE YEAR LUNCHEON
NYC & COMPANY 810 7TH AVENUE 3RD FLOOR NEW YORK, NY 10019	13-5531178	501(C)(6)	6,000				TO SUPPORT AND PROMOTE TOURISM IN NYC

Schedule J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
▶ Attach to Form 990.
▶ Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
NEW YORK ROAD RUNNERS INC
C/O FINANCE DEPARTMENT

Employer identification number
13-2949483

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropiate 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.			
	☑ First-class or charter travel ☐ Housing allowance or residence for personal use ☐ Travel for companions ☐ Payments for business use of personal residence ☐ Tax idemnification and gross-up payments ☐ Health or social club dues or initiation fees ☐ Discretionary spending account ☐ Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on Line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	**1b**	Yes	
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 on Line 1a?	**2**	Yes	
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.			
	☑ Compensation committee ☐ Written employment contract ☐ Independent compensation consultant ☑ Compensation survey or study ☑ Form 990 of other organizations ☑ 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**		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	**4b**		No
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 accured 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**		

Part II **Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use duplicate copies if additional space is needed.

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

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

(A) Name and Title	**(B)** Breakdown of W-2 and/or 1099-MISC compensation			**(C)** Retirement and other deferred compensation	**(D)** Nontaxable benefits	**(E)** Total of columns (B)(i)-(D)	**(F)** Compensation in column (B) reported as deferred on prior Form 990
	(i) Base compensation	**(ii)** Bonus & incentive compensation	**(iii)** Other reportable compensation				
See Additional Data Table							

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
PART I, LINE 1A	THE ORGANIZATION REIMBURSED THE FOLLOWING HIGHEST COMPENSATED EMPLOYEE FOR BUSINESS/BUSINESS FIRST CLASS TRAVEL DUE TO LACK OF AVAILABILITIES OF OTHER CLASSES TO TRAVEL TO THE AWARD EVENT IN SINGAPORE: - CHRISTOPHER WEILLER
PART I, LINE 1B	THE ORGANIZATION FOLLOWS A WRITTEN POLICY REGARDING REIMBURSEMENT OR PAYMENT FOR ALL EXPENSES DESCRIBED IN PART I, LINE 1A.
PART I, LINE 7	THE FOLLOWING PERSONS LISTED IN FORM 990, PART VII, SECTION A, LINE 1A RECEIVED NON-FIXED PAYMENTS IN THE FORM OF BONUSES AS SET FORTH BELOW. IN ALL CASES, SUCH BONUSES WERE DETERMINED BY THE HR/COMPENSATION COMMITTEE OF THE BOARD, BASED ON EVALUATIONS, PERFORMANCE REPORTS, AND COMPARABILITY DATA, AND THE ORGANIZATION'S FINANCIAL RESULTS FOR THE YEAR. THE DETERMINATIONS OF THE HR/COMPENSATION COMMITTEE WERE PRESENTED TO THE BOARD OF DIRECTORS FOR APPROVAL, FOLLOWING DELIBERATIONS WHICH EXCLUDED ANY AFFECTED OFFICER/EMPLOYEE. MICHAEL CAPIRASO $ 65,000 LINDA FRANKEN $ 17,500 JAMES GROOMS $ 20,000 JAMES HEIM $ 22,500 JEFFERY CARNEVALE $ 13,000 RACHEL PRATT $ 15,000 CHRISTOPHER WEILLER $ 16,000 CHRISTINE BURKE $ 13,000 MICHAEL RODGERS $ 14,500 PETER CIACCIA $ 50,000

Additional Data

Software ID:
Software Version:
EIN: 13-2949483
Name: NEW YORK ROAD RUNNERS INC
C/O FINANCE DEPARTMENT

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				
1MICHAEL CAPIRASO PRESIDENT/CEO/BOARD MEMBER	(i)	504,124	65,000	442	31,500	7,700	608,766	0
	(ii)	0	0	0	0	0	0	0
1JAMES HEIM SVP/TECH. DIRECTOR EV DEV & OPS	(i)	297,193	22,500	348	18,902	30,467	369,410	0
	(ii)	0	0	0	0	0	0	0
2LINDA FRANKEN SVP OF FINANCE/ASST. TR. (THRU 1/20)	(i)	289,176	17,500	218	20,925	23,197	351,016	0
	(ii)	0	0	0	0	0	0	0
3JAMES GROOMS SVP OF LEGAL/ASST. SECRETARY	(i)	296,494	20,000	336	20,925	11,705	349,460	0
	(ii)	0	0	0	0	0	0	0
4RACHEL PRATT SVP OF YOUTH & COMM. SVCS	(i)	242,124	15,000	282	18,217	27,993	303,616	0
	(ii)	0	0	0	0	0	0	0
5CHRISTOPHER WEILLER VP MEDIA, PR & PRO ATHLETICS	(i)	231,397	16,000	270	17,042	25,559	290,268	0
	(ii)	0	0	0	0	0	0	0
6JEFFERY CARNEVALE VP INFORMATION TECHNOLOGY	(i)	224,405	13,000	265	16,006	19,787	273,463	0
	(ii)	0	0	0	0	0	0	0
7CHRISTINE BURKE VP MARKETING & DIGITAL	(i)	228,182	13,000	265	13,875	17,420	272,742	0
	(ii)	0	0	0	0	0	0	0
8MICHAEL RODGERS VP BUS DEV/STRATEGIC PARTNERSHIPS	(i)	208,981	14,500	237	15,495	9,771	248,984	0
	(ii)	0	0	0	0	0	0	0
9PETER CIACCIA FORMER PRESIDENT OF EVENT & RD	(i)	14,517	50,000	14	16,500	799	81,830	0
	(ii)	0	0	0	0	0	0	0

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

2019

Open to Public Inspection

Name of the organization
NEW YORK ROAD RUNNERS INC
C/O FINANCE DEPARTMENT

Employer identification number
13-2949483

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		7,330,680	COST
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded				
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	X	8	1,341,783	COST
20 Drugs and medical supplies	X	1	28,665	COST
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (AWARDS)	X	2	114,190	COST
26 Other ▶ (EVENT TICKETS)	X	4	99,487	COST
27 Other ▶ (BAGGAGE TRANSPORTATION)	X	1	14,872	COST
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** | 0

		Yes	No
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 isn't required to be used for exempt purposes for the entire holding period?	**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?	**31**	Yes	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	**32a**		No
b If "Yes," describe in Part II.			
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.			

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
PART I, COLUMN (B):	THE ORGANIZATION IS REPORTING THE NUMBER OF CONTRIBUTORS.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.
▶ Go to *www.irs.gov/Form990* for the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
NEW YORK ROAD RUNNERS INC
C/O FINANCE DEPARTMENT

Employer identification number
13-2949483

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART I, LINE 5 AND PART V, LINE 2A:	TOTAL INDIVIDUALS EMPLOYED INCLUDE BOTH FULL-TIME AND PART-TIME EMPLOYEES.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	THE FORM 990 IS DRAFTED BY INDEPENDENT ACCOUNTANTS BASED ON INFORMATION PROVIDED BY THE OR GANIZATION. THE DRAFT FORM 990 IS PROVIDED TO THE ORGANIZATION'S FINANCE AND LEGAL DEPARTM ENTS FOR REVIEW, AND COMMENTS ARE DISCUSSED WITH THE ACCOUNTANTS AND APPROPRIATE REVISIONS ARE MADE TO THE FORM 990. A COPY OF THE FORM 990 IS PROVIDED TO THE PRESIDENT/CEO FOR REV IEW. AFTER ALL INTERNAL MANAGEMENT REVIEWS, THE FORM 990 IS PROVIDED TO MEMBERS OF THE AUD IT COMMITTEE, WHICH HAS BEEN DESIGNATED BY THE BOARD OF DIRECTORS WITH THE RESPONSIBILITY FOR REVIEWING THE COMPLETED FORM 990 PRIOR TO IT BEING MADE AVAILABLE TO THE BOARD OF DIRE CTORS. AUDIT COMMITTEE MEMBERS PARTICIPATE IN A MEETING OR CONFERENCE CALL WITH REPRESENTA TIVES OF THE LEGAL AND FINANCE DEPARTMENTS AND THE INDEPENDENT ACCOUNTANTS TO DISCUSS THE CONTENT OF THE FORM 990. BEFORE BEING FILED, A COPY OF THE APPROVED FORM 990 IS PROVIDED E LECTRONICALLY TO THE ENTIRE BOARD OF DIRECTORS.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	ON AN ANNUAL BASIS, DIRECTORS, OFFICERS AND MEMBERS OF SENIOR MANAGEMENT RECEIVE A COPY OF THE ORGANIZATION'S CONFLICT OF INTEREST POLICY, SIGN A DECLARATION TO ADHERE TO THE POLIC Y, AND COMPLETE A QUESTIONNAIRE SEEKING DISCLOSURE OF POTENTIAL CONFLICTS. THE POLICY REQU IRES THE FILING OF AMENDED DISCLOSURE IN THE EVENT OF ANY CHANGE IN CIRCUMSTANCES. INITIAL DETERMINATIONS AS TO WHETHER CONFLICTS EXIST AND, IF SO, WHAT ACTIONS SHOULD BE TAKEN, AR E MADE BY THE GENERAL COUNSEL IN CONSULTATION WITH THE PRESIDENT/CEO, OR THE AUDIT COMMITT EE AND IF WARRANTED, REVIEWED BY THE CHAIR OR A DESIGNATED MEMBER OF THE EXECUTIVE COMMITT EE. DEPENDING ON ITS NATURE AND SERIOUSNESS, ANY POTENTIAL CONFLICT WILL BE REVIEWED BY TH E BOARD AND ANY RESULTING ACTION SHOULD BE DETERMINED BY THE BOARD. IN MOST INSTANCES, THE APPROPRIATE ACTIONS IN THE FACE OF POTENTIAL OR ACTUAL CONFLICTS ARE DISCLOSURE OF THE CO NFLICT AND REMOVAL OF THE INDIVIDUAL WITH THE CONFLICT FROM THE CONSIDERATION AND DECISION -MAKING PROCESSES WITH REGARD TO CERTAIN MATTERS WHERE HIS OR HER JUDGMENT WOULD OR MIGHT BE COMPROMISED BY THE CONFLICT.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	(A) COMPENSATION OF THE ORGANIZATION'S PRESIDENT & CEO IS DETERMINED BY THE HUMAN RESOURCE S & COMPENSATION COMMITTEE, WHICH CONSIDERS INDIVIDUAL ACCOMPLISHMENTS, ORGANIZATIONAL PER FORMANCE AND COMPARABLE COMPENSATION DATA. THE COMMITTEE'S RECOMMENDATION IS PRESENTED TO THE BOARD OF DIRECTORS FOR REVIEW AND APPROVAL. (B) THE COMPENSATION PERCENTAGES OF SALARY INCREASES AND BONUSES FOR SENIOR/VICE PRESIDENTS, DEPARTMENT HEADS AND DEPARTMENTAL DIREC TORS, MANAGERS AND STAFF POSITIONS ARE DETERMINED BY THE HUMAN RESOURCES & COMPENSATION CO MMITTEE, BASED UPON THE RECOMMENDATIONS OF THE PRESIDENT & CEO WHO REVIEWS PERFORMANCE REP ORTS AND BENCHMARKING DATA. THE RECOMMENDATIONS OF THE HUMAN RESOURCES & COMPENSATION COMM ITTEE ARE PRESENTED TO THE BOARD OF DIRECTORS FOR APPROVAL, AND ITS DELIBERATIONS AND DECI SION ARE CONTEMPORANEOUSLY DOCUMENTED AS PART OF THE MINUTES OF THE PROCEEDINGS. PERSONS W HOSE COMPENSATION ARE AT ISSUE ARE EXCUSED FROM PARTICIPATION AT MEETINGS IN WHICH SUCH CO MPENSATION DECISIONS ARE DISCUSSED AND/OR DECIDED. THE FOREGOING PROCESS IS FOLLOWED ANNUA LLY AND WAS LAST UNDERTAKEN FOR ALL EMPLOYEES EXCEPT OFFICERS AND OTHER MEMBERS OF SENIOR MANAGEMENT IN MARCH 2020. THE BOARD MET AND APPROVED THE COMPENSATION PERCENTAGES OF SALAR Y INCREASES AND BONUSES FOR ALL STAFF, BUT IT DID NOT GO INTO EFFECT DUE TO COVID-19.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	CONSISTENT WITH ITS OBLIGATIONS UNDER STATUTORY LAW, RULES AND REGULATIONS, AS APPLICABLE, THE ORGANIZATION MAKES ITS DOCUMENTS, SUCH AS ITS APPLICATION FOR TAX EXEMPTION, ANNUAL I NFORMATION RETURNS, CONFLICT OF INTEREST POLICY, FINANCIAL STATEMENTS, AND GOVERNING DOCUM ENTS, AVAILABLE THROUGH PUBLIC FILINGS AND/OR ON WRITTEN REQUEST, EITHER BY PROVIDING COPI ES OR MAKING THEM AVAILABLE FOR INSPECTION AT THE OFFICES OF THE ORGANIZATION.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART IX, LINE 24E, ALL OTHER FUNCTIONAL EXPENSES:	INCLUDES STAFF EXPENSES (TRAINING, RECRUITMENT, AND STAFF EVENTS)

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XII, LINE 2C:	THE AUDIT COMMITTEE OF THE BOARD HIRES THE AUDIT FIRM, THE REVIEW OF THE RISK ISSUES FOR T HE ORGANIZATION AND THE FINAL AUDIT REVIEW AND PACKAGE THAT IS ACCEPTED BY THE BOARD. THE COMMITTEE MEETS WITH THE AUDIT FIRM INDEPENDENTLY FROM STAFF DURING THE AUDIT REVIEW PROCE SS AND RECOMMENDS TO THE BOARD THE ACCEPTANCE OF THE AUDIT AND ITS FINDINGS. THIS PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, COVID PANDEMIC:	NYRR'S OPERATIONS AND FINANCIAL PERFORMANCE HAVE BEEN AFFECTED BY THE RECENT CORONAVIRUS O UTBREAK WHICH HAS SPREAD GLOBALLY AND HAS ADVERSELY AFFECTED ECONOMIC CONDITIONS THROUGHOU T THE WORLD. IN RESPONSE TO RESTRICTIONS ISSUED BY STATE AND LOCAL GOVERNMENTS REGARDING L ARGE PUBLIC GATHERINGS AS A PRECAUTIONARY MEASURE TO LIMIT THE SPREAD OF THE COVID-19 VIRU S, OUR RACES TO DATE HAVE BEEN CANCELLED, WITH POTENTIAL FUTURE CANCELLATIONS IN FISCAL YE AR 2021 AND 2022. THE CANCELED RACES INCLUDED CERTAIN RACES SCHEDULED TO OCCUR IN MARCH 20 20. FOR THOSE CANCELED RACES, NYRR OFFERED ENTRANTS THE CHOICE TO RECEIVE A 2021 TCS NYC M ARATHON 9+1 CREDIT, RECEIVE REFUNDS OF THE ENTRY FEES PAID, RECEIVE COMPLIMENTARY ENTRANCE INTO A FUTURE NYRR RACE OR DONATE THE VALUE OF THEIR ENTRY FEE TO SUPPORT NYRR'S YOUTH AN D COMMUNITY PROGRAMS. ENTRY FEES RECEIVED FOR THOSE ENTRANTS THAT SELECTED COMPLIMENTARY E NTRY TO A FUTURE RACE HAVE BEEN CLASSIFIED AS DEFERRED REVENUE ON THE BALANCE SHEET. IN AD DITION, MANAGEMENT HAS FILED INSURANCE CLAIMS TO COVER LOSSES RELATED TO CERTAIN CANCELED RACES AND HAS RECORDED AN ESTIMATED INSURANCE RECOVERY FOR RACES THAT WERE SCHEDULED TO TA KE PLACE PRIOR TO MARCH 31, 2020. IF THE COVID-19 OUTBREAK CONTINUES AND CONDITIONS WORSEN , NYRR MAY CONTINUE TO EXPERIENCE A DISRUPTION IN ALL REVENUE STREAMS OF THE BUSINESS. THE OUTBREAK IS LIKELY TO AFFECT NYRR'S BUSINESS, FINANCIAL CONDITION AND RESULTS OF OPERATIO NS DURING FISCAL YEAR 2021 AND FISCAL YEAR 2022. NYRR HAS, HOWEVER, TAKEN SEVERAL STEPS TO STRENGTHEN ITS FINANCIAL POSITION AND TO MAINTAIN FINANCIAL LIQUIDITY AND FLEXIBILITY. NY RR APPLIED FOR AND HAS RECEIVED FUNDS FROM THE PAYCHECK PROTECTION PROGRAM LOAN (THE "PPP LOAN") FROM THE SMALL BUSINESS ADMINISTRATION THROUGH AN INDEPENDENT BANK. THE PPP LOAN HA S A FIVE-YEAR MATURITY, HAS AN INTEREST RATE OF 1.0% PER ANNUM, AND THE MAJORITY OF THE PR INCIPAL AMOUNT OUTSTANDING IS FORGIVABLE IF NYRR USES THE FUNDS FOR ELIGIBLE EXPENSES. NO PAYMENTS ON THE PPP LOAN ARE DUE YET, NYRR EXPECTS A SIGNIFICANT PORTION OF THE PPP LOAN T O BE FORGIVEN.