PUBLIC DISCLOSURE COPY

Form 990

** PUBLIC DISCLOSURE COPY ** Return of Organization Exempt From Income Tax

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

Department of the Treasury

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 3 **Open to Public** Inonaction

Intern	ai Reven					inopeotion	
<u>A</u> F	or the	2023 calendar year, or tax year beginning JUL 1, 2023 and	lending J	JN 30, 2024			
	heck if oplicable	C Name of organization		D Employer ide	entific	cation number	
	Addres	A HARLEM CHILDREN'S ZONE, INC.					
	Name change	Doing business as		23-7112	974		
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone nu	ımber		
	Final	35 EAST 125TH STREET		(212) 36	0-32	55	
	termin- ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$		192,399,594.	
	Amend return	NEW IORK, NI 10035		H(a) Is this a gro			
	Applica tion pending	F Name and address of principal officer: www.e_owoso-kesse				? Yes X No	
		SAME AS C ABOVE		H(b) Are all subordir	nates in	cluded? Yes No	
		mpt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1)	or 527	1 '		list. See instructions	
	Vebsit			H(c) Group exer	·		
		organization: X Corporation Trust Association Other	L Year	of formation: 1970	N	State of legal domicile: NY	
Га		Summary		TTEE EOD OUTT		T	
e		Briefly describe the organization's mission or most significant activities: WE ENH AND FAMILIES IN SOME OF NYC'S MOST DEVASTATED NEIGHBORHOODS.		LIFE FOR CHIL	DREI	N	
Governance	-		-				
ern	_	Check this box if the organization discontinued its operations or disposed			1 1	ets. 17	
30					3	15	
8		Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2023 (Part V, line 2a)		4	1768		
ties				6	0		
Activities &		Fotal number of volunteers (estimate if necessary) Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.		
Ac		Net unrelated business taxable income from Form 990-T, Part I, line 11			7b	0.	
				Prior Year	1.2	Current Year	
	8 (Contributions and grants (Part VIII, line 1h)		98,304,0	23.	93,324,113.	
Revenue		Program service revenue (Part VIII, line 2g)			0.	0.	
eve		nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		-14,4	39.	477,819.	
Ä		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		3,504,0	54.	4,436,379.	
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		101,793,6	38.	98,238,311.	
	13 (Grants and similar amounts paid (Part IX, column (A), lines 1-3)		8,306,5	521.	10,066,172.	
	14	Benefits paid to or for members (Part IX, column (A), line 4)			٥.	0.	
s	15 3	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		62,447,5	28.	67,523,265.	
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)			٥.	0.	
xpe	b ⁻	Total fundraising expenses (Part IX, column (D), line 25) 2,146,	274.				
ш		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		46,582,7		56,283,381.	
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		117,336,8		133,872,818.	
	19	Revenue less expenses. Subtract line 18 from line 12		-15,543,1		-35,634,507.	
s or nces			Ве	ginning of Current Y		End of Year	
Net Assets or Fund Balances	20	Total assets (Part X, line 16)		1,061,049,9		1,169,419,286.	
et A.	21	Total liabilities (Part X, line 26)		193,835,7		185,882,820.	
	22	Net assets or fund balances. Subtract line 21 from line 20		867,214,1	.3/.	983,536,466.	
	rt II		o ond ct-t	unto and to the hard	of	unourlodge and belief it is	
	•	ties of perjury, I declare that I have examined this return, including accompanying schedule		•	or my	knowledge and beliet, it is	
true,	correct	, and complete. Declaration of preparer (other than officer) is based on all information of w	nich preparer	nas any knowledge.			

	TAXPAYER COPY								
Sign	Signature of officer		Date						
Here	JOHN MACAPAGAL, CONTROLLER								
	Type or print name and title								
	Print/Type preparer's name	Preparer's signature Date	Check PTIN						
Paid	SCOTT THOMPSETT	Sen Nompet 05/13/	2025 self-employed P00741490						
Preparer	Firm's name GRANT THORNTON ADVISORS L	LC I	Firm's EIN 99-1856619						
Use Only	Firm's address 757 THIRD AVENUE, 3RD FLOO	OR							
	NEW YORK, NY 10017-2013		Phone no.(212) 599-0100						
May the IF	May the IRS discuss this return with the preparer shown above? See instructions								
LHA For	HA For Paperwork Reduction Act Notice, see the separate instructions. 332001 12-21-23 Form 990 (2023)								

LHA For Paperwork Reduction Act Notice, see the separate instructions.

(Rev. January 2024)

Application for Extension of Time To File an Exempt Organization **Return or Excise Taxes Related to Employee Benefit Plans**

Department of the Treasury Internal Revenue Service

File a separate application for each return. Go to www.irs.gov/Form8868 for the latest information.

Electronic filing (e-file). You can electronically file Form 8868 to request up to a 6-month extension of time to file any of the forms listed below except for Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts. An extension request for Form 8870 must be sent to the IRS in a paper format (see instructions). For more details on the electronic filing of Form 8868, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment instructions.

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Part I - Ide	entification							
Type or	Name of exempt organization, employer, or other filer, see instructions. Taxpayer identification number							
Print								
	HARLEM CHILDREN'S ZONE, INC. 23-7112974							
File by the due date for filing your return. See	Number, street, and room or suite no. If a P.O. box, see instructions. 35 EAST 125TH STREET							
instructions.	City, town or post office, state, and ZIP code. For a foreign address, see instructions. NEW YORK, NY 10035							
Enter the I	Return Code for the return that this application is for (file	e a separat	e application for each return)		01			
Application Is For		Return	Application Is For		Return			
		Code			Code			
Form 990 or Form 990-EZ		01	Form 4720 (other than individual)		09			
Form 4720	D (individual)	03	Form 5227		10			

Form 4720 (individual)	03	Form 5227	10
Form 990-PF	04	Form 6069	11
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 8870	12
Form 990-T (trust other than above)	06	Form 5330 (individual)	13
Form 990-T (corporation)	07	Form 5330 (other than individual)	14
Form 1041-A	08		

• After you enter your Return Code, complete either Part II or Part III. Part III, including signature, is applicable only for an extension of time to file Form 5330.

• If this application is for an extension of time to file Form 5330, you must enter the following information.

Plan Name	
Plan Number	r

Plan Year Ending (MM/DD/YYYY)

Part II -	Automatic	Extension of	Time To	o File for	Exempt	Organizatio	ons (see	instruction	5)

JOHN MACAPAGAI Ŀ 5 a. 11. . .

	The books are in the care of JOHN MACAPAGAL				
	35 EAST 125TH STREET - NEW YORK, NY 10	035			
٦	Telephone No. 212-360-3255 Fax N	No. 212-289-0661			_
•	If the organization does not have an office or place of business in the United Sta	tes, check this box			
•	If this is for a Group Return, enter the organization's four-digit Group Exemption	Number (GEN)	. If this is fo	the who	ble group, check this
box	. If it is for part of the group, check this box and attach a list	with the names and	TINs of all member	ers the e	xtension is for.
1	I request an automatic 6-month extension of time until MAY 15	, 20 25	, to file the exem	pt organ	ization return for
	the organization named above. The extension is for the organization's return f	or:			
	calendar year 20 or				
	X tax year beginning JUL 1, 20 23	, and ending	JUN 30		, 20 <u>24</u>
2	If the tax year entered in line 1 is for less than 12 months, check reason:	Initial return	Final retur	า	
	Change in accounting period				
3a	If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentativ	re tax, less			
	any nonrefundable credits. See instructions.		3a	\$	0.
b	If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refund	able credits and			
	estimated tax payments made. Include any prior year overpayment allowed as	a credit.	3b	\$	0.
С	Balance due. Subtract line 3b from line 3a. Include your payment with this fo	rm, if required, by			
	using EFTPS (Electronic Federal Tax Payment System). See instructions.		3c	\$	0.
For	Privacy Act and Paperwork Reduction Act Notice, see instructions.			Foi	rm 8868 (Rev. 1-2024)

10			n 990 (202:
4d 4e	Other program services (Describe on Schedule O.) (Expenses \$ 29,799,186. including grants of \$ 3,479,690.) (Revenue \$ Total program service expenses 106,307,207.	0.)	
4c	(Code:) (Expenses \$10,237,284. including grants of \$138,918.) (Revenue \$ SEE SCHEDULE O		0.
4b	(Code:) (Expenses \$11,899,245. including grants of \$3,165,991.) (Revenue \$ SEE SCHEDULE O		0.
4a	(Code:) (Expenses \$54,371,492. including grants of \$3,281,573.) (Revenue \$ SEE SCHEDULE O		0.
-	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, th revenue, if any, for each program service reported.	e total expenses	
3 4	Did the organization cease conducting, or make significant changes in how it conducts, any program services? If "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest program services, as meas		es X No
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O.		es X No
1	Briefly describe the organization's mission: SEE SCHEDULE 0		

Form 990 (2023) Part IV Checklist of Required Schedules

HARLEM CHILDREN'S ZONE, INC.

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
_	during the tax year? If "Yes," complete Schedule C, Part II	4	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	_		v
~	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		<u>x</u>
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	6		x
7	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		
'	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If</i> "Yes," <i>complete Schedule D, Part II</i>	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	-		
0	Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for	0		
Ŭ	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	-		
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10	х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	X	
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in		v	
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	X	
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
t	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		v	
10-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	100		x
h	Schedule D, Parts XI and XII	12a		
D		12b	х	
13	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		x
14a		14a		x
	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	х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	X	<u> </u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			v
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i>	20a		<u>x</u>
	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? <i>If</i> "Yes," <i>complete Schedule I, Parts I and II</i>	21	х	
332003	admestic government on Part IX, column (A), line 17 If "Yes," complete Schedule I, Parts I and II			(2023)

332003 12-21-23

2023.05070 HARLEM CHILDREN'S ZONE, I 01804211

4

Form 990 (2023) HARLEM CHILDREN'S ZONE, INC Part IV Checklist of Required Schedules (continued) HARLEM CHILDREN'S ZONE, INC.

			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	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete	23	х	
24 a	Schedule J Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	23		
210	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
с	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		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			x
06	Schedule L, Part I	25b		^
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		x
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		х
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
00	"Yes," complete Schedule L, Part IV	28c	X X	
29 20	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29	_A	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	30		x
31	contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	Х	
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	Х	
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X	
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			v
20	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	36		x
37	If "Yes," complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization	30		
07	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	х	
Par	t 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
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 32			
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
с	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	10	х	
332004	(gambing) winnings to prize winners?	1c Form	<u>^</u> 990	(2023)
552004	5	1 0111		(_020)

Page 4 23 - 7112974

14070513 153424 0180421-00005

2023.05070 HARLEM CHILDREN'S ZONE, I 01804211

Form	990 (2023) HARLEM CHILDREN'S ZONE, INC. 23-711297	4	Р	age 5					
Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)								
			Yes	No					
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 1768								
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	x					
3a									
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O								
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a								
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X					
b	If "Yes," enter the name of the foreign country								
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).								
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X					
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X					
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c							
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit								
	any contributions that were not tax deductible as charitable contributions?	6a		X					
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts								
_	were not tax deductible?	6b							
7	Organizations that may receive deductible contributions under section 170(c).	_	77						
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	X						
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X						
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	-		x					
		7c							
	If "Yes," indicate the number of Forms 8282 filed during the year 7d	-		x					
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X					
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f 7~		<u>л</u>					
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g 7h							
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	0							
0	sponsoring organization have excess business holdings at any time during the year?	8							
9	Sponsoring organizations maintaining donor advised funds.	00							
a b	Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	<u>9a</u> 9b							
ь 10	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	90							
а	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								
b	Gross income from other sources. (Do not net amounts due or paid to other sources against								
~	amounts due or received from them.)								
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a							
	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.								
а	Is the organization licensed to issue qualified health plans in more than one state?	13a							
	Note: See the instructions for additional information the organization must report on Schedule O.								
b	Enter the amount of reserves the organization is required to maintain by the states in which the								
	organization is licensed to issue qualified health plans								
с	Enter the amount of reserves on hand								
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		х					
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on 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?	15		X					
	If "Yes," see the instructions and file Form 4720, Schedule N.								
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		х					
	If "Yes," complete Form 4720, Schedule O.								
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities								
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17							
	If "Yes," complete Form 6069.		0000						
332005	12-21-23	Form	990	(2023)					

14070513 153424 0180421-00005

⁶ 2023.05070 HARLEM CHILDREN'S ZONE, I 01804211

Form	990 (2023) HARLEM CHILDREN'S ZONE, INC.		23-711297			age 6
Par	t VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 th	nrough	7b below, and for a	"No" r	respon	se
	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O.					
	Check if Schedule O contains a response or note to any line in this Part VI					X
Sec	tion A. Governing Body and Management					
					Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	17			
	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 on Schedule O.					
b	Enter the number of voting members included on line 1a, above, who are independent	1b	15			
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		х
3	Did the organization delegate control over management duties customarily performed by or under the					
				3		x
4	Did the organization make any significant changes to its governing documents since the prior Form 9			4		x
5	Did the organization become aware during the year of a significant diversion of the organization's ass			5		x
6	Did the organization have members or stockholders?			6		x
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap					
	more members of the governing body?			7a		x
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, st					
	persons other than the governing body?			7b		x
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the yea					
а	The governing body?		-	8a	х	
b	Each committee with authority to act on behalf of the governing body?			8b	х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read					
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O			9		x
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re					
					Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a		X
	If "Yes," did the organization have written policies and procedures governing the activities of such ch					
	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	befor	e filing the form?	11a	Х	
b	Describe on 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	Х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise			12b	Х	
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	'es," d	escribe			
	on Schedule O how this was done			12c	Х	
13	Did the organization have a written whistleblower policy?			13	Х	
14	Did the organization have a written document retention and destruction policy?			14	Х	
15	Did the process for determining compensation of the following persons include a review and approva	l by in	dependent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					
а	The organization's CEO, Executive Director, or top management official			15a	Х	
b	Other officers or key employees of the organization			15b	Х	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangen	nent w	ith a			
	taxable entity during the year?			16a		x
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluat	e its p	articipation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ	izatior	'S			
	exempt status with respect to such arrangements?			16b		
Sec	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed					
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and	nd 990	-T (section 501(c)(3)s	s only)	availat	ole
	for public inspection. Indicate how you made these available. Check all that apply.					
	X Own website Another's website X Upon request Other (explain	on Sc	hedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, co			l financ	cial	
	statements available to the public during the tax year.					
20	State the name, address, and telephone number of the person who possesses the organization's boo	ks and	d records			
	JOHN MACAPAGAL - 212-360-3255					
	35 EAST 125TH STREET, NEW YORK, NY 10035					_
332006) 12-21-23			Form	990	(2023)
	7					
705	13 153424 0180421-00005 2023.05070 HARLEM CI	HIL	DREN'S ZONE	1, I	01	804

140

211

Form 990 (2		23-7112974	Page 1							
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 the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See the 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)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average	Position (do not check more than one				ne	Reportable	Reportable	Estimated	
	hours per	box	box, unless person is both an			s both	n an	compensation	compensation	amount of
	week		officer and a director/trustee)			r/trus	tee)	from	from related	other
	(list any	ector						the	organizations	compensation
	hours for	or di	ee			ated		organization	(W-2/1099-MISC/	from the
	related	ustee	trust		96	suadu		(W-2/1099-MISC/ 1099-NEC)	1099-NEC)	organization and related
	organizations below	ual tr	tional		yolqr	vee Vee	_	1039-1120)		organizations
	line)	In dividual trustee or director	In stit utio nal tru stee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) KWAME OWUSU-KESSE	40.00		-			<u> </u>				
CEO	4.00	х		х				918,740.	0.	247,633.
(2) GEOFFREY CANADA	40.00									
PRESIDENT	4.00	х		х				735,183.	0.	217,633.
(3) JAZMINE LEWIS	40.00									
CHIEF STRATEGY OFFICER	0.00				х			428,346.	0.	109,619.
(4) NANA A. ANNAN	40.00									
COO (THRU 07/2023)	4.00			х				405,575.	0.	122,381.
(5) CONNOR FOURNIER	40.00									
CFO (THRU 02/2024)	4.00			х				396,584.	0.	87,393.
(6) JENNIFER KLEIN	40.00									
CHIEF DEVELOPMENT OFFICER	0.00				Х			367,720.	0.	110,128.
(7) JUSTIN MAKER	40.00									
SR. MANAGING DIR, HR (THRU 01/2024)	0.00				х			365,901.	0.	42,017.
(8) STEPHANIE C. LILAVOIS	40.00									
CHIEF COMMUNICATIONS OFFICER	0.00				х			282,887.	0.	98,168.
(9) CHRISTIAN RHODES	40.00							205 004		
DEPUTY EXECUTIVE DIRECTOR	0.00				X			307,981.	0.	22,339.
(10) GREGORY FORBES	40.00					x		250 454	0.	60 800
MANAGING DIRECTOR, ECONOMIC MOBILITY (11) TIFFANY FOUNTAIN	0.00 40.00							250,454.	υ.	69,800.
SENIOR ADVISOR	0.00					x		248,056.	0.	50,688.
(12) LINDA N. IBUZOR	40.00							210,000.	••	
CONTROLLER	0.00					x		248,950.	0.	42,735.
(13) LIAM MCCARTHY	40.00							,		, ,
MANAGING DIRECTOR, DEVELOPMENT	0.00					x		239,441.	0.	33,617.
(14) SERINA MOYA	40.00									
MGN DIRECTOR, HCZ K-12 AFTERSCHOOL	0.00					x		236,539.	0.	27,135.
(15) MICHAEL POHLY	40.00									
CHIEF INVESTMENT OFFICER	0.00				х			171,021.	0.	63,643.
(16) RALPH STEFANO	2.00									
INTERM CFO (AS OF 02/2024)	42.00			х				٥.	0.	0.
(17) STANLEY F. DRUCKENMILLER	1.00									
CHAIRMAN EMERITUS (NON-VOTING)	4.00	Х		Х				0.	0.	0.
332007 12-21-23					_					Form 990 (2023)

14070513 153424 0180421-00005

8

Form 990 (2023) HARLEM CHILDE	REN'S ZONE,	IN	c.						23-71	1297	4	Pa	age 8
Part VII Section A. Officers, Directors, Trust	tees, Key Em	oloy	ees,	and	l Hig	ghes	st C	ompensated Employee	s (continued)				
(A)	(B)			(0				(D)	(E)			(F)	
Name and title	Position						Reportable	Reportable		Fs	timate	h	
	hours per	(do not check more than one box, unless person is both an						compensation	compensatio			nount	
	officer and a director/trustee)					from	from related			other	51		
	(list any	tor						the	organization		com	pensa	tion
	hours for	direc				5		organization	(W-2/1099-MIS			om the	
	related	ee or	stee			nsate		(W-2/1099-MISC/	1099-NEC)		org	anizati	on
	organizations	trust	al tru		yee	ompe		1099-NEC)			an	d relate	ed
	below	Individual trustee or director	Institutional trustee	5	Key employee	Highest compensated employee	er				orga	anizatio	ons
	line)	Indiv	Instit	Officer	Key e	High empl	Former						
(18) KEITH MEISTER	1.00												
CHAIRMAN	4.00	х		х				0.		Ο.			Ο.
(19) STEPHANIE COLEMAN	1.00												
VICE CHAIR	0.00	х		x				0.		Ο.			Ο.
(20) MITCH KURZ	1.00												
TREASURER	4.00	x		x				0.		Ο.			Ο.
		Λ		^				· · ·		<u> </u>			
(21) MATTHEW C. BLANK	1.00												
SECRETARY	0.00	Х		Х				0.		٥.			0.
(22) DOUG BUCKMINSTER	1.00									I			
BOARD MEMBER	0.00	Х						0.		0.			0.
(23) ALEXANDER Z. COHEN	1.00									I			
BOARD MEMBER	0.00	х						0.		Ο.			Ο.
(24) DON K. CORNWELL	1.00												
BOARD MEMBER	0.00	х						0.		Ο.			٥.
(25) ANITA ELBERSE	1.00									-			
BOARD MEMBER	0.00	x						0.		Ο.			٥.
(26) BRIAN HIGGINS	1.00							·.					
		v						0		٥.			0
BOARD MEMBER 0.00 X 0.										0.	1	244	0.
1b Subtotal 5,603,378.											<u> </u>	,344,	
c Total from continuation sheets to Part VII, Section A										0.			0.
d Total (add lines 1b and 1c)								5,603,378.		٥.	1	,344,	929.
2 Total number of individuals (including but no	ot limited to th	ose	liste	d ab	ove) wh	o re	eceived more than \$100,	000 of reportable	Э			
compensation from the organization													67
												Yes	No
3 Did the organization list any former officer,	director, trust	ee, k	key e	empl	oye	e, or	hig	phest compensated empl	oyee on	I			
line 1a? If "Yes," complete Schedule J for su	uch individual										3		Х
4 For any individual listed on line 1a, is the su													
and related organizations greater than \$150										I	4	х	
5 Did any person listed on line 1a receive or a													
rendered to the organization? If "Yes." com	-				-			-		I	5		х
Section B. Independent Contractors	Diele Schedule	50 1	01 30		5613	011 .							
1 Complete this table for your five highest cor	nnensated inc	lene	nde	nt co	ontra	actor	rs th	nat received more than \$	100 000 of com	hensa	tion fro	m	
the organization. Report compensation for t	•								, ,	Joniou			
	ne calendar ye	sai e	nuii	iy w	iun c							~	
(A) Name and business	address							(B) Description of s	ervices	C)) Compe	•) nsatior	n
MCKINSEY & COMPANY INC							_	Becomption of e			, empe	loadioi	
												0 - 0	
9 CANAL STREET, WESPORT, CT 06880							_	STRATEGIC CONSULTI	NG SERVICES			950,	000.
THE BRIDGESPAN GROUP, 2 COPLEY PLACE,	,												
SUITE 37008, BOSTON, MA 02116								STRATEGIC CONSULTI	NG SERVICES			740,	711.
SKADDEN ARPS SLATE MEAGHER & FLOM LLE													
P.O. BOX 1764, WHITE PLAINS, NY 10602	2							LEGAL SERVICES				630,	260.
SOROBAN CAPITAL PARTNERS LP, 55 W 467	TH												
STREET, 32ND FL, NEW YORK, NY 10036								INVESTMENT MANAGEM	ENT			613,	360.
FENTON COMMUNICATIONS INC., 1010 VERN	IONT												
AVENUE NW, SUITE 1100, WASHINGTON, DO								TELECOMMUNICATION	SERVICES			402,	500.
2 Total number of independent contractors (including but not limited to those listed above) who received more than													
\$100,000 of compensation from the organiz	•	or m	met		35		ιοu						
SEE PART VII, SECTION A CONTINU		ŢЯ			5.						Form	990 (2	2022)
SEE THAT ATT, SECTION A CONTINC											LOUID		±∪∠3)

332008 12-21-23

	DREN'S ZONE,			-				• • • • •	23-71129	//4
		nplo	yee			ligh	est		. ,	
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average hours	10			ition that		L)	Reportable	Reportable compensation	Estimated amount of
		(C	T	(aii) T	Inal	app T	iy)	compensation from	from related	other
	per week					e		the	organizations	compensatio
	(list any	ctor				yolq		organization	(W-2/1099-MISC)	from the
	hours for	r dire				ed en		(W-2/1099-MISC)	,	organizatior
	related	tee o	ustee			ensat				and related
	organizations	Individual trustee or director	Institutional trustee		Key employee	Highest com pensated em ployee				organization
	below	ividua	titutio	Officer	/ em p	hest o	Former			
	line)	Ind	Inst	Offi	Key	Hig	For			
(27) MARK KINGDON	1.00									
BOARD MEMBER	0.00	х						٥.	0.	
(28) PHILIPPE LAFFONT	1.00									
BOARD MEMBER	0.00	х						0.	0.	
(29) KENNETH G. LANGONE	1.00									
SOARD MEMBER (NON-VOTING)	4.00	х						٥.	0.	
(30) ERIC W. MANDELBLATT	1.00									
BOARD MEMBER	0.00	х						0.	0.	
(31) BENITA MELTON	1.00									
BOARD MEMBER (AS OF 10/2023)	0.00	х						0.	0.	
(32) ZACHARY J. SCHREIBER	1.00									
SOARD MEMBER	0.00	х						0.	0.	
(33) ASHOK VARADHAN	1.00									
SOARD MEMBER	0.00	Х						٥.	٥.	
		1								
		1								
		1								
		1								
		1								
		÷				i i		1		

332201 04-01-23

Sector Construction Dusiness reveaue Introduction add provided and protentice provided and provided and provided and protentification	Pa	rt VII								
Total revenue Pelated or exempt function revenue Dureitated Dusiness revenue How the revenue function revenue I a Federated campaigns ta b Membership dues ta c Function revenue ta d Pelated organizations ta d Related organizations ta e Romerment grants (contributions, diffs, grants, and similar amount loot duced above, e c ta d Related organizations ta e Romerment grants (contributions, diffs, grants, and similar amount loot duced above, e c ta g Romerat cantibute inset at 1 93, 324, 113. g Romerat cantibute inset at 1 93, 324, 113. g Romerat cantibute inset at 1 93, 324, 113. g Romerat cantibute inset at 1 93, 324, 113. g Romerat cantibute inset at 1 93, 324, 113. g Romerat cantibute inset at 1 93, 324, 113. g Romerat cantibute inset at 1 93, 324, 113. g Romerat cantibute inset at 1 93, 324, 113. g Romerat cantibute inset at 1 93, 324, 113. g Romerat cantibute inset at 1 93, 324, 113. g Romerat cantibute inset at 1 93, 324, 113. g Romerat cantibute inset at 1 1, 294, 103. g Romerat cantibute inset at 1 1, 294, 103. g Romerat cantibute inset at 1 1, 294, 103.			Check if Schedule O c	contains a respo	onse o	<u>r note to any line</u> I	<u>e in this Part VIII</u> (A)	(B)	(C)	[]
and the second of the								Related or exempt	Unrelated	Revenue excluded
age of the program service revenue 1								function revenue	business revenue	from tax under sections 512 - 514
Bot Membership dues Ib Ib <td>10 10</td> <td></td> <td>Enderstad service inter-</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>360110113 3 12 - 3 14</td>	10 10		Enderstad service inter-							360110113 3 12 - 3 14
Business Code Business Code Image: Code state of the	ints	1 a								
Business Code Business Code Image: Code state	Gra	b				11 042 924				
Business Code Business Code Image: Code state	An An	c				11,942,824.				
Business Code Business Code Image: Code state of the	Gif	d				4 015 552				
Business Code Business Code Image: Code state	ns,	е				4,015,553.				
Business Code Business Code Image: Code state	er	f								
Business Code Business Code Image: Code state	ēĦ									
Business Code Business Code Image: Code state of the	ont od (g					02 224 112			
generation 2 a	<u>o</u> e	h	Total. Add lines 1a-1f				93,324,113.			
g Total. Add lines 2a-2f		_			F	Business Code				
g Total. Add lines 2a-2f	ice									
g Total. Add lines 2a-2f	er v	b								
g Total. Add lines 2a-2f	n S ien	С								
g Total. Add lines 2a-2f	Jrar Be∖	d			—					
g Total. Add lines 2a-2f	roc				—					
3 Investment income (including dividends, interest, and other similar amounts) 1,294,103. 1,294,103. 4 Income from investment of tax-exempt bond proceeds 1,294,103. 1,294 6 a Gross rents a income from investment of tax-exempt bond proceeds income from investment of tax-exempt bond proceeds 6 a Gross rents b Less: rental expenses b 0 income from from from from from from from from	₽.									
other similar amounts) 1,294,103. 1,294 4 Income from investment of tax-exempt bond proceeds 5 Royatties 6 a Gross rents Ga (i) Personal b Less: rental expenses Gb 0. c Rental income or (loss) Gc 4,201,157. 4,201,157. d Net rental income or (loss) Gc 4,201,157. 4,201 7 a Gross amount from sales of assets other than inventory Ta 92,911,911. 4,201,157. 4,201 b Less: cost or other basis Ta 93,728,195. </td <td></td>										
4 Income from investment of tax-exempt bond proceeds 5 Royalties		3		e ,		´ I	1 204 102			1 204 102
5 Royatties (i) Real (ii) Personal 6 a Gross rents 6a 4, 201, 157. 6b 0. b Less: rental expenses 6b 0. 6c 4, 201, 157. 4, 201, 157. 7 a Gross amount from sales of assets other than inventory 6c 4, 201, 157. 4, 201, 157. 4, 201 9 6 Gross neome or (loss)			,				1,294,103.			1,294,103.
Ge Gross rents Ge (i) Peal (ii) Personal b Less: rental expenses Gb 0.				•		oceeds				
6 a Gross rents 6a 4,201,157. b Less: rental expenses 6b 0. c Rental income or (loss) 6c 4,201,157. d Net rental income or (loss) 10 Securities f a Gross amount from sales of assets other than inventory 10 Securities b Less: cost or other basis and sales expenses 7b 93,728,195. c Gain or (loss) 7c -816,284. d Net gain or (loss) -816,284. d Net gain or (loss) -816,284. e Rest direct expenses 8a 423,950. B a Gross income from fundraising events -9,138. e Net income or (loss) from fundraising events -9,138. 9 a Gross sincome from gaming activities. See 9a p a Gross sincome from gaming activities. 9a g a Gross sincome from gaming activities. -9,138. 10 a Gross sales of inventory, less returns and allowances 10a b Less: cost of goods sold 10a		5	Royalties			(ii) Porsonal				
b Less: rental expenses 6b 0. c Rental income or (loss) 6c 4,201,157. 4,201,157. d Net rental income or (loss) 4,201,157. 4,201 7 a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses (i) Securities (ii) Other add sale expenses 7a 93,728,195. -816,284. -816,284. -816 c Gain or (loss) 7a -816,284. -816,284. -816 8 a Gross income from fundraising events (not including \$ 11,942,824. of contributions reported on line 1c). See Part IV, line 18 8b 433,088. -9 9 a Gross income from gaming activities. See Part IV, line 19 9a -9 9a -9 b Less: cirect expenses 9b -9 9a -9 9a -9 10 a Gross sales of inventory, less returns and allowances 10a 10b -9 -9 b Less: cost of goods sold 10b 10b -9 -9 -9 -9 <td></td> <td>•</td> <td>0</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>		•	0							
c Rental income or (loss) 6c 4,201,157. 4,201,157. d Net rental income or (loss) (i) Securities (ii) Other assets other than inventory b Less: cost or other basis and sales expenses (i) Securities (ii) Other ra 73a 93,728,195. 7c -816,284. -816,284. d Net gain or (loss) 7c -816,284. -816,284. -816 d Net gain or (loss) 11,942,824. of contributions reported on line 1c). See 8a 423,950. B Gross income from fundraising events -9,138. -9 -9 9 a Gross sincome from gaming activities. See 9a 9b -9 9 a Gross sales of inventory, less returns and allowances 9b -9 -9 10 a Gross sales of inventory, less returns and allowances 10a 10b -0 b Less: cost of goods sold 10b -0 -0 c Net income or (loss) from sales of inventory -9 -9 -9										
d Net rental income or (loss) 4,201,157. 4,201 7 a Gross amount from sales of assets other than inventory 92,911,911. 92,911,911. b Less: cost or other basis and sales expenses 7b 93,728,195. c Gain or (loss) 7c -816,284. -816,284. d Net gain or (loss) -816,284. -816,284. -816 8 Gross income from fundraising events (not including \$1,942,824. of contributions reported on line 1c). See Part IV, line 18 8a 423,950. 9 Less: direct expenses 8b 433,088. -9,138. -9 9 a Gross income from gaming activities. See Part IV, line 19 9a -9 -9 -9 9 a Gross sales of inventory, less returns and allowances 9b -0 -9 -9 10 a Gross sales of inventory, less returns and allowances 10a 10b 10b 0b 0 Less: cost of goods sold 10b 0b 0c 0c 0c 0 Less: cost of goods sold 10b 0c 0c 0c 0c 0 Less: cost of goods sold <										
7 a Gross amount from sales of assets other than inventory 7 a Gross amount from sales of assets other than inventory 7 a Gross amount from sales of assets other than inventory 7 a Gross amount from sales of assets other than inventory 7 a Gross amount from sales of assets other than inventory 7 a Gross amount from sales of assets other than inventory 7 a Gross and sales expenses 7 a Gross and sales expenses 7 b Gross and sales expenses 7 b Gross and sales expenses 7 b Gross and sales expenses -816, 284. -816 C Gain or (loss) -816, 284. -816, 284. -816 -816 8 a Gross income from fundraising events (not including \$ 11, 942, 824. of contributions reported on line 1c). See 8 a 423, 950. 8 a 423, 950. b Less: direct expenses 8 b 433, 088. -9, 138. -9 9 a Gross income from gaming activities. See Part IV, line 19 9 a -9 9 a b Less: direct expenses 9 b -9 -9 -9 10 a Gross sales of inventory, less returns and allowances 10 a 10 a 10 a b Less: cost of goods sold 10 b 10 b -9 c Net income or (loss) from sales of inventory 10 a 10 b -9						4 201 157			4,201,157.	
assets other than inventory Ta 92,911,911.			· · · ·				4,201,137.			4,201,137.
b Less: cost or other basis and sales expenses 7b 93,728,195. 7c -816,284. c Gain or (loss) 7c -816,284. -816,284. d Net gain or (loss) -816,284. -816 8 a Gross income from fundraising events (not including \$11,942,824. of contributions reported on line 1c). See Part IV, line 18 -8a 423,950. 8b -816,284. b Less: direct expenses 8a 423,950. 8b -9,138. -9 9 a Gross income from gaming activities. See Part IV, line 19 9a -9 -9 b Less: direct expenses 9b -9 -9 b Less: direct expenses 9b -9 b Less: direct expenses 9b -9 b Less: direct expenses 9b -9 b Less: cost of goods sold 10a -9 b Less: cost of goods sold 10b -9 c Net income or (loss) from sales of inventory -0 c Net income or (loss) from sales of inventory -0 c Net income or (loss) from sales of inventory -0 <td></td> <td><i>i</i> a</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>		<i>i</i> a								
and sales expenses 7b 93,728,195.				7a 52, 511, 5	,					
G Gain or (loss) Tc -816,284. -816,284. d Net gain or (loss) -816,284. -816,284. -816 8 Gross income from fundraising events (not including \$\11,942,8240f contributions reported on line 1c). See 8 423,950. 8 423,950. 8 -9,138. -9 9 Gross income or (loss) from fundraising events -9,138. -9 -9 -9 9 Gross income from gaming activities. See Part IV, line 19 9 9 -9 -9 9 Gross sincome or (loss) from fundraising events -9,138. -9 -9 9 Gross income from gaming activities. See Part IV, line 19 9 -9 -9 9 Gross sales of inventory, less returns and allowances 0 0 -0 b Less: cost of goods sold 100 00 00 00 b Less: cost of goods sold 100 00 00 00 00 b Less: cost of goods sold 100 00 00 00 00 00	ø	a		7. 93 728 1	195					
8 a Gross income from fundraising events (not including \$11,942,824. of contributions reported on line 1c). See Part IV, line 18	nu									
8 a Gross income from fundraising events (not including \$11,942,824. of contributions reported on line 1c). See Part IV, line 18	eve			· · · · ·			-816 284			-816,284.
B including \$11,942,824. of contributions reported on line 1c). See Part IV, line 18	۲ ۳						010,204.			010,204.
contributions reported on line 1c). See Part IV, line 18 b Less: direct expenses c Net income or (loss) from fundraising events -9,138. -9,138. -9 9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses 9b c Net income or (loss) from gaming activities. 9a 9b b Less: direct expenses 9b c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold 0b c Net income or (loss) from sales of inventory Business Code	the	8 a								
Part IV, line 18 Ba 423,950. b Less: direct expenses Bb 433,088. c Net income or (loss) from fundraising events -9,138. -9 9 a Gross income from gaming activities. See Part IV, line 19 9a -9 b Less: direct expenses 9b -9 c Net income or (loss) from gaming activities 9a -9 b Less: direct expenses 9b -9 c Net income or (loss) from gaming activities -9 10 a Gross sales of inventory, less returns and allowances 10a b Less: cost of goods sold 10b -9 c Net income or (loss) from sales of inventory -9 Business Code -9 -9	0									
b Less: direct expenses 8b 433,088. c Net income or (loss) from fundraising events -9,138. -9 9 a Gross income from gaming activities. See Part IV, line 19 9a -9 b Less: direct expenses 9b -9 -9 c Net income or (loss) from gaming activities -9 -9 b Less: direct expenses 9b -9 c Net income or (loss) from gaming activities -0 -0 10 a Gross sales of inventory, less returns and allowances 10a -0 b Less: cost of goods sold 10b -0 -0 c Net income or (loss) from sales of inventory -0 -0 Business Code Business Code -0 -0			-	-	0.0	423 950				
c Net income or (loss) from fundraising events -9,138. -9 9 a Gross income from gaming activities. See Part IV, line 19 9a 9b -9 b Less: direct expenses 9b 9b -9 c Net income or (loss) from gaming activities 9b -9 10 a Gross sales of inventory, less returns and allowances 10a 10a b Less: cost of goods sold 10b -9 c Net income or (loss) from sales of inventory Business Code 0		L								
9 a Gross income from gaming activities. See Part IV, line 19 9a 9a b Less: direct expenses 9b 9b c Net income or (loss) from gaming activities 9b 0 10 a Gross sales of inventory, less returns and allowances 10a 10a b Less: cost of goods sold 10b 0 c Net income or (loss) from sales of inventory Business Code 0					<u> </u>	· · · ·	_9 138			-9,138.
Part IV, line 19 9a b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory			, ,	•			5,100.			5,100.
b Less: direct expenses 9b c Net income or (loss) from gaming activities		9 a								
c Net income or (loss) from gaming activities Image: Constraint of the second sec		h								
10 a 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 Business Code										
and allowances 10a b Less: cost of goods sold 10b c Net income or (loss) from sales of inventory Business Code				0 0						
b Less: cost of goods sold 10b Image: cost of goods sold Image: co		iv d			109					
c Net income or (loss) from sales of inventory		h								
Business Code					· · · ·					
11 a MISCELLANEOUS REVENUE 900099 244,360. 244 b		<u> </u>			<u>, y</u>					
	sn	11 🤉	MISCELLANEOUS REVEN	UE	ŀ		244 360.			244,360.
	neo	a			—		,			,
	∋llaı Ver	c c			—					
d All other revenue	Be	с А	All other revenue		—					
E Image: Control of the im	Σ				_		244 360			
								0.	0.	4,914,198.
	332004					I	, , =-			Form 990 (2023)

HARLEM CHILDREN'S ZONE, INC.

Form 990 (2023)

Page **9**

23 - 7112974

HARLEM CHILDREN'S ZONE. TNC

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

23-7112974 Page 10

Check if Schedule O contains a response or note to any line in this Part IX (B) (C) (D) (A) Do not include amounts reported on lines 6b. Total expenses Management and general expenses Program service Fundraising 7b, 8b, 9b, and 10b of Part VIII. expenses expenses Grants and other assistance to domestic organizations 1 4,198,822 4,198,822. and domestic governments. See Part IV, line 21 2 Grants and other assistance to domestic 5,867,350. 5,867,350. individuals. See Part IV, line 22 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members 4 5 Compensation of current officers, directors, 2,488,890. trustees, and key employees 2,933,517. 360,165. 84,462. 6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 52,512,536. 44,553,310. 6,447,279. 1,511,947. Other salaries and wages 7 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 2,696,326 2,146,603 462,376 87,347. 4,631,254 3,789,840 664,232 177,182. 9 Other employee benefits 4,749,632. 511,156 117,268. 4,121,208 10 Payroll taxes 11 Fees for services (nonemployees): Management а 1,448,331 1,448,331. b Legal 394,357 394,357, С Accounting 120,000 120,000 Lobbying d Professional fundraising services. See Part IV, line 17 е 8,291,201 8,291,201. Investment management fees f Other. (If line 11g amount exceeds 10% of line 25, g 11,338,085 10,312,003. 1,003,982 22,100. column (A), amount, list line 11g expenses on Sch 0.) 649,997 31,250, 618,747 Advertising and promotion 12 291,882. 307,433. 14,802 749. 13 Office expenses 3,015,805 2,286,332 721,119 8,354. 14 Information technology 15 Royalties 15,223,887 13,758,276. 1,446,146 19,465. 16 Occupancy 2,134,905 31,436 2,102,669 800. Travel 17 18 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 19 20 Interest Payments to affiliates 21 2,871,199 1,956,884 914,315 22 Depreciation, depletion, and amortization 1,008,541 1,008,541. 23 Insurance Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.) FOOD 2,170,598. 2,093,448. 55,811 21,339. а PUBLICATIONS PRINTING, 2,128,499 1,987,240 117,443 23,816. b EQUIPMENT RENT & MAINT. 1,264,089. 1,099,410. 160,942. 3,737. С 5,232. UTILITIES 912,364. 670,006 237,126 d 3,004,090, 509,830 62,476. 2,431,784 All other expenses е 133,872,818 106,307,207 25,419,337 2,146,274. Total functional expenses. Add lines 1 through 24e 25 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)

12

332010 12-21-23

14070513 153424 0180421-00005

Form 990 (2023)

					Beginning of year		End of your
	1	Cash - non-interest-bearing			181,480.	1	166,357.
	2	Savings and temporary cash investments			141,046,547.	2	69,712,286.
	3	Pledges and grants receivable, net			44,288,681.	3	32,938,605.
	4	Accounts receivable, net		567,614.	4	1,081,232.	
	5	Loans and other receivables from any current or		,		, ,	
	Ŭ	trustee, key employee, creator or founder, subst					
		controlled entity or family member of any of these			5		
	6						
	0	Loans and other receivables from other disqualit				6	
	-	under section 4958(f)(1)), and persons described				6 7	
ets	7	Notes and loans receivable, net					
Assets	8	Inventories for sale or use			2 241 572	8	3,705,929.
	9				3,241,572.	9	5,705,929.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	186,977,529.			
	b	Less: accumulated depreciation	10b	64,863,145.	123,136,124.	10c	122,114,384.
	11	Investments - publicly traded securities			24,671,875.	11	18,415,575.
	12	Investments - other securities. See Part IV, line 1			633,469,055.	12	836,734,542.
	13	Investments - program-related. See Part IV, line	I1			13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			90,446,979.	15	84,550,376.
	16	Total assets. Add lines 1 through 15 (must equa			1,061,049,927.	16	1,169,419,286.
	17	Accounts payable and accrued expenses			12,543,504.	17	14,202,625.
	18	Grants payable			56,791,351.	18	54,959,372.
	19	Deferred revenue			19		
	20	Tax-exempt bond liabilities			20		
	21	Escrow or custodial account liability. Complete I			21		
	22	Loans and other payables to any current or form					
ţi		trustee, key employee, creator or founder, subst					
Liabilities		controlled entity or family member of any of thes				22	
Lia	23	Secured mortgages and notes payable to unrela	-			23	
	24	Unsecured notes and loans payable to unrelated				24	
	2 . 25	Other liabilities (including federal income tax, pa					
	25	parties, and other liabilities not included on lines					
					124,500,935.	25	116,720,823.
	06				193,835,790.	25	185,882,820.
	26			X	199,000,790.	20	100,001,010;
es		Organizations that follow FASB ASC 958, che	ck nere				
ဦ	~=	and complete lines 27, 28, 32, and 33.			770 147 091		903,489,679.
alai	27	Net assets without donor restrictions			779,147,081. 88,067,056.	27	
Ä	28				00,007,050.	28	80,046,787.
Š		Organizations that do not follow FASB ASC 9	here				
۳. ۲		and complete lines 29 through 33.					
ţ	29	Capital stock or trust principal, or current funds		29			
se	30	Paid-in or capital surplus, or land, building, or ec				30	
Net Assets or Fund Balanc	31	Retained earnings, endowment, accumulated in				31	
Nei	32	Total net assets or fund balances		L	867,214,137.	32	983,536,466.
	33				1,061,049,927.	33	1,169,419,286.

14070513 153424 0180421-00005

(B) End of year

(A) Beginning of year

Form 990 (2023)
Part X | Balance Sheet

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

Form	1990 (2023) HARLEM CHILDREN'S ZONE, INC.	23-71129	74	Pa	_{ge} 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	98,	,238,	311.
2	Total expenses (must equal Part IX, column (A), line 25)	2	133,	,872,	818.
3	Revenue less expenses. Subtract line 2 from line 1	3	-35,	,634,	507.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	867	,214,	137.
5	Net unrealized gains (losses) on investments	5	151,	,721,	708.
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 on Schedule O)	9		235,	128.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	983	,536,	466.
Pa	rt 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 X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	e O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	l 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	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,			
	consolidated basis, or both:				
	Separate basis X Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of th				
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	edule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a	X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b	X 000	

Form **990** (2023)

332012 12-21-23

(Form 990)

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.

OMB No. 1545-0047	
2023	

Onen to Public

Namo	of the	organizat	ion
INALLE		UI UAI IIZAL	IUII

Department	of the Treasury		Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for instructions and the latest information.						Open to Public Inspection	
Name of the organization			Go to www.irs.gov/	Form990 for instruction	ns and the	e latest inf	ormation.	Employer	-	
Name of	the organizati		CHILDREN'S ZON	IE INC					identification numbe 23-7112974	
Part I	HARLEM CHILDREN'S ZONE, INC. Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.							23-1112914		
								15.		
1		-	-	For lines 1 through 12, c on of churches describec	-	-	()(A)(i)			
2	-			Attach Schedule E (Forn			•,\\~,\\')•			
3)/h//1///ii	ii)			
4	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name,									
•	city, and stat	+						,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
5	•		or the benefit of a co	llege or university owned	d or operat	ed by a go	vernmental u	nit describe	ed in	
			Complete Part II.)	0 ,	•	, ,				
6	A federal, sta	te, or local gov	vernment or governn	nental unit described in	section 17	70(b)(1)(A)	(v).			
7 X	An organizati	on that norma	Illy receives a substa	ntial part of its support fi	rom a gove	ernmental	unit or from th	ne general p	oublic described in	
	section 170(b)(1)(A)(vi). (C	omplete Part II.)							
8	A community	r trust describe	ed in section 170(b)	(1)(A)(vi). (Complete Par	t II.)					
9	An agricultur	al research org	ganization described	in section 170(b)(1)(A)(ix) operate	ed in conju	inction with a	land-grant	college	
	or university	or a non-land-g	grant college of agric	ulture (see instructions).	Enter the	name, city	, and state of	the college	or	
	university:									
10	-		•	than 33 1/3% of its supp				-	-	
				t to certain exceptions;					-	
				(less section 511 tax) fro	om busines	sses acqui	red by the org	anization a	ifter June 30, 1975.	
11 🗌			mplete Part III.)	ively to test for public on	fativ Caa	ocation El	O(a)(4)			
12	-	-	-	ively to test for public sa ively for the benefit of, to	•			rny out the	purposes of one or	
	-	-	-	ed in section 509(a)(1)	-			•		
			-	f supporting organization						
a	_	•		supervised, or controlled		-		-	aivina	
				gularly appoint or elect a	•	-				
		-	complete Part IV, Se	• • • •						
b	Type II. A s	supporting org	anization supervised	l or controlled in connect	tion with it	s supporte	ed organizatio	n(s), by hav	ving	
	control or r	nanagement o	of the supporting orga	anization vested in the sa	ame perso	ns that co	ntrol or mana	ge the supp	ported	
	organizatio	n(s). You mus	t complete Part IV,	Sections A and C.						
c	Type III fur	nctionally inte	grated. A supportin	g organization operated	in connect	tion with, a	and functiona	lly integrate	ed with,	
_	its support	ed organizatio	n(s) (see instructions). You must complete I	Part IV, Se	ections A,	D, and E.			
d		-		porting organization oper				-		
			• •	zation generally must sat			•	l an attentiv	/eness	
				nplete Part IV, Sections						
e		•		written determination fro			Type I, Type	II, Type III		
f Ent	er the number			nally integrated supporti						
			n about the supporte	ed organization(s)						
	(i) Name of supp	<u> </u>	(ii) EIN	(iii) Type of organization	(iv) Is the orga	anization listed ing document?	(v) Amount o	f monetary	(vi) Amount of other	
	organizatior	ı		(described on lines 1-10 above (see instructions))	Yes	No	support (see in	nstructions)	support (see instructions	
Total										
Total							1		I	

Page **2**

 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 fails to qualify under the tests listed below, please complete Part III.)

See	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	132,870,565.	170,129,289.	132,954,468.	98,304,023.	93,324,113.	627,582,458.
2	Tax revenues levied for the organ-						
	ization'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	132,870,565.	170,129,289.	132,954,468.	98,304,023.	93,324,113.	627,582,458.
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)						190,383,271.
	Public support. Subtract line 5 from line 4.						437,199,187.
See	ction B. Total Support	1	F			1	[
	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Amounts from line 4	132,870,565.	170,129,289.	132,954,468.	98,304,023.	93,324,113.	627,582,458.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources \dots	2,226,865.	2,044,800.	2,106,144.	3,569,504.	5,495,260.	15,442,573.
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.)	146,262.	120,929.	126,806.	277,875.	668,310.	, ,
	Total support. Add lines 7 through 10						644,365,213.
	Gross receipts from related activities,					12	
13	First 5 years. If the Form 990 is for the	•	rst, second, third, t	fourth, or fifth tax y	ear as a section 5	01(c)(3)	
0.0	organization, check this box and sto				<u></u>	·····	
	ction C. Computation of Public						67.05
	Public support percentage for 2023 (I					14	67.85 %
	Public support percentage from 2022					15	61.38 %
16a	33 1/3% support test - 2023. If the o						v
	stop here. The organization qualifies		-				
b	33 1/3% support test - 2022. If the				line 15 is 33 1/3%	or more, check the	
	and stop here. The organization qua		•••				
17a	10% -facts-and-circumstances test						
	and if the organization meets the fact			-	-	VI now the organiz	ation
	meets the facts-and-circumstances te	-		• • • •	-		
b	10% -facts-and-circumstances test	-					10% Or
	more, and if the organization meets the						
40	organization meets the facts-and-circl		•				
18	Private foundation. If the organization	on dia not check a	box on line 13, 16a	a, 160, 17a, or 17b	, check this box a		
						Schedule A	(Form 990) 2023

332022 12-21-23

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) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(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 per- formed, 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 bus- iness under section 513						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities						
furnished by a governmental unit to						
the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disgualified 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) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	6 (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 on 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 5 years. If the Form 990 is for the	ne organization's fi	rst, second, third,	fourth, or fifth tax	year as a section	501(c)(3) organ	nization,
check this box and stop here						
Section C. Computation of Public						
15 Public support percentage for 2023 (I		•	column (f))		15	%
16 Public support percentage from 2022					16	%
Section D. Computation of Inves						
17 Investment income percentage for 20					17	%
18 Investment income percentage from					18	%
19a 33 1/3% support tests - 2023. If the						ine 17 is not
more than 33 1/3%, check this box a						
b 33 1/3% support tests - 2022. If the						
line 18 is not more than 33 1/3%, che						tion
20 Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check t	his box and see in		
332023 12-21-23		4 -	,		Sched	lule A (Form 990) 2023
		17	,			

2023.05070 HARLEM CHILDREN'S ZONE, I 01804211

1

2

3a

3b

3c

4a

4b

4c

5a

<u>5b</u> 5<u>c</u>

6

7

8

9a

9b

9c

10a

10b

Yes No

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

18

332024 12-21-23

Schedule A (Form 990) 2023

Yes No

1

2

		Yes	No
1 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 on lines 11b and			
11c below, the governing body of a supported organization?	11a		
b A family member of a person described on line 11a above?	11b		
c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
detail in Part VI.	11c		

Supporting Organi

1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, 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 officers, directors, or trustees were allocated among the	
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	
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,

upervised, or controlled the supporting organization. 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 exception(a)	1		

ation(s) organ 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			
3	the organization maintained a close and continuous working relationship with the supported organization(s). By reason of the relationship described on line 2, above, 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	2		
	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)
•		linal line organization used	to satisfy the integral Fart	rest during the year	1300 1130 000

- The organization satisfied the Activities Test. Complete line 2 below. а
- The organization is the parent of each of its supported organizations. Complete line 3 below. h

С		The organization supported a	a governmental entity.	Describe in Part VI how	you supported a	governmental entity	(see instructions	s).
---	--	------------------------------	------------------------	-------------------------	-----------------	---------------------	-------------------	-----

19

- 2 Activities Test. Answer lines 2a and 2b below.
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? 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.
- b Did the activities described on line 2a, above, 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.
- 3 Parent of Supported Organizations. Answer lines 3a and 3b below.

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.

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 Schedule A (Form 990) 2023

2a

2b

3a

Yes No

332025 12-21-23

14070513 153424 0180421-00005

2023.05070 HARLEM CHILDREN'S ZONE, I 01804211

	dule A (Form 990) 2023 HARLEM CHILDREN S ZONE, INC.			23-7112974 Pag
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Support			
1	Check here if the organization satisfied the Integral Part Test as a qualify	ing trust on N	lov. 20, 1970 (<i>explain in</i>	Part VI). See instruction
	All other Type III non-functionally integrated supporting organizations mu	st complete	Sections A through E.	
Sect	ion 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		
Sect	ion 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):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	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 0.015 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 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 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 have if the current year is the even instinue's first on a new function			nizetion (coo

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

Schedule A (Form 990) 2023

332026 12-21-23

HARLEM CHILDREN'S ZONE, INC.

Schedule A (Form 990) 2023

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

Sect	ion D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exer	mpt purposes		1	
2	Amounts paid to perform activity that directly furthers exemp				
	organizations, in excess of income from activity				
3	Administrative expenses paid to accomplish exempt purpose	es of supported organization	S	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
6	Other distributions (<i>describe in Part VI</i>). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	e organization is responsive			
	(provide details in Part VI). See instructions.	-		8	
9	Distributable amount for 2023 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2023	5	(iii) Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2023 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2023				
а	From 2018				
b	From 2019				
с	From 2020				
d	From 2021				
е	From 2022				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2023 distributable amount				
i	Carryover from 2018 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2023 from Section D,				
	line 7: \$				
а	Applied to underdistributions of prior years				
b	Applied to 2023 distributable amount				
с	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2023, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2023. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2024. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
а	Excess from 2019				
b	Excess from 2020				
с	Excess from 2021				
d	Excess from 2022				
е	Excess from 2023				

Schedule A (Form 990) 2023

Schedule A (Form 990) 2023 HARLEM CHILDREN'S ZONE, INC. 23-7112974 Pag
Part VISupplemental 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.)
SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:
MISCELLANEOUS INCOME
2019 AMOUNT: \$ 146,262.
2020 AMOUNT: \$ 120,929.
2021 AMOUNT: \$ 44,441.
2022 AMOUNT: \$ 109,830.
2023 AMOUNT: \$ 244,360.
SPECIAL EVENTS GROSS INCOME
2019 AMOUNT: \$ 0.
2020 AMOUNT: \$ 0.
2021 AMOUNT: \$ 82,365.
2022 AMOUNT: \$ 168,045.
2023 AMOUNT: \$ 423,950.

** PUBLIC DISCLOSURE COPY **

Schedule of Contributors

Attach to Form 990, 990-EZ, or 990-PF. Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

2023

Employer identification number

23-7112974

Department of the Treasury Internal Revenue Service

Schedule B

(Form 990)

Name of the organization

Organization type (check one):

HARLEM CHILDREN'S ZONE, INC.

0	
Filers of:	Section:
Form 990 or 990-EZ	X 501(c)(³) (enter number) organization
	4947(a)(1) nonexempt charitable trust not treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation

Check if your organization is covered by the General Rule or a Special Rule.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year for an *exclusively* set in the set of the set of the parts unless to the set of the

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Name of or	rganization	Employer identification number		
HARLEM C	HILDREN'S ZONE, INC.		23-7112974	
Part I	Contributors (see instructions). Use duplicate copies of Part I in	f additional space is needed.		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
1		\$5,533,66	Person X Payroll Image: Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
2		\$11,628,52	Person X Payroll	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
3		\$6,515,87	Person X Payroll Image: Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
4		\$5,000,00	Person X Payroll Image: Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
5		\$1,871,28	Person X Payroll	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
6		\$2,000,00	10. Person X Payroll Noncash (Complete Part II for noncash contributions.) Schedule B (Form 990) (2023)	

Page **2**

14070513 153424 0180421-00005

Schedule B (Form 990) (2023)

24 2023.05070 HARLEM CHILDREN'S ZONE, I 01804211

Name of or	rganization	Employer identification number	
HARLEM C	HILDREN'S ZONE, INC.		23-7112974
Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	al space is needed.	·
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	(d) ns Type of contribution
7		\$3,000	,000. Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	(d) ns Type of contribution
8		\$2,100	,000. Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	(d) ns Type of contribution
9		\$10,000	,000. Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	(d) ns Type of contribution
		\$5,000	,000. Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	(d) ns Type of contribution
11		\$8,010	,000. Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	(d) ns Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

323452 12-26-23

25 2023.05070 HARLEM CHILDREN'S ZONE, I 01804211

	B (Form 990) (2023)		Page
Name of o	rganization		Employer identification number
HARLEM C	HILDREN'S ZONE, INC.		23-7112974
Part II	Noncash Property (see instructions). Use duplicate copies of Part	t II if additional space is needed	٤.
(a) No. from Part I	(b) (c) FMV (or estimate) (See instructions.)		
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions	Data received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions	
		\$	
323453 12-26		*	Schedule B (Form 990) (2023

26

Schedule B (Form 990) (2023)

14070513 153424 0180421-00005

Schedule E	B (Form 990) (2023)		Page 4
	rganization		Employer identification number
HARLEM C	HILDREN'S ZONE, INC.		23-7112974
Part III		 h) through (e) and the following line entry. charitable, etc., contributions of \$1,000 or les 	on 501(c)(7), (8), or (10) that total more than \$1,000 for the year For organizations
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-		(e) Transfer of gift	
-	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
-	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee
(a) No.			
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
	Transferacio nomo addresa		Polationship of transform to transform
-	Transferee's name, address, a		Relationship of transferor to transferee
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Part I			_
-		(e) Transfer of gift	
-	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee

323454 12-26-23

Schedule B (Form 990) (2023)

14070513 153424 0180421-00005

27 2023.05070 HARLEM CHILDREN'S ZONE, I 01804211

14070513 153424 0180421-00005

LHA 332041 11-06-23

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

28					
2023.05070	HARLEM	CHILDREN'S	ZONE,	Ι	01804211

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.

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.

SCHEDULE C

Department of the Treasury

Internal Revenue Service

(Form 990)

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 organization			Empl	oyer identification number
	DREN'S ZONE, INC.			23-7112974
Part I-A Complete if the org	anization is exempt unde	r section 501(c) o	r is a section 527 org	ganization.
 Provide a description of the organiz Political campaign activity expendit Volunteer hours for political campai 	ures			
Part I-B Complete if the org	anization is exempt unde	r section 501(c)(3).	
1 Enter the amount of any excise tax				
2 Enter the amount of any excise tax				
3 If the organization incurred a section				
4a Was a correction made?				Yes No
b If "Yes," describe in Part IV. Part I-C Complete if the org	anization is exempt unde	r section 501(c), e	except section 501(c))(3)
1 Enter the amount directly expended	•	• • •		
2 Enter the amount of the filing organ	, ,			
exempt function activities				
3 Total exempt function expenditures				
line 17b			\$	
4 Did the filing organization file Form				
5 Enter the names, addresses, and er made payments. For each organizat contributions received that were pro political action committee (PAC). If a	tion listed, enter the amount paid omptly and directly delivered to a	from the filing organiza separate political organ	tion's funds. Also enter the	e amount of political
(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
		(0) Env	filing organization's funds. If none, enter -0	contributions received and promptly and directly delivered to a separate political organization. If none, enter -0

OMB No. 1545-0047 23 Open to Public

Inspection

Schedule C (Form 990) 2023

	ARLEM CHILDREN				112974 Page 2
Part II-A Complete if the orga	nization is exe	mpt under sectio	n 501(c)(3) and file	d Form 5768 (ele	ection under
section 501(h)).					
A Check if the filing organizati	on belongs to an af	filiated group (and list i	n Part IV each affiliated g	group member's nam	e, address, EIN,
expenses, and share	, ,	• •			
B Check if the filing organization	on checked box A a	and "limited control" pr	ovisions apply.		
	on Lobbying Expe tures" means amo	enditures unts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influe	nce public opinion	(grassroots lobbying)			
b Total lobbying expenditures to influe					
c Total lobbying expenditures (add line	-	• • • •			
d Other exempt purpose expenditures					
e Total exempt purpose expenditures		n .			
f Lobbying nontaxable amount. Enter		· ·····	r i i i i i i i i i i i i i i i i i i i		
If the amount on line 1e, column (a) or		bbying nontaxable an			
not over \$500,000,		the amount on line 1e			
over \$500,000 but not over \$1,000,0		00 plus 15% of the exc			
over \$1,000,000 but not over \$1,500		00 plus 10% of the exc			
over \$1,500,000 but not over \$17,00		00 plus 5% of the exce			
over \$17,000,000,	\$1,000		. , , ,		
g Grassroots nontaxable amount (ente	er 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				
j If there is an amount other than zero	on either line 1h oi	line 1i, did the organiz	ation file Form 4720		
reporting section 4911 tax for this ye	ear?				Yes No
	4-Year Av	veraging Period Under	r Section 501(h)		
(Some organizations tha		501(h) election do not rate instructions for li		f the five columns b	elow.
	Lobbying Expe	enditures During 4-Ye	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(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					

Schedule C (Form 990) 2023

332042 11-06-23

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		(a)		(b)	
	e lobbying activity.	Yes	No	Amo	ount
1 a	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: Volunteers?		x		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	X			
	Media advertisements?		Х		
	Mailings to members, legislators, or the public?		Х		
е	Publications, or published or broadcast statements?		Х		
f	Grants to other organizations for lobbying purposes?		X		
-	Direct contact with legislators, their staffs, government officials, or a legislative body?		X		
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X		
	Other activities?	X			207,379.
j	Total. Add lines 1c through 1i		v		207,379.
	Did the activities in line 1 cause the organization to not be described in section 501(c)(3)?		X		
	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	n 501(c)(5), or sec	tion	
	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?				
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the				
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section				
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered	"No" OR	(b) Part I	II-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 politi	cal			
	expenses for which the section 527(f) tax was paid).				
	Current year				
	Carryover from last year				
-	Total				
3			3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p				
	expenditures next year?	Untical	4		
5	Taxable amount of lobbying and political expenditures. See instructions		5		
Par					
	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part I-A (affiliated group	lict): Dort II	A lines 1 a	nd 2 (coo	
	ictions); and Part II-B, line 1. Also, complete this part for any additional information.	, not), i art n	Α, πιοσ τ α	10 2 (300	
	II-B, LINE 1, LOBBYING ACTIVITIES:				
THE	HARLEM CHILDREN'S ZONE ENGAGED THE SERVICES OF A LOBBYING FIRM				
RELA	TED TO THE PASSAGE OF THE ENOUGH ACT IN MARYLAND. THE ENOUGH ACT				
USES	PLACE-BASED INTERVENTIONS IN COMMUNITIES WITH DISPROPORTIONATELY				
HIGH	NUMBERS OF CHILDREN LIVING IN POVERTY (RURAL, SUBURBAN AND URBAN)				
– A	CAUSE THAT ALIGNS WITH HARLEM CHILDREN'S ZONE PRINCIPAL EXEMPT				

332043 11-06-23

Schedule C (Form 990) 2023

Part IV Supplemental Information (continued)

PURPOSE. IN ADDITION, CERTAIN HARLEM CHILDREN ZONE EMPLOYEES SPENT A

PORTION OF THEIR TIME ON LOBBYING ACTIVITIES; THE ORGANIZATION HAS

IDENTIFIED \$87,379 IN ALLOCABLE SALARY COSTS THAT IT IS REPORTING IN

SCHEDULE C, PART II-B, LINE 1(I) (ALONG WITH THE \$120,000 PAID TO THE

CONSULTING FIRM).

Schedule C (Form 990) 2023

332044 11-06-23

		O			OMB No. 1545-0047	
SCHEDULE D (Form 990)		Supplementa	NON			
		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.			2023	
			ttach to Form 990. 0 for instructions and the latest information.		Open to Public Inspection	
Name of the organization					oloyer identification number	
Do	t L Organizat	HARLEM CHILDREN'S ZONE, INC			23-7112974	
Pa		answered "Yes" on Form 990, Part IV, lin	d Funds or Other Similar Funds or Ad	coun	Its. Complete if the	
	organization			(b) Fun	ds and other accounts	
1	Total number at end	of year		()		
2		contributions to (during year)				
3		grants from (during year)				
4		end of year				
5	Did the organization	inform all donors and donor advisors in v	writing that the assets held in donor advised fun	ds		
			exclusive legal control?		Yes No	
6	•		dvisors in writing that grant funds can be used o	-		
			r donor advisor, or for any other purpose confer	•		
Pa	rt II Conservat	tion Easements. Complete if the orr	ganization answered "Yes" on Form 990, Part IV	lino 7	Yes No	
1		rvation easements held by the organization		, iii ie 7.		
•		of land for public use (for example, recreation		orically	important land area	
	Protection of r		Preservation of a cert	-	-	
	Preservation c					
2	Complete lines 2a th	nrough 2d if the organization held a qualif	ied conservation contribution in the form of a co	nserva	tion easement on the last	
	day of the tax year.				Held at the End of the Tax Year	
а	Total number of con	servation easements		2a		
b	•			2b		
С	Number of conserva	tion easements on a certified historic stru	ucture included on line 2a	2c		
d		tion easements included on line 2c acqui				
•				2d		
3		ition easements modified, transferred, rele	eased, extinguished, or terminated by the organ	ization	during the tax	
4	year	 here property subject to conservation eas	ement is located			
5		on have a written policy regarding the per				
•		cement of the conservation easements it			Yes No	
6	,		handling of violations, and enforcing conservation			
7	Amount of expenses	s incurred in monitoring, inspecting, hand	lling of violations, and enforcing conservation ea	sement	s during the year	
		_				
8		•	satisfy the requirements of section 170(h)(4)(B)(,		
-	and section 170(h)(4)(B)(ii)?					
9			on easements in its revenue and expense staten			
		Include, if applicable, the text of the footh Inting for conservation easements.	ote to the organization's financial statements th	at desc	ribes the	
Pa			Art, Historical Treasures, or Other S	Simila	r Assets.	
		he organization answered "Yes" on Form				
1a	If the organization el	ected, as permitted under FASB ASC 95	8, not to report in its revenue statement and bal	ance sł	neet works	
	of art, historical treas	sures, or other similar assets held for pub	olic exhibition, education, or research in furthera	nce of p	public	
	service, provide in P	art XIII the text of the footnote to its finar	ncial statements that describes these items.			
b	If the organization el	ected, as permitted under FASB ASC 95	8, to report in its revenue statement and balance	e sheet	works of	
	art, historical treasur	res, or other similar assets held for public	exhibition, education, or research in furtherance	e of put	blic service,	
		g amounts relating to these items.			•	
					\$ •	
~	.,		nourse or other similar essets for financial sain		\$	
2	-	eceived or held works of art, historical treats required to be reported under FASB A	asures, or other similar assets for financial gain,	ριονίαε		
а	-		SC 956 relating to these items.		\$	
					\$	
		luction Act Notice, see the Instructions				

14070513	153424	0180421-00005
140/0515	T 2 2 4 7 4	0100421 00000

332051 09-28-23

32 2023.05070 HARLEM CHILDREN'S ZONE, I 01804211

Sche	dule D (Form 990) 2023 HARLEM CHII	DREN'S ZONE, IN	IC.					23-711	2974	P	age 2
Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)											
3	3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its										
	collection items (check all that apply).										
а	Public exhibition d Loan or exchange program										
b											
с	Preservation for future generations										
4	Provide a description of the organization's co	pllections and explair	how they f	urther th	e organization	n's exem	pt purpos	e in Part	XIII.		
5	During the year, did the organization solicit o	r receive donations o	of art, histori	cal treas	sures, or other	r similar a	assets				
	to be sold to raise funds rather than to be ma	aintained as part of th	ne organizat	ion's co	llection?			🗆	Yes		No
Par	t IV Escrow and Custodial Arran	gements Comple	te if the orga	anizatior	answered "Y	es" on F	orm 990, I	Part IV, li	ne 9, or		
	reported an amount on Form 990, Pa	rt X, line 21.									
1a	Is the organization an agent, trustee, custodi	an, or other intermed	liary for con	tribution	s or other ass	ets not i	ncluded				
	on Form 990, Part X?							🗆	Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the fol	lowing table	:							
									Amount		
С	Beginning balance						1c				
d	Additions during the year						1d				
е	Distributions during the year						1e				
f	Ending balance						1f				
2a	Did the organization include an amount on F	orm 990, Part X, line	21, for escr	ow or cu	istodial accou	int liabilit	y?	🗆	Yes		No
	If "Yes," explain the arrangement in Part XIII.										
Par	t V Endowment Funds Complete if										
		(a) Current year	(b) Prior		(c) Two years		d) Three ye		. ,		
1a	Beginning of year balance	713,607,572.	674,98		722,588	<i>,</i>	479,26		451,		
b											
С	Net investment earnings, gains, and losses 132,703,097. 13,712,51756,471,453. 237,121,857. 25,052,77										
d	Grants or scholarships									120,	135.
е	Other expenditures for facilities										
	and programs		15	8,285.	174	,254.					
f	Administrative expenses										
g	End of year balance	854,401,195.	713,60	7,572.	674,989	,402.	722,58	8,827.	479,	261,	830.
2	Provide the estimated percentage of the curr		e (line 1g, co	lumn (a)) held as:						
а	Board designated or quasi-endowment	98.1664	_%								
b	Permanent endowment 1.8336	%									
С	Term endowment0000	%									
	The percentages on lines 2a, 2b, and 2c sho	-									
3a	Are there endowment funds not in the posse	ssion of the organiza	tion that are	e held ar	nd administere	ed for the)		-	1	
	organization by:									Yes	No
	(i) Unrelated organizations?								3a(i)		X
									3a(ii)		X
b	If "Yes" on line 3a(ii), are the related organization								3b		
4	Describe in Part XIII the intended uses of the		wment fund	S.							
Par	t VI Land, Buildings, and Equipm					Deut V II	10				
	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 o basis (investn			or other	• •	cumulated reciation		(d) Book	valu	e
	Land	`	lienų		(other)	uep	Clation		1 /	156	007
	Land 14,156,007. 14,156,007 Buildings 133,831,264. 44,696,711. 89,134,553										
	Buildings				, ,						
	Leasehold improvements 16,568,398. 11,772,440. 4,795,958. Equipment 7,877,652. 5,829,631. 2,048,021.										
d											
	Other		N II		, , ,		, ,		122,		
Iota	. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part .	X, line 10c,	column	(<u>B))</u>				,	,	
							5	cnedule	D (Form	99U)	2023

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	824,258,100.	END-OF-YEAR MARKET VALUE
(B) ALT. INVESTMENT REDEMPTION	12,476,442.	END-OF-YEAR MARKET VALUE
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))	836,734,542.	

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)		
otal. (Col. (b) must equal Form 990, Part X, line 13, col. (B))		

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) RIGHT OF USE ASSETS - OPERATING LEASE	84,550,376.
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 15, col. (B))	84,550,376.
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) DEFERRED COMPENSATION PAYABLE	6,178,309.
(3) DUE TO RELATED PARTY	6,815,396.
(4) REFUNDABLE ADVANCES	16,756,629.
(5) OPERATING RIGHT-OF-USE LEASE LIABILITY	86,970,489.
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))	116,720,823.

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 FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII ... X

Schedule D (Form 990) 2023

332053 09-28-23

Sche	dule D (Form 990) 2023 HARLEM CHILDREN'S ZONE, INC.	23-71	12974 Page 4					
Par	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	242,711,434.					
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:							
а	Net unrealized gains (losses) on investments	2a	151,721,708.					
b	Donated services and use of facilities	2b	807,488.					
с	Recoveries of prior year grants							
d	Other (Describe in Part XIII.)		235,128.					
е	Add lines 2a through 2d			2e	152,764,324.			
3	Subtract line 2e from line 1			3	89,947,110.			
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:							
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	8,291,201.					
b	Other (Describe in Part XIII.)	4b						
с					8,291,201.			
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	98,238,311.			
Par	t XII Reconciliation of Expenses per Audited Financial Stateme	ents With	i Expenses per F	leturn				
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.							
1	Total expenses and losses per audited financial statements			1	126,389,105.			
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:							
а	Donated services and use of facilities	2a	807,488.					
b	Prior year adjustments	2b						
С	Other losses	2c						
d	Other (Describe in Part XIII.)	2d						
е	Add lines 2a through 2d			2e	807,488.			
3	Subtract line 2e from line 1	3	125,581,617.					
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:							
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	8,291,201.					
b	Other (Describe in Part XIII.)	4b						
c Add lines 4a and 4b					8,291,201.			
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)					133,872,818.			
Part XIII Supplemental Information								
Provi	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part $% \left(1,1,2,1,2,1,2,1,2,1,2,1,2,1,2,1,2,1,2,1$	IV, lines 1b	and 2b; Part V, line 4	; Part X, I	ine 2; Part XI,			
lines	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any addi	itional inforr	mation.					

PART X, LINE 2:

HCZ FOLLOWS GUIDANCE THAT CLARIFIES THE ACCOUNTING FOR UNCERTAINTY IN TAX

POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN, INCLUDING ISSUES

RELATING TO FINANCIAL STATEMENT RECOGNITION AND MEASUREMENT. THIS GUIDANCE

PROVIDES THAT THE TAX EFFECTS FROM AN UNCERTAIN TAX POSITION CAN ONLY BE

RECOGNIZED IN THE CONSOLIDATED FINANCIAL STATEMENTS IF THE POSITION IS

MORE LIKELY THAN NOT TO BE SUSTAINED IF THE POSITION WERE TO BE CHALLENGED

BY A TAXING AUTHORITY. THE ASSESSMENT OF THE TAX POSITION IS BASED SOLELY

ON THE TECHNICAL MERITS OF THE POSITION, WITHOUT REGARD TO THE LIKELIHOOD

THAT THE TAX POSITION MAY BE CHALLENGED.

HCZ IS EXEMPT FROM FEDERAL INCOME TAX UNDER IRC SECTION 501(C)(3), THOUGH

35

332054 09-28-23

Schedule D (Form 990) 2023

Schedule D (Form 990) 2023 HARLEM CHILDREN'S ZONE, INC. Part XIII Supplemental Information (continued)	23-7112974	Page
T IS SUBJECT TO TAX ON INCOME UNRELATED TO ITS EXEMPT PURPOSE, UNLESS		
I IS SOBJET TO TAK ON THEOME ONCEANED TO THE BALMET TORIOSE, ONLESS		
THAT INCOME IS OTHERWISE EXCLUDED BY THE IRC. THE ORGANIZATION HAS		
PROCESSES PRESENTLY IN PLACE TO ENSURE THE MAINTENANCE OF ITS TAX-EXEMPT		
TATUS; TO IDENTIFY AND REPORT UNRELATED BUSINESS INCOME; TO DETERMINE ITS		
ILING AND TAX OBLIGATIONS IN JURISDICTIONS FOR WHICH IT WAS NEXUS; AND TO		
DENTIFY AND EVALUATE OTHER MATTERS THAT MAY BE CONSIDERED TAX POSITIONS.		
THE ORGANIZATION HAS DETERMINED THAT THERE ARE NO MATERIAL UNCERTAIN TAX		
POSITIONS THAT REQUIRE RECOGNITION OR DISCLOSURE IN THE CONSOLIDATED		
INANCIAL STATEMENTS. IN ADDITION, THE ORGANIZATION HAS NOT RECORDED A		
PROVISION FOR INCOME TAXES AS IT HAS NO MATERIAL TAX LIABILITY FROM		
INRELATED BUSINESS INCOME ACTIVITIES.		
PART XI, LINE 2D - OTHER ADJUSTMENTS: INCREASE IN VALUATION OF DONATED GOLD COINS 235,128.		
CHEDULE D, PART V: ENDOWMENTS		
HARLEM CHILDREN'S ZONE'S ENDOWMENTS ARE INTENDED TO SUPPORT THE		
RGANIZATION'S SOCIAL, CULTURAL AND EDUCATIONAL PROGRAMS (AS DESCRIBED IN		
PART III OF THE FORM 990) AND TO FUND A TAX-DEFERRED EMPLOYEE SAVINGS		
PLAN. HCZ HAS ADOPTED INVESTMENT AND SPENDING POLICIES FOR ENDOWMENT		
ASSETS THAT ATTEMPT TO PROVIDE A PREDICTABLE STREAM OF FUNDING WHILE		
SEEKING TO MAINTAIN THE EARNINGS POWER OF THE ENDOWMENT ASSETS.		
SEEKING TO MAINTAIN THE EARNINGS POWER OF THE ENDOWMENT ASSETS.		
SEEKING TO MAINTAIN THE EARNINGS POWER OF THE ENDOWMENT ASSETS.		
SEEKING TO MAINTAIN THE EARNINGS POWER OF THE ENDOWMENT ASSETS.		

Schedule D (Form 990) 2023

332055 09-28-23

Copen to Fubility Copen to Fubility renal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information. Inspection						
Name of the organization					Employer ide	entification number
					02 51100	
HARLEM CHILDREN'S ZO	ormation on A	ctivities Out	side the United States. Comple	to if the ereen	23-71129	
Form 990, Par				ete il the organ	Ization answer	eu res on
	•	n maintain record	ds to substantiate the amount of its gra	nts and other a	assistance,	
the grantees' eligibilit	/ for the grants or a	assistance, and t	he selection criteria used to award the	grants or assis	tance?	Yes No
0 F						- 4-1-1-41
2 For grantmakers. De United States.	scribe in Part V the	e organization's p	procedures for monitoring the use of its	grants and ot	ner assistance	outside the
	(The following Part	I. line 3 table ca	n be duplicated if additional space is n	eeded.)		
(a) Region	(b) Number of	(c) Number of	(d) Activities conducted in the region		vity listed in (d)	(f) Total
	offices	employees, agents, and	(by type) (such as, fundraising, pro-		gram service,	expenditures for and
	in the region	independent contractors	gram services, investments, grants to recipients located in the region)		e specific type (s) in the regior	investments
		in the region			(-)	in the region
CENTRAL AMERICA AND THE CARIBBEAN -						
ANTIGUA & BARBUDA,						
ARUBA, BAHAMAS,			INVESTMENTS			835,242,543.
3 a Subtotal		0				835,242,543.
b Total from continuation sheets to Part I		0				٥.
c Totals (add lines 3a	·					
and 3b)	. 0	0				835,242,543.

Statement of Activities Outside the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16. Attach to Form 990.

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

LHA 332071 11-29-23

SCHEDULE F (Form 990)

Department of the Treasury

Schedule F (Form 990) 2023

OMB No. 1545-0047

Open to Public

Schedule F (Form 990) 2023

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization 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 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)

38

Schedule F (Form 990) 2023

23-7112974

	Corm 000	0000	HARLEM	CHILDREN'	S	ZONE	TNC
Schedule F (Form 990) 2023	HARDER	CHIDREN	5	LONE,	TINC.

23-7112974

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)

Schedule F (Form 990) 2023

Page 3

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? <i>If</i> "Yes," <i>the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see the Instructions for Form 926)</i>	X 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 the Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? <i>If</i> "Yes," <i>the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see the Instructions for Form 5471)</i>	X 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? <i>If</i> "Yes," <i>the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund</i> (see the Instructions for Form 8621)	X Yes	No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? <i>If</i> "Yes," <i>the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see the Instructions for Form 8865)</i>	X Yes	No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? <i>If</i> "Yes," <i>the organization may be required to separately file Form 5713, International Boycott Report (see the Instructions for Form 5713; don't file with Form 990)</i>	Yes	X No

Schedule F (Form 990) 2023

332074 11-29-23

Schedule F (Form 990) 2023 HARLEM CHILDREN'S ZONE, INC.

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.

FORM 990, SCHEDULE F

HARLEM CHILDREN'S ZONE INVESTS DIRECTLY IN A VARIETY OF ALTERNATIVE

INVESTMENTS. THESE ALTERNATIVE INVESTMENTS ARE EITHER DOMICILED IN THE

UNITED STATES AS LIMITED PARTNERSHIPS OR IN FOREIGN JURISDICTIONS AS

CORPORATIONS OR PARTNERSHIPS. BY VIRTUE OF ITS OWNERSHIP IN THESE

INVESTMENTS, HARLEM CHILDREN'S ZONE MAY OWN AN INTEREST IN A FOREIGN

CORPORATION, PASSIVE FOREIGN INVESTMENT COMPANY, OR FOREIGN

PARTNERSHIP. TO THE EXTENT THAT HARLEM CHILDREN'S ZONE IS REQUIRED TO

COMPLETE A FORM 926, 5471, 8621 OR 8865 BECAUSE ITS INVESTMENT EXCEEDS

THE FILING THRESHOLD, THOSE FORMS HAVE BEEN ATTACHED TO THE

ORGANIZATION'S FORM 990-T FILING.

332075 11-29-23

SCHEDULE G	Suppleme	ntal Information Regarding	Fund	Iraisi	ng or Gaming A	ctivities	OMB No. 1545-0047
(Form 990)		e organization answered "Yes" on organization entered more than \$15				19, or if the	2023
Department of the Treasury Internal Revenue Service	_	Attach to Form 990 c					Open to Public Inspection
Name of the organization		o www.irs.gov/Form990 for instruc	ctions	and th	ne latest information		identification number
5		LDREN'S ZONE, INC.				23-711	
Part I Fundrais	ing Activities.	Complete if the organization answe	red "Y	es" or	n Form 990, Part IV, li	ne 17. Form 990)-EZ filers are not
required to	complete this part	t.					
 a Mail solicitat b Internet and c Phone solicitat d In-person so 2 a Did the organization key employees list 	ions email solicitations tations licitations on have a written o ed in Form 990, Pa highest paid indiv	f Solicitat g Special or oral agreement with any individual art VII) or entity in connection with pr viduals or entities (fundraisers) pursu	tion of tion of fundra (includ	non-g gover iising o ling of onal fu	overnment grants nment grants events ficers, directors, trust undraising services?		Yes No
(i) Name and addres or entity (fund		(ii) Activity	(iii) fundr have ci or con contribu	ustody itrol of	(iv) Gross receipts from activity	(v) Amount pa to (or retained l fundraiser listed in col. (by) to (or retained by)
			Yes	No			
Total							
3 List all states in whitor licensing.	ich the organizatio	n is registered or licensed to solicit c	ontrib	utions	or has been notified	it is exempt fror	n registration

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

Schedule G (Form 990) 2023

LHA 332081 09-13-23

42 2023.05070 HARLEM CHILDREN'S ZONE, I 01804211 Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events NONE	(d) Total events (add col. (a) through
		AWARD DINNER			col. (c)
۵		(event type)	(event type)	(total number)	
Revenue	1 Gross receipts	12,366,774.			12,366,774.
	2 Less: Contributions	11,942,824.			11,942,824.
	3 Gross income (line 1 minus line 2)	423,950.			423,950.
	4 Cash prizes				
S	5 Noncash prizes				
pense	6 Rent/facility costs	281,458.			281,458.
Direct Expenses	7 Food and beverages	974.			974.
ā	8 Entertainment				59,793.
	9 Other direct expenses				90,863.
.	10 Direct expense summary. Add lines 4 thro				433,088.
	11 Net income summary. Subtract line 10 fro	m line 3, column (d)			-9,138.

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.

Revenue	-	(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Rev	1 Gross revenue				
ses	2 Cash prizes				
xpens	3 Noncash prizes				
Direct Expenses	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	Yes %	└── Yes % └── No	Yes %	
	7 Direct expense summary. Add lines 2 through	5 in column (d)			
	8 Net gaming income summary. Subtract line 7 1	rom line 1, column (d)			
9	Enter the state(s) in which the organization conduc	ts gaming activities:			
	Is the organization licensed to conduct gaming act If "No," explain:				
	Were any of the organization's gaming licenses rev If "Yes," explain:				Yes No
33208	2 09-13-23			Sche	dule G (Form 990) 2023

Sch	edule G (Form 990) 2023	HARLEM CHILDREN'S ZONE,	INC.	23-71129	74	Page 3
11	Does the organization conduct ga	ming activities with nonmembers?)		Yes	No
12			ember of a partnership or other entity formed			
					Yes	No
	Indicate the percentage of gamin			I.		
						%
						%
14	Enter the name and address of th	Person who prepares the organize	zation's gaming/special events books and records			
	Name					
	Name					
	Address					
	Address					
15a	Does the organization have a con	tract with a third party from whom	the organization receives gaming revenue?		Yes	🗌 No
	0	. ,	.			
b	If "Yes," enter the amount of gam	ing revenue received by the organi	ization \$ and the amo	unt		
	of gaming revenue retained by the	e third party \$				
c	If "Yes," enter name and address					
	Name					
	Address					
40						
16	Gaming manager information:					
	Name					
	Gaming manager compensation	\$				
	Description of services provided					
	Director/officer	Employee	Independent contractor			
17	Mandatory distributions:					
		state law to make charitable distri	ibutions from the gaming proceeds to			
-	retain the state gaming license?				Yes	🗌 No
b	• •		ributed to other exempt organizations or spent in	the		
	organization's own exempt activit					
Pa			is required by Part I, line 2b, columns (iii) and (v); a	nd Part III, lir	nes 9,	9b, 10b,
	15b, 15c, 16, and 17b, as	applicable. Also provide any addit	tional information. See instructions.			
3320	33 09-13-23			Schedule G	(Form	990) 2023
			44			

Part IV Sup	plemental information	(continued)		
				Sahadula O (Farma 200)
332084 04-01-23			45	Schedule G (Form 990)

SCHEDULE I (Form 990)			arants and Oth vernments, ar					OMB No. 1545-0047
. ,			ete if the organizatio					2023
Department of the Treasury		•	U U	Attach to Form				Open to Public
Internal Revenue Service			Go to www.irs	s.gov/Form990 for	the latest inform	ation.		Inspection
Name of the organization	HARLEM CHILDRI	EN'S ZONE, INC						Employer identification number 23-7112974
Part I General Inform	nation on Grants a	nd Assistance						
2 Describe in Part IV th	d the grants or assis le organization's pro	stance? ocedures for monit	oring the use of grant	funds in the United	l States.		· · · · · · · · · · · · · · · · · · ·	X Yes No
Part II Grants and Ot	her Assistance to I	Domestic Organiz	zations and Domestic be duplicated if additi	c Governments. C	Complete if the org	anization answered "Y	es" on Form 990, Part	IV, line 21, for any
1 (a) Name and addres or govern	s of organization	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
HARLEM CHILDREN'S ZO ACADEMY I - 245 WEST - NEW YORK, NY 10027	129TH STREET	76-0756768	501(C)(3)	2,727,608.	0.			SUPPORT FOR ACADEMY'S EDUCATIONAL CURRICULUM
HARLEM CHILDREN'S ZO ACADEMY II - 35 EAST - NEW YORK, NY 10035	125TH STREET	34-2049530	501(C)(3)	1,471,214.	0.			SUPPORT FOR ACADEMY'S EDUCATIONAL CURRICULUM
 2 Enter total number of 3 Enter total number of 		. .	 ganizations listed in th I table	l e line 1 table				<u>2.</u>

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

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

Schedule I (Form 990) 2023

Page 2

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 non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
EDUCATIONAL STIPENDS	2100	2,154,602.	0.		
HCZ HARDSHIP ASSISTANCE	934	1,380,552.	0.		
SCHOLARSHIPS	906	2,332,196.	0.		
Part IV Supplemental Information. Provide the information req	uired in Part I, lin	e 2; Part III, column	(b); and any other ac	dditional information.	
SCHEDULE I, PART III:					
THE NEED IN CENTRAL HARLEM:					
CHILDREN IN CENTRAL HARLEM TYPICALLY FACE MULTIPLE	CHALLENGES T	O THEIR			
SUCCESS: FAILING SCHOOLS, INADEQUATE HEALTH CARE, 1	LACK OF SAFE	PLACES			
TO SPEND OUT-OF-SCHOOL TIME, AND THE THREAT OF PHY:					
NUMEROUS STUDIES HAVE DOCUMENTED THE OBSTACLES TO :					
LOW-INCOME STUDENTS, PARTICULARLY THOSE OF COLOR.		ORN IN			
2001 HAS A ONE IN THREE CHANCE OF GOING TO PRISON 3					
THE A ONE IN THREE CHANCE OF GOING TO PRISON .	IN NIS DIFEII	ME. UNE			

STUDY FOUND THAT, BY THE AGE OF THREE, CHILDREN IN POOR FAMILIES WERE

Part IV Supplemental Information

EXPOSED TO 30 MILLION FEWER WORDS THAN CHILDREN IN HIGH-INCOME HOMES.

TO ADDRESS THE MULTITUDE OF CHALLENGES OUR KIDS FACE, HARLEM CHILDREN'S

ZONE HAS CREATED A FREE, HOLISTIC, CRADLE-TO-CAREER PIPELINE OF

SUPPORTS AND SERVICES TO ENSURE THAT CHILDREN REACH THEIR POTENTIAL AT

EACH STAGE OF THEIR DEVELOPMENT.

IN ADDITION TO WORKING WITH THE CHILDREN THROUGHOUT THEIR FORMATIVE

YEARS, WE WORK TO STRENGTHEN THE FAMILIES AND COMMUNITY AROUND THEM. WE

WORK TO ADDRESS ALL THE BARRIERS TO OUR CHILDRENS' SUCCESS. IN ADDITION

TO OUR PRIMARY FOCUS ON ACADEMICS, WE CONSIDER THE WHOLE

CHILD, OFFERING EXPOSURE TO THE ARTS AND CULTURE, COMMUNITY SERVICE,

REGULAR PHYSICAL EXERCISE, AND NUTRITION WORKSHOPS TO HELP DEVELOP

LIFE-LONG HEALTHY HABITS. WE ALSO HELP DEVELOP THEIR NON-COGNITIVE

SKILLS, SUCH AS PERSISTENCE AND RESILIENCE, AND ADDRESS ANY SOCIAL AND

EMOTIONAL NEEDS. TO HELP ENSURE OUR HIGH-SCHOOL STUDENTS REMAIN ENGAGED

IN OUR PROGRAMS, WE OFFER THEM THE OPPORTUNITY TO EARN STIPENDS. THE

STIPENDS RELIEVE SOME OF THE FINANCIAL STRESS ON CHILDREN AND THEIR

FAMILIES, SO CHILDREN DO NOT NEED TO CHOOSE BETWEEN ENRICHING

ACTIVITIES AND TAKING ON A PART-TIME JOB. THE STIPENDS ARE DESIGNED TO

BE A PRE-EMPLOYMENT MODEL SO THAT STUDENTS BEGIN TO LEARN THE WORKPLACE

STANDARD OF GETTING REWARDS FOR HARD WORK. THE STIPEND AMOUNTS ARE

BASED ON PARTICIPATION AND DISTRIBUTED TWICE A MONTH.

THE SECOND PROGRAM ON SCHEDULE I IS A HARDSHIP ASSISTANCE/INCENTIVE

PROGRAM THAT OFFERS DIFFERENT TYPES OF AID DEPENDING ON THE NEEDS OF

THE INDIVIDUAL. THE CHILDREN AND FAMILIES WE SERVE ARE AMONG THE MOST

DISENFRANCHISED AND HAVE FEW RESOURCES OF THEIR OWN. FOR THAT REASON,

48

Schedule I (Form 990)

332291 04-01-23

2023.05070 HARLEM CHILDREN'S ZONE, I 01804211

HCZ SETS ASIDE FUNDS FOR SPECIAL CLIENT SERVICES TO DEAL WITH FAMILIES'

SHORT-TERM CRISES, AND FOR INCENTIVES TO ENCOURAGE PARTICIPANTS TO STAY

FOCUSED ON THEIR ACADEMIC SUCCESS AND WELL-BEING. IN ADDITION, THE

PROGRAM IS DESIGNED TO REWARD AND HELP GRADUATING HIGH-SCHOOL SENIORS.

ASIDE FROM PROVIDING VARIOUS DIRECT SUPPORTS (EXAMPLES INCLUDE LAPTOPS

OR SCHOLARSHIPS TOWARDS SUPPLIES NECESSARY TO SUCCESSFULLY BEGIN A

COLLEGE CAREER), HCZ ALSO OFFERS SCHOLARSHIPS THROUGH DONATED FUNDS TO

REDUCE POTENTIAL DEBT FOR OUR COLLEGE STUDENTS. THESE FUNDS ARE

CRITICALLY IMPORTANT FOR OUR STUDENTS, MANY OF WHOM HAVE FEW - IF ANY -

FUNDS OF THEIR OWN TO PAY FOR THEIR COLLEGE EXPENSES.

Schedule I (Form 990)

332291 04-01-23

(Form 990) For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees 2023 Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990. Open to Public Inspection Name of the organization Employeer identification number 23-7112974 Part I Questions Regarding Compensation	
Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990. Open to Public Inspection Name of the organization Go to www.irs.gov/Form990 for instructions and the latest information. Employer identification numl 23-7112974 Part I Questions Regarding Compensation 23-7112974	ber
Department of the freasury Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information. Inspection Name of the organization Employer identification numl 23-7112974 Part I Questions Regarding Compensation	ber
Name of the organization Employer identification numl HARLEM CHILDREN'S ZONE, INC. 23-7112974 Part I Questions Regarding Compensation	
HARLEM CHILDREN'S ZONE, INC. 23-7112974 Part I Questions Regarding Compensation	
Part I Questions Regarding Compensation	No
	No
Yes	
1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,	
Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.	
First-class or charter travel	
Travel for companions	
Tax indemnification and gross-up payments Health or social club dues or initiation fees	
Discretionary spending account Personal services (such as 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	
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,	
trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a? 2	
3 Indicate which, if any, of the following the 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 X Compensation survey or study	
X Form 990 of other organizations X 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?	
b Participate in or receive payment from a supplemental nonqualified retirement plan?	
c Participate in or receive payment from an equity-based compensation arrangement?	X
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	
Only section 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:	v
	X
	X
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:	v
	X
	x
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 7 X 	
8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the	x
	-1
9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in	
Regulations section 53.4958-6(c)? 9 For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule J (Form 990) 2	2022

LHA 332111 11-06-23

23-7112974

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 aren't 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-MIS0 compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)	
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990	
(1) KWAME OWUSU-KESSE	(i)	690,781.	227,959.	0.	189,150.	58,483.	1,166,373.	97,959.	
CEO	(ii)	0.	0.	0.	0.	0.	0.	0.	
(2) GEOFFREY CANADA	(i)	460,183.	275,000.	0.	159,150.	58,483.	952,816.	0.	
PRESIDENT	(ii)	0.	0.	0.	0.	0.	0.	0.	
(3) JAZMINE LEWIS	(i)	267,121.	161,225.	0.	76,141.	33,478.	537,965.	61,225.	
CHIEF STRATEGY OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.	
(4) NANA A. ANNAN	(i)	170,965.	174,994.	59,616.	102,900.	19,481.	527,956.	154,994.	
COO (THRU 07/2023)	(ii)	0.	0.	0.	0.	0.	0.	0.	
(5) CONNOR FOURNIER	(i)	346,584.	50,000.	0.	76,650.	10,743.	483,977.	0.	
CFO (THRU 02/2024)	(ii)	0.	0.	0.	0.	0.	0.	0.	
(6) JENNIFER KLEIN	(i)	317,720.	50,000.	0.	76,650.	33,478.	477,848.	0.	
CHIEF DEVELOPMENT OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.	
(7) JUSTIN MAKER	(i)	249,932.	115,969.	0.	8,539.	33,478.	407,918.	73,469.	
SR. MANAGING DIR, HR (THRU 01/2024)	(ii)	0.	0.	0.	0.	0.	0.	0.	
(8) STEPHANIE C. LILAVOIS	(i)	237,887.	45,000.	0.	87,072.	11,096.	381,055.	0.	
CHIEF COMMUNICATIONS OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.	
(9) CHRISTIAN RHODES	(i)	277,981.	30,000.	0.	0.	22,339.	330,320.	0.	
DEPUTY EXECUTIVE DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.	
(10) GREGORY FORBES	(i)	193,566.	56,888.	0.	36,322.	33,478.	320,254.	29,388.	
MANAGING DIRECTOR, ECONOMIC MOBILITY	(ii)	0.	0.	0.	0.	0.	0.	0.	
(11) TIFFANY FOUNTAIN	(i)	152,087.	95,969.	0.	31,301.	19,387.	298,744.	73,469.	
SENIOR ADVISOR	(ii)	0.	0.	0.	0.	0.	0.	0.	
(12) LINDA N. IBUZOR	(i)	226,450.	22,500.	0.	41,180.	1,555.	291,685.	0.	
CONTROLLER	(ii)	0.	0.	0.	0.	0.	0.	0.	
(13) LIAM MCCARTHY	(i)	214,441.	25,000.	0.	7,407.	26,210.	273,058.	0.	
MANAGING DIRECTOR, DEVELOPMENT	(ii)	0.	0.	0.	0.	0.	0.	0.	
(14) SERINA MOYA	(i)	193,325.	43,214.	0.	6,219.	20,916.	263,674.	25,714.	
MGN DIRECTOR, HCZ K-12 AFTERSCHOOL	(ii)	0.	0.	0.	0.	0.	0.	0.	
(15) MICHAEL POHLY	(i)	171,021.	0.	0.	5,160.	58,483.	234,664.	0.	
CHIEF INVESTMENT OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.	
	(i)								
	(ii)								

Schedule J (Form 990) 2023

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.

PART I, LINES 4A-B:

FORM 990, SCHEDULE J, LINE 4(A)

CHIEF OPERATING OFFICER, NANA ANNAN, RECEIVED A SEVERANCE PAYMENT OF

\$59,616 IN CALENDAR YEAR 2023; THIS AMOUNT IS REFLECTED IN SCHEDULE J, PART

II, COLUMN (B)(III).

FORM 990, SCHEDULE J, LINE 4(B)

HARLEM CHILDREN'S ZONE HAS A SECTION 457(F) PLAN FOR CERTAIN ELIGIBLE

EMPLOYEES. THIS GROWTH FUND PLAN ("THE PLAN") IS A TAX-DEFERRED EMPLOYEE

SAVINGS PLAN THAT AIMS TO SERVE AS A RETENTION TOOL FOR DIRECTORS.

OFFICERS, PRINCIPALS AND SENIOR STAFF. HARLEM CHILDREN'S ZONE MAKES AN

ANNUAL DEPOSIT INTO THE PLAN THAT IS VALUED AT 150% OF THE INDIVIDUAL

EMPLOYEE'S BONUS FOR THE CURRENT YEAR.

THE EMPLOYEE'S ACCOUNT ACCUMULATES ASSOCIATED EARNINGS OR LOSSES ON THE

INVESTMENT OF THE CONTRIBUTED AMOUNT IN THE NO MARGIN SENIOR GROWTH FUND,

WHICH IS MANAGED BY DUQUESNE FAMILY OFFICE, AT NO COST TO HARLEM CHILDREN'S

ZONE OR THE EMPLOYEE. THE AMOUNTS CONTRIBUTED BY HARLEM CHILDREN'S ZONE,

ALONG WITH THE ASSOCIATED EARNINGS OR LOSSES, VEST AFTER FIVE YEARS FROM

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.

THE DATE OF THE INITIAL CONTRIBUTION AND WILL BE PAID TO ELIGIBLE EMPLOYEES

WHEN VESTED.

TERMINATED EMPLOYEES BECOME VESTED IMMEDIATELY AT THE DATE OF THEIR

TERMINATION. EMPLOYEES WHO MEET THE AGE AND SERVICE PROVISIONS OF THE PLAN

(AGE VESTING) ARE VESTED IMMEDIATELY UPON MEETING THOSE PROVISIONS.

HOWEVER, IF A PARTICIPATING EMPLOYEE LEAVES VOLUNTARILY, INCLUDING

RETIREMENT IF THEY HAVE NOT REACHED THE AGE VESTING PROVISIONS, THEN THEIR

CUMULATIVE UNVESTED CONTRIBUTION MADE BY HCZ AND ASSOCIATED EARNINGS OR

LOSSES ARE FORFEITED.

FOR CALENDAR YEAR 2023, EMPLOYEES RECEIVED A PAYOUT OF DEFERRED

COMPENSATION FROM THE PLAN AND THOSE AMOUNTS HAVE BEEN RECORDED IN SCHEDULE

J, PART II, COLUMN (B)(II) AND, BECAUSE THAT PAYOUT REPRESENTS COMPENSATION

THAT WAS REPORTED ON PREVIOUS FORMS 990 AS DEFERRED COMPENSATION IN

SCHEDULE J, PART II, COLUMN (C), IT IS RECORDED IN SCHEDULE J, PART II,

COLUMN (F).

GEOFFREY CANADA, AN OFFICER OF HCZ, MET THE AGE AND SERVICE PROVISIONS OF

Schedule J (Form 990) 2023

HARLEM CHILDREN'S ZONE, INC. Schedule J (Form 990) 2023

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.

THE 457 (F) PLAN (AGE VESTING) FOR CALENDAR YEAR 2023 THAT RESULTED IN

IMMEDIATE VESTING OF HCZ'S GROWTH FUND CONTRIBUTION. THIS AMOUNT IS

INCLUDED IN FORM 990, SCHEDULE J, COLUMN B (II).

CHIEF OPERATING OFFICER NANA ANNAN RECEIVED A SEVERANCE PAYMENT OF

\$59,616 IN CALENDAR YEAR 2023; THIS AMOUNT IS REFLECTED IN SCHEDULE J. PART

II, COLUMN (B)(III).

PART I, LINE 7:

HARLEM CHILDREN'S ZONE PROVIDES ANNUAL PERFORMANCE BONUSES TO ITS

EMPLOYEES. THE BONUSES ARE DETERMINED AND APPROVED BY THE CEO, KWAME

OWUSU-KESSE. BONUSES ARE APPROVED IN JUNE AND PAID OUT IN JULY (WHICH IS

THE FOLLOWING FISCAL YEAR); HOWEVER, FOR 990 REPORTING PURPOSES. THE BONUS

IS BOTH APPROVED AND PAID IN THE SAME CALENDAR YEAR (BUT DIFFERENT FISCAL

YEARS); ACCORDINGLY. THE BONUSES ARE REPORTED AS CURRENT COMPENSATION IN

COLUMN (B)(II).

Pag<u>e 3</u>

SCHEDULE L

Department of the Treasury

Internal Revenue Service

(Form 990)

Transactions With Interested Persons

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c; or Form 990-EZ, Part V, line 38a or 40b.

Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

Name	of the	organization

HARL	EM CHILE	REN'S	ZONE	INC

Employer identification number 23-7112974

Part I	Excess Benefit Transactions	(section 501(c)(3), section 501(c)(4), and section 501(c)(29) organ	izations only)

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b; or Form 990-EZ, Part V, line 40b.

1	(a) Name of discussified person	(b) Relationship between disqualified	(a) Description of transaction	(d) Corr	rected?
	(a) Name of disqualified person	person and organization	(c) Description of transaction	Yes	No
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
2	Enter the amount of tax incurred by	the organization managers or disqualifie	d persons during the year under		
	section 4958			\$	
3	Enter the amount of tax, if any, on l	ine 2, above, reimbursed by the organiza	tion	\$	

Part II Loans to and/or From Interested Persons

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

	(a) Name of interested person	(b) Relationship with organization	(d) Lo	an to or 1 the	(e) Original principal amount	(f) Balance due	(g) defa) In ault?	(h) Ap by bo comm	proved ard or littee?	(i) W agreer	ritten nent?
			То	From			Yes	No	Yes	No	Yes	No
(1)												
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												
(8)												
(9)												
(10)												
Total			 		\$							

Part III Grants or Assistance Benefiting Interested Persons

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				

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

Schedule L (Form 990) 2023

LHA 332131 11-06-23

Part IV Business Transactions Involving Interested Persons

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

(a) Name of interested person	(b) Relationship between interested person and the organization			(e) Sha organiz reven	
				Yes	No
(1)ZACHARY SCHREIBER	BOARD OF TRUSTEE	48,176,794.	SEE PART V		х
(2)ZACHARY SCHREIBER	BOARD OF TRUSTEE	807,488.	SEE PART V		х
(3) STANLEY DRUNKENMILLER	CHAIRMAN OF BOARD	131,336,553.	SEE PART V		х
(4)ERIC MANDELBLATT	BOARD OF TRUSTEE	59,894,947.	SEE PART V		х
(5)ERIC MANDELBLATT	BOARD OF TRUSTEE	613,360.	SEE PART V		х
(6)					
(7)					
(8)					
(9)					
(10)					

artv upp

Provide additional information for responses to questions on Schedule L. See instructions.

SCHEDULE L, PART IV

ZACHARY SCHREIBER, BOARD OF TRUSTEES MEMBER, MANAGES A LIMITED

PARTNERSHIP INVESTMENT FUND IN WHICH HARLEM CHILDREN'S ZONE INVESTS.

THE VALUE OF THE ORGANIZATION'S INVESTMENT IN THIS LIMITED PARTNERSHIP

INVESTMENT AS OF JULY 30, 2024 IS APPROXIMATELY \$48.1 MILLION. NEITHER

MR. SCHREIBER NOR THE FUND CHARGE HARLEM CHILDREN'S ZONE ANY

MANAGEMENT, ADVISORY OR SUPERVISORY FEES FOR MANAGING THE

ORGANIZATION'S PORTFOLIO. NEVERTHELESS, THE VALUE OF THESE CONTRIBUTED

SERVICES IS \$807,488.

STANLEY DRUCKENMILLER, CHAIRMAN OF THE BOARD, RUNS AN ALTERNATIVE

INVESTMENT FUND IN WHICH HARLEM CHILDREN'S ZONE INVESTS. THE VALUE OF

THE ORGANIZATION'S INVESTMENT IN THIS FUND AS OF JUNE 30, 2024 IS

\$131.3 MILLION. NEITHER MR. DRUCKENMILLER NOR THE FUND CHARGE HARLEM

CHILDREN'S ZONE ANY MANAGEMENT, ADVISORY OR SUPERVISORY FEES FOR

MANAGING THE ORGANIZATION'S PORTFOLIO.

ERIC MANDELBLATT BOARD OF TRUSTEES MEMBER RUNS AN ALTERNATIVE

INVESTMENT FUND IN WHICH HARLEM CHILDREN'S ZONE INVESTS. THE VALUE OF

THE ORGANIZATION'S INVESTMENT IN THIS FUND AS OF JUNE 30, 2024 IS \$59.8

Schedule L (Form 990) 2023

332132 11-30-23

14070513 153424 0180421-00005

56 2023.05070 HARLEM CHILDREN'S ZONE, I 01804211 HARLEM CHILDREN'S ZONE, INC.

Part V Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule L (see instructions).

MILLION. HARLEM CHILDREN'S ZONE PAID MANAGEMENT AND PERFORMANCE FEES

TOTALING \$613,360.

Schedule L (Form 990)

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public

3

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 instructions and the latest information.

Department of the Treasury Internal Revenue Service

	Inspection
Employer	identification number

.

L

Name of the organization

HARLEM CHILDREN'S ZONE, INC.

	HARLEM CHILDREN'S	ZONE, INC	2.			23-71129	74	
Par	t 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	r	(d) Method of determ noncash contribution	•	s
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded	Х	4	1,218,996.	FMV			
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other \dots							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other (<u>TOYS</u>)	X	1	23,856.				
26	Other (COMPUTER EQUIP)	X	23	3,920.	FMV			
27	Other ()							
28	Other ()							
29	Number of Forms 8283 received by the organiz							
	for which the organization completed Form 828	83, Part V, D	onee Acknowledg	ement 29				
							Yes	No
30a	During the year, did the organization receive by	•				that it		
	must hold for at least 3 years from the date of		ntribution, and whi	ch isn't required to be used	for			
	exempt purposes for the entire holding period?	?				<u>30</u> a		X
	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance p	•	•		ions?	31	X	<u> </u>
32a	Does the organization hire or use third parties		0	, , ,				
	contributions?						X	
	If "Yes," describe in Part II.							
33	If the organization didn't report an amount in c	olumn (c) foi	r a type of property	for which column (a) is chec	cked,			

describe in Part II.

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

Schedule M (Form 990) 2023

LHA 332141 09-11-23

Schedule M (Form 990) 2023	HARLEM	CHILDREN	'S	ZONE	INC.
----------------------------	--------	----------	----	------	------

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.

TO THE EXENT THAT HARLEM CHILDREN'S ZONE RECEIVES DONATIONS OF

SECURITIES, HCZ'S THIRD-PARTY BROKER DISPOSES OF THOSE SECURITIES; ALL

PROCEEDS THEREFROM ARE USED TO SUPPORT THE ORGANIZATION'S CHARITABLE

MISSION.

Schedule M (Form 990) 2023

Page **2**

23-7112974

332142 09-11-23

SCHEDULE O (Form 990)	Supplemental Information to Form 990 or 990- Complete to provide information for responses to specific questions on		OMB No. 1545-0047
Department of the Treasury	Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or Form 990-EZ.		Open to Public
Internal Revenue Service	Go to www.irs.gov/Form990 for the latest information.	Employer	Inspection
Name of the organization	HARLEM CHILDREN'S ZONE, INC.		identification number 12974
FORM 990, PART III,	LINE 1, DESCRIPTION OF ORGANIZATION MISSION:		
HCZ BREAKS THE CYCL	E OF INTERGENERATIONAL POVERTY WITH ON-THE-GROUND,		
ALL-AROUND PROGRAMM	ING THAT BUILDS UP OPPORTUNITIES FOR CHILDREN,		
FAMILIES, AND COMMU	NITIES TO THRIVE IN SCHOOL, WORK AND LIFE.		
FROM EARLY CHILDHOO	D, EDUCATION, AND CAREER PROGRAMS TO COMMUNITY		
OUTREACH AND WELLNE	SS INITIATIVES, HCZ OPENS PATHWAYS TO MOBILITY AND		
PROSPERITY.			
HCZ LEADS THE WAY F	OR COMMUNITIES AROUND THE COUNTRY, IMPROVING THE		
	, DS OF MILLIONS. TOGETHER WITH OUR PARTNERS, WE'RE		
TRANSFORMING THE WA	Y WE ROOT OUT POVERTY IN NEIGHBORHOODS ACROSS THE		
NATION AND AROUND 1	HE WORLD.		
FORM 990, PART III,	LINE 1		
ORGANIZATION'S MISS	ION (CONTINUED)		
HCZ LEADS THE WAY F	OR COMMUNITIES AROUND THE COUNTRY, IMPROVING THE		
LIVES AND LIVELIHOO	DS OF MILLIONS. TOGETHER WITH OUR PARTNERS, WE'RE		
TRANSFORMING THE WA	Y WE ROOT OUT POVERTY IN NEIGHBORHOODS ACROSS THE		
NATION AND AROUND T	HE WORLD.		
OUR CORE BELIEFS AN	D VALUES GUIDE EVERYTHING WE DO. THEY ARE A CRITICAL		
	AND HELP US PROVIDE THE BEST PROGRAMS AND SUPPORTS		
	FAMILIES WE SERVE. THE VALUES WORK TOGETHER AND		
,	INFORMING HOW WE BEHAVE AND MAKE DECISIONS ACROSS		
THE ORGANIZATION.	n Act Notice, see the Instructions for Form 990 or 990-EZ.	Sche	dule O (Form 990) 202
		301101	

14070513 153424 0180421-00005

2023.05070 HARLEM CHILDREN'S ZONE, I 01804211

1. CHILDREN FIRST - WE EMBRACE A HOLISTIC, YOUTH-CENTERED APPROACH TO

CREATE TRANSFORMATIONAL OPPORTUNITIES, DRIVEN BY A CALL FOR JUSTICE,

EQUITY, AND A RADICAL HOPE FOR THEIR FUTURE.

2. SERVANT LEADERSHIP - WE ARE ANCHORED IN MISSION, AND UNRELENTING IN

OUR PURSUIT OF EXCELLENCE FOR OUR CHILDREN, FAMILIES, AND COMMUNITY. WE

UNDERSTAND THAT OUR MISSION IS BIGGER THAN OURSELVES. WE ARE CALLED TO

SERVE THE COMMUNITIES WE REPRESENT AND LEAD OUR CHILDREN.

3. PLACE MATTERS - WE KNOW THAT WHERE A CHILD IS BORN AND RAISED

DETERMINES THEIR FUTURE PROSPECTS OF SUCCESS. THEREFORE, WE BUILD

OPPORTUNITIES FOR PROSPERITY IN TRADITIONALLY UNDERSERVED

NEIGHBORHOODS, USING A COMPREHENSIVE, PLACE-BASED CRADLE TO CAREER

APPROACH THAT WILL BREAK THE CYCLE OF INTERGENERATIONAL POVERTY.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

HCZ PROMISE ACADEMY CHARTER SCHOOLS

AT PROMISE ACADEMY A TOP-PERFORMING K-12 CHARTER SCHOOL WITHIN HCZ'S

CRADLE-TO-CAREER PATHWAY OF SERVICES WE PROMISE TO DO WHATEVER IT

TAKES TO GET OUR SCHOLARS TO AND THROUGH COLLEGE. EVERYTHING WE DO

FROM QUALITY INSTRUCTION TO EXCEPTIONAL EXTRACURRICULAR ACTIVITIES TO

HEALTHY, HOME-COOKED MEALS IS DESIGNED TO KEEP THAT PROMISE.

SINCE THE OPENING OF HCZ PROMISE ACADEMY I IN 2004 AND HCZ PROMISE

ACADEMY II IN 2005, WE'VE MADE AN ENORMOUS IMPACT ON OUR YOUNG PEOPLE.

WE'VE ENROLLED NEARLY 100% OF OUR SCHOLARS IN COLLEGE; WE'VE CLOSED THE

61

332212 11-14-23

Schedule O (Form 990) 2023 Name of the organization	Page 2 Employer identification number
HARLEM CHILDREN'S ZONE, INC.	23-7112974
BLACK-WHITE ACHIEVEMENT GAP; AND WE'VE HELPED OUR GRADUATES BUILD	
SUCCESSFUL CAREERS AND BECOME CONSCIENTIOUS CITIZENS.	
CESSFUL CAREERS AND BECOME CONSCIENTIOUS CITIZENS.	
EDUCATION AND YOUTH PROGRAMS	
PEACEMAKERS	
PEACEMAKERS PARTNERS WITH HARLEM'S PUBLIC ELEMENTARY AND MIDDLE SCHOOLS	
TO HELP UNLOCK THAT POTENTIAL IN ALL STUDENTS.	
A CUT ABOVE	
A CUT ABOVE (ACA) IS AN AFTER-SCHOOL PROGRAM FOR SCHOLARS IN GRADES K-8	
THAT CULTIVATES A CULTURE OF EXCELLENCE THROUGH PERSONAL AND SOCIAL	
DEVELOPMENT, ACADEMIC SUPPORT, HEALTH AND WELLNESS, STEM AND ARTS	
ENRICHMENTS, AND COMMUNITY SERVICE.	
ACADEMY OF ARTS AND CIVIC ENGAGEMENT	
ACADEMY OF ARTS AND CIVIC ENGAGEMENT (ACE) IS AN AFTER-SCHOOL PROGRAM	
FOR HIGH SCHOOL SCHOLARS THAT PREPARES THEM FOR CAREERS IN THE ARTS.	
SCHOLARS GAIN CAREER-READY SKILLS, REAL-WORLD EXPERIENCE, AND A NETWORK	
OF PROFESSIONAL CONTACTS.	
EMPLOYMENT AND TECHNOLOGY CENTER	
EMPLOYMENT AND TECHNOLOGY CENTER (ETC) IS AN AFTER-SCHOOL PROGRAM FOR	
HIGH SCHOOL SCHOLARS THAT PREPARES THEM FOR CAREERS IN STEM AND	
TECHNICAL ARTS AREAS. SCHOLARS GAIN CAREER-READY SKILLS, REAL-WORLD	
EXPERIENCE, AND A NETWORK OF PROFESSIONAL CONTACTS.	
<u> </u>	
COUNTEE CULLEN COMMUNITY CENTER	
332212 11-14-23 6.2	Schedule O (Form 990) 2023

14070513 153424 0180421-00005

Schedule O (Form 990) 2023 Name of the organization	Page Employer identification number
HARLEM CHILDREN'S ZONE, INC.	23-7112974
COUNTEE CULLEN COMMUNITY CENTER (CCCC) IS AN AFTER-SCHOOL PROGRAM FOR	
HIGH SCHOOL SCHOLARS THAT PREPARES THEM FOR CAREERS IN BROADCASTING AND	
MEDIA ARTS. SCHOLARS GAIN CAREER-READY SKILLS, REAL-WORLD EXPERIENCE,	
AND A NETWORK OF PROFESSIONAL CONTACTS.	
FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:	
COLLEGE AND CAREER PROGRAMS	
COLLEGE SUCCESS OFFICE	
DUR SCHOLARS MAY LEAVE THE ZONE TO GO TO COLLEGE, BUT THE ZONE NEVER	
LEAVES THEM. COLLEGE SUCCESS OFFICE (CSO) EMPOWERS OUR SCHOLARS TO	
SUCCEED IN COLLEGE AND EARN THEIR DEGREES SO THEY CAN EMBARK ON	
FRUITFUL CAREERS AND PAVE THE PATH TO SOCIAL AND ECONOMIC MOBILITY.	
WHEN SCHOLARS GET INTO COLLEGE, THEY GET THE HELP THEY NEED TO PERSIST	
THROUGH THEIR POST-SECONDARY JOURNEY. OUR COLLEGE SUCCESS OFFICE	
SERVICES INCLUDE:	
-ONE-ON-ONE COACHING	
-ACADEMIC, EMOTIONAL, AND FINANCIAL SUPPORT	
-CHECK INS WITH SCHOLARS TO ENSURE THEY'RE PROGRESSING ALONG THEIR	
COLLEGE JOURNEY	
-VISITS FROM CSO STAFF TO HELP SCHOLARS ESTABLISH AND MAINTAIN	
RELATIONSHIPS WITH CAMPUS AND COMMUNITY LIAISONS	
CURRENTLY, HCZ HAS OVER 900+ SCHOLARS MATRICULATED IN COLLEGE AND OVER	
1,300 SCHOLARS HAVE GRADUATED SINCE 2011.	
FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:	

332212 11-14-23

Schedule O (Form 990) 2023

14070513 153424 0180421-00005

Name of the organization	Employer identification numbe
HARLEM CHILDREN'S ZONE, INC.	23-7112974
EARLY CHILDHOOD	
THE BABY COLLEGE	
THE BABY COLLEGE PROMOTES THE HEALTH AND SUCCESS OF NEWBORNS AND	
TODDLERS THROUGH A NINE-WEEK WORKSHOP SUPPORTING NEW AND EXPECTANT	
PARENTS AND CAREGIVERS THROUGH THE INS AND OUTS OF EARLY CHILDHOOD	
DEVELOPMENT.	

THE BABY COLLEGE G.R.A.D.S. (GUARDIANS RESPONDING AND DEVELOPING

STRATEGIES) EARLY HEAD START IS A YEAR-ROUND, HOME-VISITING PROGRAM

THAT EMPOWERS EXPECTANT MOTHERS TO DEEPEN THEIR UNDERSTANDING OF EARLY

CHILDHOOD DEVELOPMENT AND STRENGTHEN PARENT-CHILD RELATIONSHIPS.

THE THREE-YEAR-OLD JOURNEY

THE THREE-YEAR-OLD JOURNEY PROVIDES LOTTERY WINNERS OF HCZ'S PROMISE

ACADEMY CHARTER SCHOOLS WITH THE OPPORTUNITY TO CONTINUE TO LEARN,

GROW, AND NURTURE FRIENDSHIPS IN THE LEAD UP TO THEIR ADMISSION TO

PROMISE ACADEMY.

HARLEM GEMS

HARLEM GEMS PRESCHOOLS EMPOWER OUR YOUNGEST SCHOLARS TO SUCCEED IN K-12

AND BEYOND BY BUILDING A STRONG ACADEMIC FOUNDATION AND STARTING THEM

ON THE PATH TO COLLEGE AND CAREER.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

HEALTHY AND COMMUNITY PROGRAMS

332212 11-14-23

Schedule O (Form 990) 2023

Name of the organization	Employer identification number
HARLEM CHILDREN'S ZONE, INC.	23-7112974
CENTRAL HARLEM IS ENRICHED WITH COMMUNITY MEMBERS STEEPED IN RICH,	
UNIQUE, AND PROUD HISTORY. WE ARE AT OUR BEST WHEN THE PEOPLE OF HARLEM	
HAVE ECONOMIC OPPORTUNITY AND ACCESS TO THE TOOLS AND SYSTEMS THAT	
SUPPORT THEIR WELLBEING IN EVERY SENSE.	
TO BUILD UP OPPORTUNITIES AND ACCESS FOR OUR COMMUNITY, WE HAVE CREATED	
A BROAD OFFERING OF PROGRAMS AND SERVICES THAT CREATE PATHWAYS TO	
SELF-SUFFICIENCY, PERSONAL GROWTH, AND PHYSICAL, MENTAL, AND EMOTIONAL	
HEALTH. WE ALSO LOOK FOR EVERY OPPORTUNITY TO STRENGTHEN THE	
FOUNDATIONS OF OUR NEIGHBORHOODS. TO US, THIS MEANS CREATING	
OPPORTUNITIES FOR COMMUNITY MEMBERS TO COME TOGETHER, LEARN FROM AND	
WITH EACH OTHER, SOCIALIZE AND HAVE FUN, AND SUPPORT THE BROADER	
COMMUNITY. THE FOLLOWING COMMUNITY PROGRAMS ARE AVAILABLY TO OUR	
STUDENTS:	
COMMUNITY PRIDE	
COMMUNITY PRIDE IS A PROGRAM OF GRASSROOTS, BOOTS-ON-THE-GROUND	
CONNECTORS, COMMUNITY BUILDERS, AND PROBLEM SOLVERS DEVOTED TO	
EMPOWERING INDIVIDUALS AND THE COMMUNITY-AT-LARGE.	
HEALTHY HARLEM	
HEALTHY HARLEM IS EMPOWERING A CULTURE OF HEALTH IN CENTRAL HARLEM BY	
HELPING THOUSANDS OF CHILDREN AND FAMILIES LEARN HOW TO TAKE BETTER	
CARE OF THEMSELVES, MAKE THOUGHTFUL CHOICES, AND ESTABLISH LIFELONG	
HELPING THOUSANDS OF CHILDREN AND FAMILIES LEARN HOW TO TAKE BETTER CARE OF THEMSELVES, MAKE THOUGHTFUL CHOICES, AND ESTABLISH LIFELONG HEALTHY HABITS.	
CARE OF THEMSELVES, MAKE THOUGHTFUL CHOICES, AND ESTABLISH LIFELONG	
CARE OF THEMSELVES, MAKE THOUGHTFUL CHOICES, AND ESTABLISH LIFELONG HEALTHY HABITS.	Schedule O (Form 990) 202

Schedule O (Form 990) 2023	Page 2
Name of the organization	Employer identification number
HARLEM CHILDREN'S ZONE, INC.	23-7112974
TO EMPOWERING A CULTURE OF HEALTH AND WELLNESS IN CENTRAL HARLEM.	

NATIONAL LEADERSHIP PROGRAMS

PRACTITIONERS INSTITUTE

PRACTITIONERS INSTITUTE HELPS ORGANIZATIONS ACROSS THE U.S. AND THE

WORLD IMPLEMENT COMPREHENSIVE, PLACE-BASED SOLUTIONS DEVELOPED AT

HARLEM CHILDREN'S ZONE IN THEIR COMMUNITIES.

HEALTHY WAYS REPLICATION

INSPIRED BY HEALTHY HARLEM, HEALTHY WAYS IS A NATIONAL PROGRAM THAT

CHAMPIONS HEALTHY HABITS AND LIFESTYLES FOR CHILDREN AND FAMILIES BY

PROVIDING ENGAGING PROGRAMS FOCUSED ON NUTRITION AND PHYSICAL ACTIVITY.

WEALTH BUILDS

WEALTH BUILDS SEEKS TO CLOSE THE RACIAL WEALTH GAP AND OPENS PATHWAYS

TO SOCIAL AND ECONOMIC MOBILITY BY EMPOWERING OUR SCHOLARS WITH THE

EDUCATION AND RESOURCES TO BUILD SUCCESSFUL FINANCIAL FUTURES.

WILLIAM JULIUS WILSON INSTITUTE

WILLIAM JULIUS WILSON INSTITUTE IS A NATIONAL RESOURCE FOR PLACE-BASED,

PEOPLE-FOCUSED SOLUTIONS THAT OPEN PATHWAYS TO SOCIAL AND ECONOMIC

MOBILITY.

EXPENSES \$ 29,799,186. INCLUDING GRANTS OF \$ 3,479,690. REVENUE \$ 0.

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

POLICIES

PROCESS USED TO REVIEW FORM 990 THE FORM 990 WAS PREPARED BY A NATIONALLY

332212 11-14-23

Schedule O (Form 990) 2023

Schedule O (Form 990) 2023 Name of the organization		Page Employer identification number
HARLEM CHILDREN'S ZONE, INC.		23-7112974
RENOWNED ACCOUNTING FIRM IN CONJUNCTION WITH THE C	RGANIZATION'S FINANCE	
DEPARTMENT. A COPY OF THE DRAFT FORM 990 WAS CIRCU	LATED TO THE AUDIT	
COMMITTEE FOR DISCUSSION AND COMMENT. EACH AUDIT C	OMMITTEE MEMBER WAS	
PROVIDED AMPLE OPPORTUNITY TO COMMENT ON THE INFOR	MATION CONTAINED IN THE	
990 PRIOR TO ITS FILING WITH THE INTERNAL REVENUE	SERVICE. THE AUDIT	
COMMITTEE WILL SUMMARIZE ITS FINDING ON THE FORM 9	90 TO THE FULL BOARD OF	
DIRECTORS. FOLLOWING THE COMMITTEE'S SUMMARY THE E	OARD WILL BE AFFORDED	
TIME TO REVIEW AND MAKE RECOMMENDATIONS AS NEEDED.		
FORM 990, PART VI, SECTION B, LINE 12C:		
ENFORCEMENT AND MONITORING OF CONFLICT OF INTEREST	POLICY ALL EMPLOYEES ARE	
EXPECTED TO USE HONESTY, GOOD JUDGEMENT AND HIGH E	THICAL STANDARDS IN ALL	
PROFESSIONAL DEALINGS. ALL EMPLOYEES MUST AVOID AN	Y ACTIONS THAT COULD	
CREATE A CONFLICT OF INTEREST OR THE APPEARANCE OF	SUCH A CONFLICT OR	
REFLECT UNFAVORABLY ON THEM OR ON HARLEM CHILDREN	S ZONE. AN EMPLOYEE MUST	
DISCLOSE IF SHE/HE OR AN IMMEDIATE FAMILY MEMBER H	AS ANY POTENTIAL CONFLICT	
OF INTEREST SUCH AS A RELATIONSHIP TO A THIRD PART	Y VENDOR WHO SEEKS OR HAS	
A BUSINESS RELATIONSHIP WITH HARLEM CHILDREN'S ZON	E. AN EMPLOYEE'S	
VIOLATION OF THIS POLICY, ESPECIALLY A FAILURE TO	REPRESENT ACCURATELY HIS	
OR HER CONNECTION OR ACTION ON BEHALF OF HARLEM CH	ILDREN'S ZONE AND A THIRD	
PARTY WILL CONSTITUTE GROUNDS FOR DISCIPLINARY ACT	ION, UP TO AND INCLUDING	
TERMINATION OF EMPLOYMENT.		
FORM 990, PART VI, SECTION B, LINE 15:		
PROCESS FOR DETERMINING COMPENSATION THE ORGANIZAT	ION UNDERTAKES A THOROUGH	
PROCESS TO ENSURE THAT THE EXECUTIVE COMPENSATION	IT PAYS TO ITS TOP	
MANAGEMENT OFFICIAL AND ALL OF ITS OFFICERS AND KE	Y EMPLOYEES IS REASONABLE	
GIVEN THE MARKET IN WHICH THE ORGANIZATION OPERATE	S. HARLEM CHILDREN ZONE	
332212 11-14-23	67	Schedule O (Form 990) 20

Schedule O (Form 990) 2023 Name of the organization	Page Employer identification numbe
HARLEM CHILDREN'S ZONE, INC.	23-7112974
RECENTLY COMMISSIONED A COMPENSATION SURVEY IN MARCH OF 2021 TO ENSURE THAT	
THE WAGES IT PAYS ITS EXECUTIVES IS COMMENSURATE WITH THE MARKET IN WHICH	
IT OPERATES.	
FORM 990, PART VI, SECTION C, LINE 19:	
AVAILABILITY OF DOCUMENTS TO THE PUBLIC	
THE ORGANIZATION MAKES ITS FORM 990 AVAILABLE TO THE PUBLIC BY RETAINING A	
COPY AT ITS PLACE OF BUSINESS. THE FORM 990 IS LIKEWISE PUBLISHED ON THE	
INTERNET AT WWW.GUIDESTAR.ORG. THE ORGANIZATION POSTS ITS AUDITED FINANCIAL	
STATEMENTS AND FORM 990 ON ITS WEBSITE, BUT ITS GOVERNING DOCUMENTS AND	
CONFLICT OF INTEREST POLICY ARE AVAILABLE UPON REQUEST AND PROVIDED AT	
MANAGEMENT'S DISCRETION.	
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
INCREASE IN VALUATION OF DONATED GOLD COINS 235,128.	
332212 11-14-23	Schedule O (Form 990) 20

SCHEDULE R

Department of the Treasury Internal Revenue Service

(Form 990)

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Attach to Form 990.

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

Name of the organization

HARLEM CHILDREN'S ZONE, INC.

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
RHEEDLEN 125TH STREET, LLC					
35 EAST 125TH STREET					
NEW YORK, NY 10035	HOLD PROPERTY	NEW YORK	0.	0.	нсz
HCZ PROMISE LLC - 27-2392634					
35 EAST 125TH STREET					
NEW YORK, NY 10035	HOLD PROPERTY	NEW YORK	0.	0.	HCZ
168 TITICUS RD. LLC					
168 TITICUS ROAD					
NORTH SALEM, NY 10560	HOLD PROPERTY	NEW YORK	0.	0.	нсz

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity		g) 512(b)(13) rolled tity?
				501(c)(3))		Yes	No
HCZ PROMISE ACADEMY CHARTER SCHOOL -							
76-0756768, 245 W 129TH STREET, NEW YORK, NY							
10027	EDUCATION	NEW YORK	501(C)(3)	LINE 2	нсz	х	
HCZ PROMISE ACADEMY CHARTER SCHOOL II -							
34-2049530, 35 EAST 125TH STREET, NEW YORK,	7						
NY 10035	EDUCATION	NEW YORK	501(C)(3)	LINE 2	HCZ	x	
	7						

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

Schedule R (Form 990) 2023

OMB No. 1545-0047

2023

Open to Public Inspection

Employer identification number

23-7112974

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

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

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

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

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

lote: Complete lii	ne 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	s I
1 During the ta	x year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of (i)	interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a	X	
	r capital contribution to related organization(s)		X	
	r capital contribution from related organization(s)			
	n guarantees to or for related organization(s)			
e Loans or loar	n guarantees by related organization(s)			-
f Dividends fro	om related organization(s)			
g Sale of asset	is to related organization(s)			
	assets from related organization(s)			
i Exchange of	assets with related organization(s)	1i		
	lities, equipment, or other assets to related organization(s)		X	_
k Lease of facil	lities, equipment, or other assets from related organization(s)	1k		
	of services or membership or fundraising solicitations for related organization(s)		X	
m Performance	of services or membership or fundraising solicitations by related organization(s)	1m		
n Sharing of fa	cilities, equipment, mailing lists, or other assets with related organization(s)	1n	X	
	aid employees with related organization(s)		X	_
p Reimburseme	ent paid to related organization(s) for expenses			
	ent paid by related organization(s) for expenses		X	_
r Other transfe	er of cash or property to related organization(s)	1r	x	
s Other transfe	er of cash or property from related organization(s)			T

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

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) HARLEM CHILDREN'S ZONE PROMISE ACADEMY CHARTER SCHOOL II	J	2,335,289.	FMV
(2) HARLEM CHILDREN'S ZONE PROMISE ACADEMY CHARTER SCHOOL II	A	2,335,289.	FMV
(3) HARLEM CHILDREN'S ZONE PROMISE ACADEMY CHARTER SCHOOL	В	2,727,608.	FMV
(4) HARLEM CHILDREN'S ZONE PROMISE ACADEMY CHARTER SCHOOL II	В	1,471,214.	FMV
(5) HARLEM CHILDREN'S ZONE PROMISE ACADEMY CHARTER SCHOOL	L	770,070.	FMV
(6) HARLEM CHILDREN'S ZONE PROMISE ACADEMY CHARTER SCHOOL II	L	1,261,057.	FMV

Schedule R (Form 990) HARLEM CHILDREN'S ZONE, INC.

Part V Continuation of Transactions With Related Organizations (Schedule R (Form 990), Part V, line 2)

(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(7) HARLEM CHILDREN'S ZONE PROMISE ACADEMY CHARTER SCHOOL	Q	770,070.	FMV
(8) HARLEM CHILDREN'S ZONE PROMISE ACADEMY CHARTER SCHOOL II	Q	814,852.	FMV
(9)			
(10)			
(11)			
(12)			
_ (13)			
_ (14)			
_ (15)			
_ (16)			
_ (17)			
(18)			
(19)			
(20)			
(21)			
(22)			
(23)			
_ (24)			

Schedule R (Form 990) 2023 HARLEM CHILDREN'S ZONE, INC.

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

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

(a)	(b)	(c)		14	2)	(f)	(g)	(r	J)	(i)	(j)	(k)
Name, address, and EIN	Primary activity	Legal domicile	Predominant income	Are Are partne 501(org	all	Share of	Share of		• , opor-	Code V-LIBI	Genera	
of entity	i mary douring	(state or foreign	(related, unrelated,	501(c)(3)	total	end-of-year	Dispr tior allocat	iate tions?	amount in box 20	manag	ownership
,		country)		Yes		income	assets	Yes	No		Yes	
			/	103	NO			103		,		
										1		

Schedule R (Form 990) 2023

HARLEM CHILDREN'S ZONE, INC.

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.

SCHEDULE R, RELATED PARTY TRANSACTIONS:

PURSUANT TO THE TERMS OF COMMITMENT LETTERS BETWEEN HCZ AND THE PROMISE

ACADEMY CHARTER SCHOOLS, ("PACS"), HCZ, AS THE PACS'S INSTITUTIONAL

PARTNER, COMMITTED TO PROVIDE THE PACS CERTAIN SERVICES AT NO COST.

PACS ARE TWO HIGH-QUALITY CHARTER SCHOOLS AFFILIATED WITH THE

ORGANIZATION. THESE SERVICES INCLUDE FINANCIAL MANAGEMENT, SOCIAL,

TECHNOLOGY, FUNDRAISING, PUBLIC RELATIONS, AND TEACHING ASSISTANCE

SERVICES.

BOTH CHARTER SCHOOLS HAVE RENEWED THEIR COMMITMENT LETTERS WITH HARLEM

CHILDREN'S ZONE FOR A FOUR-YEAR PERIOD THAT RUNS THROUGH JUNE 30, 2024.

HCZ'S CONTRIBUTED SPACE AND SERVICES PROVIDED TO THE PACS FOR THE YEAR

ENDED JUNE 30, 2024 AMOUNTED TO \$2,477,332. THE HARLEM CHILDREN'S ZONE

PROVIDES ADDITIONAL FUNDING TO BOTH CHARTER SCHOOLS TO SUPPORT

OPERATIONS. IN FISCAL YEAR 2024, HARLEM CHILDREN'S ZONE PROVIDED THE

PROMISE ACADEMIES WITH \$4,198,822 IN GRANT FUNDING. HARLEM CHILDREN'S

ZONE INCLUDES WITHIN ITS SECTION 457(F) PLAN AND TEACHERS SUPPLEMENTAL

BONUS PLAN, CERTAIN EMPLOYEES OF BOTH CHARTER SCHOOLS. OF THE

\$4,198,822 IN FUNDING RECEIVED, \$1,741,105 REPRESENTS FUNDING TO COVER

THE 457(F) PLAN AND BONUS PLAN COSTS.

332165 09-28-23