Return of Organization Exempt From Income Tax

OMB No. 1545-0047

23

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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.

Open to Public Inspection

inter	nai neve	enue Service	Go to www.iis.gov/Formaso for instructions and the late	31 1110	iniation.		Inspection
Α	For the	e 2023 calen	dar year, or tax year beginning 07/01/2023 and endin	g	06/30/2	024	
в	Check if	f applicable:	C Name of organization 34TH STREET PARTNERSHIP INC			D Emple	oyer identification number
	Address	s change	Doing business as	_			13-3629973
	Name c	hange	Number and street (or P.O. box if mail is not delivered to street address)	Roon	n/suite	E Telepł	none number
	Initial re	eturn	1065 Avenue of the Americas				212-719-3434
	Final ret	urn/terminated	City or town, state or province, country, and ZIP or foreign postal code				
	Amende	ed return	New York, NY 10018			G Gross	receipts \$ 14,697,049
	Applicat	tion pending	F Name and address of principal officer: Daniel A Biederman		H(a) Is this a gro	up return fo	or subordinates? 🗌 Yes 🗹 No
			1065 Avenue of the Americas, Suite 2400, New York, NY 10018		H(b) Are all su	bordinat	es included? 🗌 Yes 🗌 No
I	Tax-exe	empt status:	✓ 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 52	?7	If "No," attach	a list. Se	ee instructions.
J	Website	e: 34thstree	et.org		H(c) Group ex	emption	number
κ	Form of	organization:	Corporation Trust Association Other L Year of fo	rmatior	: 1991	M State	of legal domicile: NY
Ρ	art I	Summa	ry				
	1	Briefly des	cribe the organization's mission or most significant activities: Imp	rove tl	ne commerci	al and	physical environment
e		within New	Vork City's 34th Street district by providing the highest quality supp	lement	al urban serv	vices a	nd streetscape
าลท		(Continued	I on Schedule O, Statement 1)				
/err	2	Check this	box 🗍 if the organization discontinued its operations or dispose	d of m	ore than 25	% of it	s net assets.
50	3	Number of	voting members of the governing body (Part VI, line 1a)			3	57
જ	4	Number of	independent voting members of the governing body (Part VI, line	1b)		4	56
ties	5	Total num	per of individuals employed in calendar year 2023 (Part V, line 2a)			5	219
Activities & Governance	6	Total num	per of volunteers (estimate if necessary)		6	0	
Ac	7a	Total unrel	ated business revenue from Part VIII, column (C), line 12			7a	0
	b	Net unrela	ted business taxable income from Form 990-T, Part I, line 11 .			7b	0
					Prior Year		Current Year
Ð	8	Contributio	ons and grants (Part VIII, line 1h)		2	34,898	362,025
Revenue	9	Program s	ervice revenue (Part VIII, line 2g)		14,19	99,890	14,165,564
eve	10	Investmen	t income (Part VIII, column (A), lines 3, 4, and 7d)		1	14,907	169,460
Œ	11	Other reve	nue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) .			0	0
	12	Total reven	ue-add lines 8 through 11 (must equal Part VIII, column (A), line 12	()	14,54	49,695	14,697,049
	13	Grants and	d similar amounts paid (Part IX, column (A), lines 1–3)			0	0
	14	Benefits pa	aid to or for members (Part IX, column (A), line 4)			0	0
ŝ	15	Salaries, ot	her compensation, employee benefits (Part IX, column (A), lines 5-10)	9,24	40,441	9,736,899
Expenses	16a	Profession	al fundraising fees (Part IX, column (A), line 11e)			0	0
xpe	b	Total fund	raising expenses (Part IX, column (D), line 25)				
Ш	17	Other expe	enses (Part IX, column (A), lines 11a–11d, 11f–24e)		5,2	86,573	5,672,248
	18	Total expe	nses. Add lines 13–17 (must equal Part IX, column (A), line 25)		14,52	27,014	15,409,147
	19	Revenue le	ess expenses. Subtract line 18 from line 12		:	22,681	-712,098
Net Assets or Fund Balances				Beg	inning of Curre	ent Year	End of Year
sets alan	20	Total asse	ts (Part X, line 16)		13,43	38,729	11,984,563
it As	21		ties (Part X, line 26)		5,8	77,790	5,135,722
			or fund balances. Subtract line 21 from line 20		7,5	60,939	6,848,841
Pa	art II	Signatu	re Block				

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

Sign Here	Signature of officer Peter Ciriello, Chief Financial Officer			Dat	e		
	Type or print name and title						
Paid Preparer	Print/Type preparer's name	Date	Date Check if self-employed				
Use Only	Firm's name		Firm's EIN				
Use Only	Firm's address	Phone no.					
May the IRS	discuss this return with the prepare	er shown above? See instructions				Yes	No

For Paperwork Reduction Act Notice, see the separate instructions.

Т

Т

orm 99	0 (2023) Page
Part	
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	Provide services and improvements intended to enhance the commercial and physical environment for people who work and live
	within, or visit, the 34th Street district in Manhattan. The services provided, pursuant to a contract with the NYC Department of
	Small Business Services, include sanitation, security, horticulture, visitor information, programming and management of public
2	parks and pedestrian plazas, as well as, designing, constructing and maintaining streetscape and park improvements. 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.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
	services?
	If "Yes," describe these changes on Schedule O.
1	Describe the organization's program service accomplishments for each of its three largest program services, as measured b
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others the total expenses, and revenue, if any, for each program service reported.
	the total expenses, and revenue, if any, for each program service reported.
a	(Code:) (Expenses \$4,697,743 including grants of \$) (Revenue \$6,039)
	Sanitation and special maintenance: uniformed sweepers pick up litter, clean gutters, empty trash cans, remove graffiti and
	stickers, clean and service park restrooms, clear snow from crosswalks, bus shelters and public spaces, and clean and paint
	streetscape elements throughout the district.
)	(Code:) (Expenses \$ 3,336,391 including grants of \$) (Revenue \$ 251,690)
, ,	Security and taxi dispatch: uniformed security officers patrol the district. Security officers deter crime, report incidents to the NYPD,
	protect property and assist visitors and residents. Taxi dispatchers monitor lines of waiting patrons and taxi cabs at three taxi
	stands adjacent to Penn and Moynihan Stations and Madison Square Garden.
c	$(Code:)/Even no e = 2.442.040 including grapts of \Phi)/Devenue \Phi = 25.252$
;	(Code:) (Expenses \$ 2,442,849 including grants of \$) (Revenue \$ 23,825)
	Capital projects: streetscape improvements are designed, built and maintained in accordance with the urban design plan of the
	34th Street district. Improvements include, but are not limited to signature granite sidewalk corners, distinctive light poles,
	illuminated street name signs, tree pits, framed traffic control and parking regulation signs, benches, bike racks, park concession
	and restroom buildings, custom street planters and trash cans. Capital project expenses include interest and other charges related
	to the debt issued to finance improvements, as well as, the depreciation of improvements.
-	Other program services (Describe on Schedule O.) See Schedule O, Statement 2
d	(Expenses \$ 3,370,663 including grants of \$ 0) (Revenue \$ 884,109)
•	Total program service expenses 13,847,646

Form 99	D (2023)		F	Page 3
Part	V Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	~	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	~	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3		~
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		~
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5		~
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If</i> "Yes," <i>complete Schedule D, Part I</i>	6		~
7	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 "Yes," complete Schedule D, Part II</i>	7		~
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		~
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>	9		~
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i> .	10		~
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	~	
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? <i>If "Yes," complete Schedule D, Part VII</i>	11b		~
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? <i>If "Yes," complete Schedule D, Part VIII</i>	11c		~
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>	11d	~	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	~	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11f		~
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	~	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		~
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		~
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		~
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate			
45	foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i> .	14b		~
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? <i>If "Yes," complete Schedule F, Parts II and IV</i>	15		~
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? <i>If "Yes," complete Schedule F, Parts III and IV.</i>	16		~
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? <i>If "Yes," complete Schedule G, Part I.</i> See instructions	17		~
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i> .	18		~
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	19		~
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		~
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21		~

Form 99	90 (2023)		I	Page 4
Part	V Checklist of Required Schedules (continued)			
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		Yes	No
23	Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22		~
	organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	~	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	24a	~	
b c	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 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		~
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b		~
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? <i>If "Yes," complete Schedule L, Part II</i>	26		~
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? <i>If "Yes," complete Schedule L, Part III</i>	27		~
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? <i>If</i> "Yes," <i>complete Schedule L, Part IV</i>	28a		~
b c	A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i> A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>	28b 28c		~ ~
29 30	Did the organization receive more than \$25,000 in noncash contributions? <i>If "Yes," complete Schedule M</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	29 30		<i>v</i> <i>v</i>
31 32	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	31 32		~ ~
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		~
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	~	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		~
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2.	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		~
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		~
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	~	
Part	V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a b c	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable185Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable10Did the organization comply with backup withholding rules for reportable paymentsto vendors and	-		
	reportable gaming (gambling) winnings to prize winners?	1c		

Form 99			ŀ	Page 5
Part			Yes	No
	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 219			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	~	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		~
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O .	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		~
	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		~
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		~
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		~
	If "Yes," did the organization include with every solicitation an express statement that such contributions or	oa		V
	gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).	0.5		
	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		~
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		~
d	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		~
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		~
-	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	•		
	Sponsoring organization mave excess business notings at any time during the year	8		
	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter:	0.5		
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b			
11	Section 501(c)(12) organizations. Enter:			
а	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.)			
	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.	13a		
а	Is the organization licensed to issue qualified health plans in more than one state?	138		
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			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		~
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O .	14b		
	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	~	
	If "Yes," see the instructions and file Form 4720, Schedule N.			
	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		~
	If "Yes," complete Form 4720, Schedule O.			
	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person, engage in any activities that would regult in the imposition of an aveian tax under section 4951, 4952, or 49532			
	that would result in the imposition of an excise tax under section 4951, 4952, or 4953?	17		
	If "Yes," complete Form 6069.			

Form 990 (20)	23)
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Part	Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below response 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			
Secti	on A. Governing Body and Management			
			Yes	No
1 a		4		
	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 56			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	1		
_	any other officer, director, trustee, or key employee?	2		~
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?	3		~
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		~
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		~
6	Did the organization have members or stockholders?	6	~	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7a	~	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
0	stockholders, or persons other than the governing body?	7b		~
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	~	
b	Each committee with authority to act on behalf of the governing body?	8b	~	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? <i>If "Yes," provide the names and addresses on Schedule O</i>			
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Rever	9	ode)	~
Secu	on b. Policies (This Section D requests information about policies not required by the internal never		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		~
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	~	
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? <i>If "No," go to line 13</i>	12a	~	
b c	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	12b	~	
U	describe on Schedule O how this was done.	12c	~	
13	Did the organization have a written whistleblower policy?	13	~	
14	Did the organization have a written document retention and destruction policy?	14		~
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	~	
b	Other officers or key employees of the organization	15b	~	
	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 arrangement with a taxable entity during the year?	16a		~
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	164		
Secti	on C. Disclosure	16b		
17	List the states with which a copy of this Form 990 is required to be filed NY			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-	T (sec	tion {	501(c

- (3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 - ✓ Own website ☐ Another's website ✓ Upon request ☐ Other (explain on Schedule O)
- **19** Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20 State the name, address, and telephone number of the person who possesses the organization's books and records. 34th Street Partnership Inc, (212)719-3434

Form 990 (2023)

Page 6

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.

				(C)					
(A)	(B)			Pos	ition			(D)	(E)	(F)
Name and title	Average					e than o		Reportable	Reportable	Estimated amount
	hours	box, unless person is both a officer and a director/trustee						compensation	compensation	of other
	per week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/ 1099-MISC/ 1099-NEC)	from related organizations (W-2/ 1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
Daniel A Biederman	25.00		-			ä				
President	25.00	~		~				433,118	604,808	45,920
Peter Ciriello	25.00	-		-				400,110	004,000	43,720
Controller & CFO	25.00	-		~				155,681	156,721	10,658
Dan Pisark	32.50							100,001	100,721	10,000
VP Retail Services	17.50	1			~			181,785	99,528	19,734
Marc Boddewyn	25.00									
VP Capital Projects	25.00	1			~			120,993	124,033	7,341
Kaitlin Solomon	20.00									
VP Operations	30.00				~			78,198	117,297	3,979
Eric Mueller	5.00									
Director Graphic Design	45.00	1				~		15,093	138,816	31,370
Inessa Kanevskaya	25.00									
Deputy Controller	25.00					~		79,241	81,494	16,038
Quentin Robbins	20.00									
VP Visitor Services	30.00					~		51,691	76,813	42,594
Dan Fishman	10.00									
Director of Events	40.00					~		26,551	108,620	32,425
John Zeitoun	14.00									
Director of Partnerships	36.00					~		38,488	96,668	15,968
Rachel Zurier	14.00									
Director of Operations	36.00					~		32,890	104,538	4,285
Kevin Ward	0.00									
Former VP Security	0.00						~	83,625	43,079	3,877
Vincent Degennaro	0.00									
Chief of Sanitation	0.00						~	113,681	0	3,611
Brian McGinn	30.00	4								
VP Security	25.00				~			32,949	16,974	635

Form **990** (2023)

				(0	C)					
(A)	(B)	(-1	-4 -1		sition			(D)	(E)	(F)
Name and title	Average		do not check more that ox, unless person is b					Reportable	Reportable	Estimated amount
	hours per week	officer and a director/trustee)						compensation from the	compensation from related	of other compensation
	(list any	Individual t or director	Inst	Officer	Key	High	Former	organization (W-2/	organizations (W-2/	from the
	hours for related	Individual trustee or director	Institutional	cer	Key employee	nest	ner	1099-MISC/ 1099-NEC)	1099-MISC/ 1099-NEC)	organization and related organizations
	organizations	tor t	onal		ploy	e on		1033-1120)	1033-1120)	related organizations
	below dotted line)	uste	l trustee		ee	Iper				
		ě	stee			Highest compensated employee				
Andrew Bauman	0.20									
Class A Director	0.00	~						0	0	0
Deborah Brause Bunder	0.10									
Class A Director	0.00	~						0	0	0
Andrew Burnett	0.10]								
Class A Director	0.00	~						0	0	0
Scott Domansky	0.10									
Class A Director	0.00	~						0	0	0
Jared L Epstein	0.10	-								
Class A Director	0.00	~						0	0	0
Hal Fetner	0.10	-								
Class A Director	0.00	~						0	0	0
Joel G Fisher	0.10	1								
Class A Director	0.00	~						0	0	0
Dr Robin Garrell	0.10	1								
Class A Director	0.00	~						0	0	0
Eric Gural	0.20	-								
Class A Director	0.00	~						0	0	0
Stephen D Haymes	0.10	-								
Class A Director	0.00	~						0	0	0
Michael Hirschhorn	0.20									
Class A Director	0.00	~						0	0	0
Louis Jerome	0.10	l .								
Class A Director	0.00	~						0	0	0
Jason Konopolsky	0.10									
Class A Director	0.00	~						0	0	0
Peter Levenson	0.10									
Class A Director	0.00	~						0	0	0

		(C) Position								
(A)	(B)		do not check more t					(D)	(E) Reportable compensation	(F)
Name and title	Average hours					person is both an a director/trustee)		Reportable compensation		Estimated amount of other
	per week		1	1			r – –	from the	from related	compensation
	(list any hours for	Individual trustee or director	stitu	Officer	Key employee	ighe	Former	organization (W-2/ 1099-MISC/	organizations (W-2/ 1099-MISC/	from the organization and
	related	dual	Ition	Ä	mp	st co lyee	¥	1099-NEC)	1099-NEC)	related organizations
	organizations below	r trus	al tr		суее	omp				
	dotted line)	tee	Institutional trustee			Highest compensated employee				
			e			ted				
James Lewis	0.20	-								
Class A Director	0.00	~						0	0	0
Ephram Lustgarten	0.10									
Class A Director	0.00	~						0	0	0
Peter L Malkin	0.20									
Class A Director	0.00	~						0	0	0
Frank McCreary	0.10	ļ								
Class A Director	0.00	~						0	0	0
Charles Miller	0.20	ļ								
Class A Director	0.00	~						0	0	0
Berndt Perl	0.10	ļ								
Class A Director	0.00	~						0	0	0
Ann Peterson	0.10	ļ								
Class A Director	0.00	~						0	0	0
Edward Piccinich	0.10	ļ								
Class A Director	0.00	~						0	0	0
Andrew S Ratner	0.20	ļ								
Class A Director	0.00	~						0	0	0
Alan Schall	0.10	ļ								
Class A Director	0.00	~						0	0	0
Sue Stecich	0.10	-								
Class A Director	0.00	~						0	0	0
Greg Sutherland	0.10	-								
Class A Director	0.00	~						0	0	0
Kenneth Walsh	0.10	-								
Class A Director	0.00	~						0	0	0
Glen J Weis	0.10									
Class A Director	0.00	~						0	0	0

				(C)					
(A)	(B)				sition			(D)	(E)	(F)
Name and title	Average hours per week	box, office	unles er and	ss pe d a c	erson lirect	e than o is both or/truste	an ee)	Reportable compensation from the	Reportable compensation from related	Estimated amount of other compensation
	(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/ 1099-MISC/ 1099-NEC)	organizations (W-2/ 1099-MISC/ 1099-NEC)	from the organization and related organizations
Andrea Arce	0.10									
Class B Director	0.00	~						0	0	0
Ash Bhasin	0.10	1								
Class B Director	0.00	~						0	0	0
Mark Centoducati	0.10									
Class B Director	0.00	~						0	0	0
Lorraine Collins	0.10]								
Class B Director	0.00	~						0	0	0
Jonathan Coun	0.10									
Class B Director	0.00	~						0	0	0
Heather Cruz	0.10									
Class B Director	0.00	~						0	0	0
Eli Daskal	0.10									
Class B Director	0.00	~						0	0	0
David Golab	0.10									
Class B Director	0.00	~						0	0	0
Patrick Kinzler	0.10									
Class B Director	0.00	~						0	0	0
Thomas King	0.10									
Class B Director	0.00	~						0	0	0
Jason Lerner	0.10									
Class B Director	0.00	~						0	0	0
John C McGinley	0.10									
Class B Director	0.00	~						0	0	0
Brian Moroz	0.10									
Class B Director	0.00	~						0	0	0
Carolyn Nagler	0.10									
Class B Director	0.00	~						0	0	0

				(0	C)					
(A)	(B)	(d.a. m	at ak		sition			(D)	(E)	(F)
Name and title	Average					e than o is both		Reportable	Reportable	Estimated amount
	hours per week		er and	1	lirect	or/trust	<u> </u>	compensation from the	compensation from related	of other compensation
	(list any	Individual t or director	Inst	Officer	Key employee	High	Former	organization (W-2/	organizations (W-2/	from the
	hours for related	Individual trustee or director	Institutional	cer	em	nest	ner	1099-MISC/ 1099-NEC)	1099-MISC/ 1099-NEC)	organization and related organizations
	organizations	tor tr	onal		ploy	e on		1000 (1020)	1000 (1000)	related organizations
	below dotted line)	uste	l trustee		ee	Ipen				
		Ó	tee			Highest compensated employee				
Penry Price	0.10									
Class B Director	0.00	~						0	0	0
Scorpio Rogers	0.10									
Class B Director	0.00	~						0	0	0
Howard Rothschild	0.10	-								
Class B Director	0.00	~						0	0	0
Michael J Sweeney	0.10									
Class B Director	0.00	~						0	0	0
Martin Whelan	0.10	ļ								
Class B Director	0.00	~						0	0	0
Eric Yu	0.10	-								
Class B Director	0.00	~						0	0	0
William Thornton	0.10	-								
Class C Director	0.00	~						0	0	0
Hon Brad Lander	0.10	-								
Class D Director	0.10	~						0	0	0
Hon Erik Bottcher	0.10	-								
Class D Director	0.10	~						0	0	0
Hon Mark Levine	0.10	-								
Class D Director	0.10	~						0	0	0
Hon Dynishal Gross	0.10	ļ								
Class D Director	0.10	~						0	0	0
Kevin S Corbett	0.10	ļ								
Class E Director	0.00	~						0	0	0
Rob Free	0.10									
Class E Director	0.00	~						0	0	0
Jessica Chait	0.10									
Class E Director	0.00	~						0	0	0

Part VII Section A. Officers, Directors,	Frustees,	Key I	Emp	oloy	yee	s, an	d F	lighest Compe	ensated Emplo	yees (continued)
				(0	C)					
(A) Name and title	(B) Average hours	Position (do not check more than one box, unless person is both an officer and a director/trustee)		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other				
	per week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/ 1099-MISC/ 1099-NEC)	from related organizations (W-2/ 1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
Bradley Sherburne	0.10									
Class E Director	0.20	~						0	0	0
Sandra McKee	0.10									
Class E Director	0.00	~						0	0	0
Gaston Silva	0.50									_
Chairman	0.00	~		~				0	0	0
Steven J Kaufman	0.30									
Secretary	0.00	~		~				0	0	0
Martin Meyer Treasurer	0.30	~		~				0	0	0
1b Subtotal	L	L						1,443,984	1,769,389	238,435
c Total from continuation sheets to Part	VII. Sectio		÷					1,443,704	1,707,307	200,400
d Total (add lines 1b and 1c)								1,443,984	1,769,389	238,435
2 Total number of individuals (including reportable compensation from the organi		iimite	eu t	υτ	nos	e IISI	led	above) who re	eceivea more t	

- **3** Did the organization list any **former** officer, director, trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*
- 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
A Bulfamante Landscaping, 68 Marion Drive, New Rochelle, NY 10804	Horticutural installation and n	414,689
Skyline Maintenance and Landscaping, 269 Wright Street, Westbury, NY 11590	Streetscape Maintenance	267,558
Hacket Landscape Design Inc, 1532 Beaverkill Road, Lew Beach, NY 12758	Horticultural consulting	100,300
2 Total number of independent contractors (including but not limited to	o those listed above) who	
received more than \$100,000 of compensation from the organization	3	

Page 8

Yes

V

V

3

4

5

No

~

Part VIII Statement of Revenue

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

		Oneck II Schedule	0.00		opor					
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
ts,	1a	Federated campaig	ns .		1a	0				
an un	b	Membership dues			1b	0				
Contributions, Gifts, Grants, and Other Similar Amounts	С	Fundraising events			1c	0				
fts. r A	d	Related organization	ns .		1d	0				
nila Dila	е	Government grants			1e	0				
Sin	f	All other contribution								
ltic Ter		and similar amounts no			1f	362,025				
<u>ę</u> į	g	Noncash contributio								
ont nd		lines 1a-1f			1g					
<u>a</u> C	h	Total. Add lines 1a-	-1f .		•		362,025			
						Business Code				
vice	2a	Assessments				900099	13,000,000	13,000,000	0	0
le P	b	Park concession lice	ense f	ees		722000	301,925	301,925	0	0
Program Service Revenue	С	Parks and Plazas us		\$		711300	378,699	378,699	0	0
ran ?ev	d	Reimbursed service				900099	259,690	259,690	0	0
Бо.	е	Lightpole and visito				541800	225,250	225,250	0	0
ā	f	All other program se					0	0	0	0
		Total. Add lines 2a-					14,165,564			
	3	Investment income other similar amoun								
			-				169,460	0	0	169,460
	4	Income from investr				•	0	0	0	0
	5	Royalties		 (i) Rea		(ii) Personal	0	0	0	0
	60	Gross rents	6a	(i) nea						
	6а ь	Gross rents Less: rental expenses	6b							
	b C	Rental income or (loss)			0	0				
	d									
	7a	Gross amount from		(i) Securit		(ii) Other				
	74	sales of assets		()		(, •				
		other than inventory	7a							
Ð	b	Less: cost or other basis								
nu		and sales expenses .	7b							
Revenue	с	Gain or (loss)	7c		0	0				
<u> </u>	d	Net gain or (loss)								
Othe	8a	Gross income fro	m fu	ndraising						
δ		events (not including	\$	0						
		of contributions rej		d on line						
		1c). See Part IV, line	e 18		8a					
	b	Less: direct expens	es .		8b					
	С	Net income or (loss)			g eve	ents				
	9a	Gross income f								
		activities. See Part I			9a					
		Less: direct expens			9b					
		Net income or (loss)			ctivitie	es				
	10a	Gross sales of in								
	-	returns and allowan			10a					
		Less: cost of goods			10b					
	С	Net income or (loss)	Trom	i sales of in	ivento	-				
snc	11-					Business Code				
nec	11a h									
scellaneo Revenue	b									
Miscellaneous Revenue	с А	All other revenue								
Ξ. Ξ	d e	Total. Add lines 11a			•••	<u> </u>	0			
	е 12	Total revenue. See					14,697,049	14 145 544	0	160.460
	14	iotai ievenue. See	niətri		• •		14,097,049	14,165,564	0	169,460

	X Statement of Functional Expenses	ato all agli mare All	othor organizations	must complete estim	an (A)
Section	501(c)(3) and 501(c)(4) organizations must comple				
	Check if Schedule O contains a response	(A)		· · · · · · ·	<u></u> (D)
	include amounts reported on lines 6b, 7b, and 10b of Part VIII.	Total expenses	(B) Program service expenses	Management and general expenses	رم) Fundraising expenses
	Grants and other assistance to domestic organizations		enpeneee	general expenses	chponoco
a	and domestic governments. See Part IV, line 21 .	0	0		
	Grants and other assistance to domestic				
i	ndividuals. See Part IV, line 22	0	0		
3 (Grants and other assistance to foreign				
	organizations, foreign governments, and				
f	oreign individuals. See Part IV, lines 15 and 16	0	0		
	Benefits paid to or for members	0	0		
	Compensation of current officers, directors,				
t	rustees, and key employees	1,002,665	413,866	588,799	
	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
k	persons described in section 4958(c)(3)(B)	0	0	0	
	Other salaries and wages	6,380,701	6,038,306	342,395	
	Pension plan accruals and contributions (include				
5	section 401(k) and 403(b) employer contributions)	172,852	153,549	19,303	
9 (Other employee benefits	1,602,153	1,509,086	93,067	
10 F	Payroll taxes	578,528	521,701	56,827	
11 F	Fees for services (nonemployees):				
a M	Management	141,244	141,244	0	
bι	_egal	45,513	43,903	1,610	
c A	Accounting	62,100		62,100	
d L	_obbying	0	0	0	
e F	Professional fundraising services. See Part IV, line 17	0			
	nvestment management fees	0	0	0	
-	Other. (If line 11g amount exceeds 10% of line 25, column				
(,	A), amount, list line 11g expenses on Schedule O.) .	1,144,305	1,076,314	67,991	
12 /	Advertising and promotion	73,832	71,354	2,478	
	Office expenses	0	0	0	
14	nformation technology	4,981	2,497	2,484	
15 F	Royalties	0	0	0	
16 (Occupancy	626,398	507,952	118,446	
	Fravel	13,486	4,299	9,187	
	Payments of travel or entertainment expenses				
	or any federal, state, or local public officials	0	0	0	
	Conferences, conventions, and meetings .	7,992	6,705	1,287	
	nterest	25,620	25,620	0	
	Payments to affiliates	0	0	0	
	Depreciation, depletion, and amortization .	1,262,943	1,262,051	892	
23 I	nsurance	856,462	736,786	119,676	
24 (Other expenses. Itemize expenses not covered				
	above. (List miscellaneous expenses on line 24e. If				
	ine 24e amount exceeds 10% of line 25, column				
(.	A), amount, list line 24e expenses on Schedule O.)				
a	Supplies and equipment	855,342	839,758	15,584	
b	Communications	44,098	40,503	3,595	
c	Repairs and maintenance	413,916	408,364	5,552	
d	Dues and subscriptions	82,666	37,475	45,191	
e Ā	All other expenses	11,350	6,313	5,037	
25 1	Total functional expenses. Add lines 1 through 24e	15,409,147	13,847,646	1,561,501	
26	Joint costs. Complete this line only if the				
(4	organization reported in column (B) joint costs				
	rom a combined educational campaign and undraising solicitation. Check here if				
2	following SOP 98-2 (ASC 958-720)				

Form 990 (2023)

	n 990 (2	•			Page 11
Ρ	art X		Dort V		
		Check if Schedule O contains a response or note to any line in this	(A) Beginning of year		∟
	1	Cash-non-interest-bearing	32,706	1	105,698
	2	Savings and temporary cash investments	1,196,590	2	805,835
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	94,604	4	213,027
	5	Loans and other receivables from any current or former officer, directo	r,		·
		trustee, key employee, creator or founder, substantial contributor, or 35%	%		
		controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as define under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)	d	6	
s	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
As	9	Prepaid expenses and deferred charges	396,552	9	418,692
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 31,717,2	94		
	b	Less: accumulated depreciation 10b 23,981,6		10c	7,735,597
	11	Investments-publicly traded securities		11	.,
	12	Investments – other securities. See Part IV, line 11		12	
	13	Investments-program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	3,248,396	15	2,705,714
	16	Total assets. Add lines 1 through 15 (must equal line 33)	13,438,729	16	11,984,563
	17	Accounts payable and accrued expenses	1,212,114	17	1,154,801
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities	1,155,106	20	1,023,759
	21	Escrow or custodial account liability. Complete Part IV of Schedule D .		21	
Liabilities	22	Loans and other payables to any current or former officer, directo trustee, key employee, creator or founder, substantial contributor, or 359			
abi		controlled entity or family member of any of these persons		22	
	23	Secured mortgages and notes payable to unrelated third parties	0	23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related thir			
		parties, and other liabilities not included on lines 17-24). Complete Part	X		
			3,510,570	25	2,957,162
	26	Total liabilities. Add lines 17 through 25	5,877,790	26	5,135,722
nces		Organizations that follow FASB ASC 958, check here v and complete lines 27, 28, 32, and 33.			
alaı	27	Net assets without donor restrictions	7,560,939	27	6,848,841
Ä	28	Net assets with donor restrictions	0	28	0
Fund Balances		Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.			
o	29	Capital stock or trust principal, or current funds		29	
ets	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
ss	31	Retained earnings, endowment, accumulated income, or other funds		31	
Net Assets or	32	Total net assets or fund balances	7,560,939	32	6,848,841
ž	33	Total liabilities and net assets/fund balances	13,438,729	33	11,984,563

Form **990** (2023)

	90 (2023)			P	age 1
Par	XI Reconciliation of Net Assets				-
-	Check if Schedule O contains a response or note to any line in this Part XI	1	<u>· · ·</u>		
1 2	Total revenue (must equal Part VIII, column (A), line 12)	2		14,69	
	Total expenses (must equal Part IX, column (A), line 25)	2 3		15,40	
3 4	Revenue less expenses. Subtract line 2 from line 1	3 4			12,09
4 5	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) Net unrealized gains (losses) on investments	4 5		7,50	60,93
5 6	Donated services and use of facilities	6			
7		7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line	3			
	32, column (B))	10		6.8	48,84
Parl	XII Financial Statements and Reporting	10		0,0-	10,0-
i ai i	Check if Schedule O contains a response or note to any line in this Part XII				. Г
					No
1	Accounting method used to prepare the Form 990: Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," ex Schedule O.	plain	on		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were con reviewed on a separate basis, consolidated basis, or both.				~
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		. 2b	~	
	If "Yes," check a box below to indicate whether the financial statements for the year were audi separate basis, consolidated basis, or both.	ted or	۱a		
	Separate basis 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 over				
	the audit, review, or compilation of its financial statements and selection of an independent accounta	ant?	· 2c	~	
	If the organization changed either its oversight process or selection process during the tax year, ex Schedule O.	kplain	on		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set for	rth in 1			~
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?	• •	· 3a		

Form **990** (2023)

SCHEDULE A (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. Attach to Form 990 or Form 990-EZ.

Allach to Form 990 of Form 990-E

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

OMB No. 1545-0047
2023

Open to	Public
Inspec	tion

Name of the organization

Department of the Treasury Internal Revenue Service

Employer identification number

34TH STREET PARTNERSHIP INC	13-3629973
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Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
- 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).)
- 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
- 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state:
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 9 An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:
- 10 An organization that normally receives (1) more than 33¹/₃% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33¹/₃% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)
- 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - **a Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B.
 - **b** Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C.
 - c Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E.
 - d Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V.
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations . . .
 - g Provide the following information about the supported organization(s)

g i rondo dio rono milg internado	about the cupp	i ser toa organization(o).																												
(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	(iv) Is the organization listed in your governing document?		listed in your governing		listed in your governing		listed in your governing		listed in your governing		listed in your governing		listed in your governing		listed in your governing		listed in your governing		listed in your governing		listed in your governing		listed in your governing		listed in your governing		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No																										
(A)																														
(B)																														
(C)																														
(D)																														
(E)																														
Total																														

Part IISupport 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.)

Secti	on A. Public Support			<i>/</i>	•	,	
Calen	dar 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.")	249,388	19,439	174,982	234,898	362,025	1,040,732
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	13,000,000	13,000,000	13,000,000	13,000,000	13,000,000	65,000,000
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	13,249,388	13,019,439	13,174,982	13,234,898	13,362,025	66,040,732
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						66,040,732
	on B. Total Support		(1) ·		(1)		(a - 1
	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7	Amounts from line 4	13,249,388	13,019,439	13,174,982	13,234,898	13,362,025	66,040,732
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	28,889	1,613	720	113,475	169,460	314,157
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.)						
11	Total support. Add lines 7 through 10						66,354,889
12	Gross receipts from related activities, etc					12	5,637,200
13 Secti	First 5 years. If the Form 990 is for the organization, check this box and stop he on C. Computation of Public Support	re					
14	Public support percentage for 2023 (line	Ÿ		1, column (f))		14	99.53 %
15	Public support percentage from 2022 Sch					15	99.72 %
16a	331/3% support test-2023. If the organ						
b							
17a							
b							
18	Private foundation. If the organization	did not check	a box on line	13, 16a, 16b,	17a, or 17b,	check this bo	x and see
	instructions						· · · 🗌
						Schedule A	(Form 990) 2023

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.)

Secti	on A. Public Support						
Calen	dar 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 performed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons .						
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
	line 6.)						
Secti	on B. Total Support			-			
Calen	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(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						
	,						
	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						
10	(Explain in Part VI.)						_
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	and 12.)	organization	 	third fourth	or fifth toy yo	or 00 0 000	1
14	organization, check this box and stop he	-			•		
Socti	on C. Computation of Public Suppor						· · · · _
15	Public support percentage for 2023 (line 8	-		12 column (f))		15	%
16	Public support percentage for 2023 (inter Public support percentage from 2022 Sch					16	%
	on D. Computation of Investment In						70
17			-	ov line 13 colu	imn (f))	17	%
18	Investment income percentage for 2023 (line 10c, column (f), divided by line 13, column (f))17Investment income percentage from 2022 Schedule A, Part III, line 1718						
19a	33 ¹ / ₃ % support tests – 2023. If the organ						
194	17 is not more than $33^{1/3}$ %, check this box						
b	33 ¹ / ₃ % support tests – 2022. If the organiz	-	-	-		-	
~	line 18 is not more than 33 ¹ / ₃ %, check this						
20	Private foundation. If the organization di	-	-				
	· ····ato roundation: in the organization di	a not oneon a		, 100, 01 100,			

Schedule A (Form 990) 2023

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.)

Yes No

1

2

3a

3b

3c

4a

4b

4c

5a

5b 5c

6

7

8

9a

9b

9c

10a

Section B. Type I Supporting Organizations

- 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, supervised, or controlled the supporting organization.

Section C. Type II Supporting Organizations

1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).

Section D. All Type III Supporting Organizations

Yes No 1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? 1 2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s), or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). 2 3 By reason of the relationship described 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 supported organizations played in this regard.

Section E. Type III Functionally Integrated Supporting Organizations

- Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). 1
- а The organization satisfied the Activities Test. Complete **line 2** below.
- The organization is the parent of each of its supported organizations. *Complete line 3 below.* b
- С The organization supported a governmental entity. Describe in **Part VI** how you supported a governmental entity (see instructions).
- 2 Activities Test. Answer lines 2a and 2b below.
- Did substantially all of the organization's activities during the tax year directly further the exempt purposes of а 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.
- 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.
- Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each b of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

Yes No

1

2

1

3

2a

2b

3a

3b

Yes No

Yes No

Part	V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	jani	zations		
1	Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organ			ions 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 here if the current year is the organization's first as a non-function	allv i	ntegrated Type III suppo	rting organization	

Schedule A (Form 990) 2023

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

Schedu	le A (Form 990) 2023			Page 7
Part	V Type III Non-Functionally Integrated 509(a)(3	B) Supporting Organi	zations (continued)	
Sect	on D-Distributions			Current Year
1	Amounts paid to supported organizations to accomplish e		1	
2	Amounts paid to perform activity that directly furthers exe	empt purposes of suppo	orted	
	organizations, in excess of income from activity		2	
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	inizations 3	
4	Amounts paid to acquire exempt-use assets		4	
5	Qualified set-aside amounts (prior IRS approval required-	•	<i>VI</i>) 5	
6	Other distributions (describe in Part VI). See instructions.		6	
7	Total annual distributions. Add lines 1 through 6.		7	
8	Distributions to attentive supported organizations to whic (provide details in Part VI). See instructions.	h the organization is res	ponsive	
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	(iii) Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2023 (reasonable cause required — <i>explain in Part VI</i>). See instructions.			
3	Excess distributions carryover, if any, to 2023			
а	From 2018			
b	From 2019			
С	From 2020			
d	From 2021			
e	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			
C	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, <i>explain in Part VI</i> . See instructions.			
6	Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . 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			
e	Excess from 2023			

Schedule A (Form 990) 2023

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.)

SCHEDUL	E D.
(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information. 2023 Open to Public

OMB No. 1545-0047

lr	nspection	

Name o	f the organization		Employer identification number
	STREET PARTNERSHIP INC		13-3629973
Par	t I Organizations Maintaining Donor Advi		s or Accounts
	Complete if the organization answered "	Yes" on Form 990, Part IV, line 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year) .		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor	advisors in writing that the assets hel	ld in donor advised
	funds are the organization's property, subject to the	5	
6	Did the organization inform all grantees, donors, ar	nd donor advisors in writing that grant	
	only for charitable purposes and not for the benefi		
Par			
Га	Complete if the organization answered "	Ves" on Form 990 Part IV line 7	
-			
1	Purpose(s) of conservation easements held by the o		
	Preservation of land for public use (for example, recre		f a historically important land area
	Protection of natural habitat		f a certified historic structure
•	Preservation of open space		in the former of a concernation
2	Complete lines 2a through 2d if the organization he	id a qualified conservation contribution	
	easement on the last day of the tax year.		Held at the End of the Tax Year
а			. 2a
b	Total acreage restricted by conservation easements	3	. 2b
С	Number of conservation easements on a certified h		
d	Number of conservation easements included on line		
	on a historic structure listed in the National Register	r	· 2d
3	Number of conservation easements modified, trans	sferred, released, extinguished, or term	ninated by the organization during the
	tax year		
4	Number of states where property subject to conserv	vation easement is located	
5	Does the organization have a written policy reg		
	violations, and enforcement of the conservation eas	sements it holds?	· · · · · · 🗌 Yes 🗌 No
6	Staff and volunteer hours devoted to monitoring, inspec	ting, handling of violations, and enforcing	conservation easements during the yea
7	Amount of expenses incurred in monitoring, inspectin	g, handling of violations, and enforcing c	conservation easements during the yea
			G ,
8	Does each conservation easement reported on line	2d above satisfy the requirements of s	ection 170(h)(4)(B)(i)
	and eachier $170(h)(4)(D)(ii)0$		
9	In Part XIII, describe how the organization reports c	onservation easements in its revenue a	
	sheet, and include, if applicable, the text of the foot		
	organization's accounting for conservation easement	5	
Par	III Organizations Maintaining Collections	of Art Historical Treasures or (Other Similar Assets
T all	Complete if the organization answered "	· · ·	
10			a statement and balance sheet work
1a	of art, historical treasures, or other similar assets	•	
	service, provide in Part XIII the text of the footnote t		
	-		
b	If the organization elected, as permitted under FAS		
	art, historical treasures, or other similar assets held		
	provide the following amounts relating to these item	15.	
	(i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X		\$
	(ii) Assets included in Form 990, Part X		\$
2	If the organization received or held works of art,	nistorical treasures, or other similar a	assets for financial gain, provide the
	following amounts required to be reported under FA	ASB ASC 958 relating to these items.	
а	Revenue included on Form 990, Part VIII, line 1 . Assets included in Form 990, Part X		\$
	Assets included in Form 990. Part X		\$

Schedu	le D (Form 990) 2023									Page 2
Part	Organizations Maintaining	Coll	ections of	Art, His	torical 7	Freasures	, or Ot	her Similar A	ssets (co	ontinued)
3	Using the organization's acquisition, collection items (check all that apply).		ssion, and of	ther reco	rds, chec	k any of th	e follov	ving that make	significan	t use of its
а	Public exhibition			d	🗌 Loan	or exchang	e progi	am		
b	Scholarly research			е		-				
с	Preservation for future generations	6								
4	Provide a description of the organiza XIII.	tion's	collections	and expl	ain how t	hey further	the org	panization's exe	mpt purp	ose in Part
5	During the year, did the organization assets to be sold to raise funds rather									es 🗌 No
Part	IV Escrow and Custodial Arra	ange	ments							
	Complete if the organizatior 990, Part X, line 21.	n ansv	wered "Yes	" on For	m 990, I	Part IV, line	e 9, or	reported an a	mount o	n Form
1a	Is the organization an agent, trustee included on Form 990, Part X?				-				_	es 🗌 No
b	If "Yes," explain the arrangement in P	art XI	II and compl	ete the fo	llowing t	able.				
								/	Amount	
С	Beginning balance						10	;		
d	Additions during the year						10			
е	Distributions during the year						16	•		
f	Ending balance						1f			
2a	Did the organization include an amou	nt on	Form 990, P	art X, line	e 21, for e	escrow or cu	ustodia	l account liabilit	y? 🗌 Y	es 🗌 No
	If "Yes," explain the arrangement in P	art XI	II. Check her	re if the e	xplanatio	n has been	provid	ed in Part XIII		
Par	t V Endowment Funds									
	Complete if the organization	n ans	wered "Yes	<u>" on For</u>	m 990, l	Part IV, line	e 10.			
		(a)	Current year	(b) Pri	or year	(c) Two year	s back	(d) Three years bac	ck (e) Fou	r years back
1a	Beginning of year balance									
b	Contributions									
С	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities and programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of	the cu	irrent year er	nd baland	e (line 1c	, column (a)) held	as:	I	
а	Board designated or quasi-endowme		-	%		<i>,,</i> (,,			
b	Permanent endowment	%								
с	Term endowment %									
	The percentages on lines 2a, 2b, and	2c sh	ould equal 1	00%.						
3a	Are there endowment funds not in th	e pos	session of th	ne organi	zation the	at are held	and ad	ministered for t	he	
	organization by:									Yes No
	(i) Unrelated organizations?								3a(i)	
	(ii) Related organizations?								3a(ii)	
b	If "Yes" on line 3a(ii), are the related of	rgani	zations listed	as requi	red on So	chedule R?			3b	
4	Describe in Part XIII the intended use	s of th	ne organizatio	on's end	owment f	unds.				
Part	VI Land, Buildings, and Equip	omen	nt							
	Complete if the organization			" on For	m 990, I	Part IV, line	e 11a.	See Form 990	, Part X,	line 10.
	Description of property		(a) Cost or o (investm	ther basis	(b) Cost of	or other basis ther)	(c)	Accumulated epreciation		ok value
1a	Land			0		0				0
b	Buildings			0		0		0		0
c	Leasehold improvements			0		419,762		419,762		0
d	Equipment			0		266,968		152,289		114,679
e	Other			0		31,030,564		23,409,646		7,620,918
-	Add lines 1a through 1e. (Column (d) r	nust e	equal Form 9	•			3)) .			7,735,597
	5 1 17	-			-	1				1 1 1 1 - 1 - 1 - 1

Schedule D	(Form	990	2023
Concure D		550	LOLO

Investments-Other Securities Part VII 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 (b) Book value (c) Method of valuation: (including name of security) Cost or end-of-year market value (1) Financial derivatives . (2) Closely held equity interests (3) Other (A) (B) (C) (D) (E) (F) (G) (H) Total. (Column (b) must equal Form 990, Part X, line 12, col. (B)) Investments – Program Related Part VIII Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13. (a) Description of investment (b) Book value (c) Method of valuation: Cost or end-of-year market value (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, line 13, col. (B)) **Other Assets** Part IX 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) Operating lease right of use assets 2,705,714 (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, line 15, col. (B)) 2,705,714 **Other Liabilities** Part X 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 0 **Operating lease liabilities** 2,957,162 (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, line 25, col. (B)) 2,957,162 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

Schedu	le D (Form 990) 2023			Page 4
Par			r Return	
	Complete if the organization answered "Yes" on Form 990,			
1	Total revenue, gains, and other support per audited financial statements		1	14,697,049
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains (losses) on investments	2a	0	
b	Donated services and use of facilities	2b	0	
С	Recoveries of prior year grants	2c	0	
d	Other (Describe in Part XIII.)		0	
е	Add lines 2a through 2d		2e	0
3	Subtract line 2e from line 1		3	14,697,049
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	0	
b	Other (Describe in Part XIII.)		0	
_c	Add lines 4a and 4b		4c	0
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line	-		14,697,049
Part			per Retur	า
	Complete if the organization answered "Yes" on Form 990,			
1	Total expenses and losses per audited financial statements		1	15,409,147
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a	0	
b	Prior year adjustments	2b	0	
C	Other losses	2c	0	
d	Other (Describe in Part XIII.)		0	
e	Add lines 2a through 2d		2e 3	0
3 ⊿	Subtract line 2e from line 1		3	15,409,147
4	Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b	40		
a b	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.)	4a 4b	0	
c D	Add lines 4a and 4b	40	4c	0
5	Total expenses. Add lines 3 and 4c . (<i>This must equal Form 990, Part I, lin</i>	 .e 18)		15,409,147
Part		0 10.9 1 1 1 1 1 1 1	5	15,407,147
2; Par	t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part			

						1545-0	047
(Form	990)	For certain Officers, Dire	ectors, Trustees, Key Employees, and Hi	ghest	20	23	2
			ompensated Employees on answered "Yes" on Form 990, Part IV,	line 23.			
	ent of the Treasury		Attach to Form 990. 990 for instructions and the latest inform		Open to Inspe		
	Revenue Service of the organization			Employer identification			
34TH	STREET PARTN	ERSHIP INC		13-3	629973		
Part		ns Regarding Compensation					
						Yes	No
1 a			rovided any of the following to or for a provide any relevant information regardir		orm		
	First-class	or charter travel	Housing allowance or residence	•			
	Travel for c		Payments for business use of pe				
		ification and gross-up payments	Health or social club dues or initia				
	Discretiona	ry spending account	Personal services (such as maid,	chauffeur, chef)			
b	or reimbursen		the organization follow a written polic penses described above? If "No,"		to		
					· 1b		
2			or to reimbursing or allowing expendence O/Executive Director, regarding the it				
	1a?				· 2		
-							
3			ation used to establish the compensati hat apply. Do not check any boxes for				
	related organiz	ration to establish compensation of	the CEO/Executive Director, but expla	in in Part III.	a		
		ion committee	Vritten employment contract				
	•	nt compensation consultant	Compensation survey or study				
		f other organizations	Approval by the board or compe	nsation committee			
		5	,				
4		r, did any person listed on Form 990 r a related organization:), Part VII, Section A, line 1a, with resp	ect to the filing			
а			ol payment?				~
b			ental nonqualified retirement plan? .				~
С			ased compensation arrangement? .		. 4c		~
	If "Yes" to any	of lines 4a–c, list the persons and p	provide the applicable amounts for eac	h item in Part III.			
	Only section	501(c)(3) $501(c)(4)$ and $501(c)(29)$	organizations must complete lines 5	_0			
5	For persons I		tion A, line 1a, did the organization		any		
а	The organizati	on?			. 5a		~
b	-						~
	If "Yes" on line	5a or 5b, describe in Part III.					
6		isted on Form 990, Part VII, Sec contingent on the net earnings of:	tion A, line 1a, did the organizatior	pay or accrue a	any		
а	-				. 6a		~
b	-						~
		6a or 6b, describe in Part III.					
7			on A, line 1a, did the organization <code>; " describe in Part III......</code>				~
8			, paid or accrued pursuant to a contra				
			Regulations section 53.4958-4(a)(3)				
	in Part III				· 8		~
9	lf "Ves" on li	as 8 did the organization also fo	llow the rebuttable presumption pro	codura docoribod	Lin		
J							

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.

		(B) Breakdown of W-2 ar			(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)–(D)	in column (B) reported as deferred on prior Form 990
Daniel A Biederman, President	(i)	433,118	0	0	4,950	18,010	456,078	0
1	(ii)	604,608	0	0	4,950	18,010	627,568	0
Peter Ciriello, Controller & CFO	(i)	155,681	0	0	4,702	627	161,010	0
2	(ii)	156,721	0	0	4,702	627	162,050	0
Dan Pisark, VP Retail Services	(i)	181,785	0	0	5,703	7,124	194,612	0
3	(ii)	99,528	0	0	3,071	3,836	106,435	0
Marc Boddewyn, VP Capital	(i)	120,993	0	0	3,670	0	124,663	0
Projects	(ii)	124,033	0	0	3,671	0	127,704	0
Kaitlin Solomon, VP Operations	(i)	78,198	0	0	1,591	0	79,789	0
5	(ii)	117,297	0	0	2,388	0	119,685	0
Eric Mueller, Director Graphic	(i)	15,093	0	0	472	2,724	18,289	0
6 Design	(ii)	138,816	0	0	4,463	23,710	166,989	0
Inessa Kanevskaya, Deputy _ Controller	(i)	79,241	0	0	2,539	5,480	87,260	0
1	(ii)	81,494	0	0	2,539	5,480	89,513	0
Quentin Robbins, VP Visitor	(i)	51,691	0	0	1,744	15,222	68,657	0
Services	(ii)	76,813	0	0	2,795	22,833	102,441	0
John Zeitoun, Director of	(i)	38,488	0	0	1,204	3,524	43,216	0
9 Partnerships	(ii)	96,668	0	0	3,016	8,223	107,907	0
Dan Fishman, Director of Events	(i)	26,551	0	0	810	5,635	32,996	0
10	(ii)	108,610	0	0	3,441	22,540	134,591	0
Rachel Zurier, Director of	(i)	32,890	0	0	1,023	0	33,913	0
Operations 11	(ii)	104,538	0	0	3,262	0	107,800	0
Brian McGinn, VP Security	(i)	32,949	0	0	419	0	33,368	0
12	(ii)	16,974	0	0	216	0	17,190	0
Kevin Ward, Former VP Security	(i)	83,625	0	0	2,559	0	86,184	0
13	(ii)	43,079	0	0	1,318	0	44,397	0
Vincent Degennaro, Chief of	(i)	113,681	0	0	3,611	0	117,292	0
Sanitation	(ii)	0	0	0	0	0	0	0
	(i)							
15	(ii)							
	(i)							
16	(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.

SCHEDULE K (Form 990)

Supplemental Information on Tax-Exempt Bonds

Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI. Attach to Form 990.

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

Department of the Treasury

34TH STREET PARTNERSHIP INC

Employer identification number

13-3629973

Par	t I Bond Issues													
	(a) Issuer name (b) Is	ssuer EIN	(c) CUSIP #	(d) Date issu	ued	(e) Issue price		(f) Descript	ion of purpose	(g) De	efeased	(h) On behalf o issuer	of Ťína	Poole ancir
	34th Street Partnership Inc 13-3	3629973		06/30/202	21	1,345,0			of 1/1/2031 matur	ty Yes	s No	Yes N	o Yes	s N
Α							of Se	ies 2011 bon	ds		~	~		v
В														
С														\perp
D														
Par	t II Proceeds					•				,				
4	Amount of bonds retired					A		В	С			D		
2	Amount of bonds legally defeased					200,000								
3	Total proceeds of issue					1,345,000					i			
4	Gross proceeds in reserve funds			•••		1,345,000								
5	Capitalized interest from proceeds					0					í			
6	Proceeds in refunding escrows					1,294,347							-	
7	Issuance costs from proceeds					47,667								
8	Credit enhancement from proceeds					0								
9	Working capital expenditures from proceeds					0								
10	Capital expenditures from proceeds					0								
11	Other spent proceeds					2,986								
12	Other unspent proceeds					0								
13	Year of substantial completion										L			
					'es	No	Yes	No	Yes	No	Y	'es	No	0
14	Were the bonds issued as part of a refunding issu			· ·										
	if issued prior to 2018, a current refunding issue)?				~						<u> </u>			
15	Were the bonds issued as part of a refunding iss										i			
	issued prior to 2018, an advance refunding issue)?					~								
16	Has the final allocation of proceeds been made? .				~	_					<u> </u>			
17	Does the organization maintain adequate books a										l			
	final allocation of proceeds?			.	~						i			

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

Schedule K (Form 990) 2023



Internal Revenue Service Name of the organization Schedule K (Form 990) 2023

Part	III Private Business Use								
			Ą		В		ç		D
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?	Yes	No	Yes	No	Yes	No	Yes	No
2	Are there any lease arrangements that may result in private business use of bond-financed property?								
3a	Are there any management or service contracts that may result in private business use of bond-financed property?								
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
С	Are there any research agreements that may result in private business use of bond-financed property?								
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government		%		%		%		9
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government		%		%		%		9
6	Total of lines 4 and 5		<u> </u>		%		%		9
7	Does the bond issue meet the private security or payment test?		/0		/0				
8a									
	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of		%		%		%		9
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?								
9	Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?								
Part	IV Arbitrage				-				•
			A		В		C		D
1	Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?	Yes	No V	Yes	No	Yes	No	Yes	No
2	If "No" to line 1, did the following apply?								
а			v						
b		~							
С	No rebate due?		 ✓ 						
	If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed						'		1
	Is the bond issue a variable rate issue?		-						

Page **2**

Schedule K (Form 990) 2023

Schedule K (Form 990) 2023

		ŀ	4	E	3	()	C)
a Has the organization or the governmental issue		Yes	No	Yes	No	Yes	No	Yes	N
hedge with respect to the bond issue?			~						
Name of provider									
Term of hedge									
Was the hedge superintegrated?									
Was the hedge terminated?									
Were gross proceeds invested in a guaranteed inve	estment contract (GIC)? .		~						
Name of provider									
: Term of GIC									
Was the regulatory safe harbor for establishing the fair mar									
Were any gross proceeds invested beyond an avai	ilable temporary period? .		~						
Has the organization established written pro									
requirements of section 148?			~						
t V Procedures To Undertake Corrective A	Action			1		1			
		A	4	E	3	()	C)
Has the organization established written procedure	es to ensure that violations	Yes	No	Yes	No	Yes	No	Yes	N
of federal tax requirements are timely identified a									
of lederal tax requirements are timely identified a	and corrected through the								
voluntary closing agreement program if self-remed applicable regulations?	diation isn't available under	✓ onses to o	questions	on Schedu	le K. See i	nstructions			
voluntary closing agreement program if self-remed applicable regulations?	diation isn't available under		questions	on Schedu	le K. See i	nstructions			
voluntary closing agreement program if self-remed applicable regulations?	diation isn't available under		questions	on Schedu	le K. See i	nstructions			
voluntary closing agreement program if self-remed applicable regulations?	diation isn't available under		questions	on Schedu	le K. See i	nstructions			
voluntary closing agreement program if self-remed applicable regulations?	diation isn't available under		questions	on Schedu	le K. See i	nstructions			
voluntary closing agreement program if self-remed applicable regulations?	diation isn't available under		questions	on Schedu	le K. See i	nstructions			
voluntary closing agreement program if self-remed applicable regulations?	diation isn't available under		questions	on Schedu	le K. See i	nstructions			
voluntary closing agreement program if self-remed applicable regulations?	diation isn't available under		questions	on Schedu	le K. See i	nstructions	·.		
voluntary closing agreement program if self-remed applicable regulations?	diation isn't available under		questions	on Schedu	le K. See i	nstructions	·		
voluntary closing agreement program if self-remed applicable regulations?	diation isn't available under		questions	on Schedu	le K. See i	nstructions	·		
voluntary closing agreement program if self-remed applicable regulations?	diation isn't available under		questions	on Schedu	le K. See i	nstructions	· · · · · · · · · · · · · · · · · · ·		
voluntary closing agreement program if self-remed applicable regulations?	diation isn't available under		questions	on Schedu	le K. See i	nstructions	· · · · · · · · · · · · · · · · · · ·		
voluntary closing agreement program if self-remed applicable regulations?	diation isn't available under		questions	on Schedu	le K. See i	nstructions			
voluntary closing agreement program if self-remed applicable regulations?	diation isn't available under		questions	on Schedu	le K. See i	nstructions			
voluntary closing agreement program if self-remed applicable regulations?	diation isn't available under		questions	on Schedu	le K. See i				
voluntary closing agreement program if self-remed applicable regulations?	diation isn't available under		questions	on Schedu	le K. See i				
voluntary closing agreement program if self-remed applicable regulations?	diation isn't available under		questions	on Schedu	le K. See i				

Page **3**

SCHEDULE O (Form 990)

Supplemental Information to Form 990 or 990-EZ

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

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



Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

34TH STREET PARTNERSHIP INC	13-3629973
Form 990, Part VI, Section A, Line 6 - The corporation has five classes of membership: Class A members	are owners of record of real
property within the 34th Street Business Improvement District; Class B members are tenants who are occ	
commercial space within the district; Class C members are occupants of dwelling units; Class D member	
City of New York, the Comptroller of The City of New York, the Speaker of the Council of The City of New	York, and the Manhattan Borough
President, or each of their designees; Class E members are interested persons, not eligible for Class A, E	, C or D membership.
Form 990, Part VI, Section A, Line 7a - Membership classes A (owners), B (tenants) and C (residents) are of	ligible to elect directors of the
corporation. Class D members (City officials) are directors of the corporation. Class E members are non-	oting. There are no membership
fees or dues.	
Form 990, Part VI, Section B, Line 11b - Form 990 is prepared by the corporation's chief financial officer, r	eviewed by other members of
senior management and approved by the president. Prior to filing, a draft copy of the form is provided to	
instructed to review the form and address any questions to the chief financial officer for consideration of	
Directors are further instructed to address any concerns about the form to the president or, if appropriate	e, to the chairman of the audit
committee.	
Form 990, Part VI, Section B, Line 12c - Officers, directors and key employees of 34th Street Partnership,	Inc. at least annually receive a
copy of the corporation's conflict of interest policy. They are asked to acknowledge, in writing, that they have a sked to acknowledge and the	
agree to abide by it, and that they have disclosed any interest which could create a conflict, as defined by	the policy.
Form 990, Part VI, Section B, Line 15 - The terms, including compensation, of the employment contract of	the corporation's president are
negotiated by the executive committee of the board of directors. The executive committee considers the	
executives of other large and influential, New York City area, real estate and not-for-profit organizations, i	
improvement districts and park conservancies, in establishing compensation. The compensation of other	officers and key employees is
determined by the precident and is reviewed and approved by the heard of directors along with managem	and the second of the second second
determined by the president and is reviewed and approved by the board of directors along with managem	ient's annual budget.
determined by the president and is reviewed and approved by the board of directors along with managen	ient's annual budget.
Form 990, Part VI, Section C, Line 19 - 34th Street Partnership, Inc. posts its most recently completed aud	ited financial statements and
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Schedule O, Statement 1

Form: Form 990 (2023)

Page: 1

Activity Or Mission Description

34TH STREET PARTNERSHIP INC

EIN: 13-3629973

Part I, Line 1

Description

improvements, including sanitation, security, horticulture, visitor information, programming and management of public parks and pedestrian plazas, as well as the designing, constructing and maintaining streetscape and park improvements.

Schedule	O, Statement 2	34TH STREET PARTNERSHIP INC					
Form: For	m 990 (2023)		EIN	13-3629973			
Page: 2			Pa	rt III, Line 4d			
	Other Program Services Accomplishments						
Activity Code	Description	Expense	Grants	Revenue			
	Other program services include the programming and management of public spaces - Herald and Greeley Square Parks and the adjacent Broadway and West 33rd Street pedestrian plazas - seasonal horticultural displays in district tree pits, planters, elevated baskets and park planting beds, manned visitor service and tourist information carts, retail services and promotion of the district, its programs and businesses.	3,370,663		884,109			
Total:		3,370,663	0	884,109			

SCHEDULE R (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.

Department of the Treasury Internal Revenue Service

Name of the organization

34TH STREET PARTNERSHIP INC

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(Section cont en	g) 512(b)(13) trolled tity?
						Yes	No
(1) See Schedule R, Part VII, Statement 1							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							



13-3629973

Schedule R (Form 990) 2023

Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, Part III because it had one or more related organizations treated as a partnership during the tax year. (k) (a) (b) (d) (f) (g) (h) (i) (i) (c) (e) Predominant Direct controlling Name, address, and EIN of Primary activity Legal Share of total Share of end-of-Disproportionate Code V-UBI General or Percentage income (related, related organization domicile entity income year assets allocations? amount in box 20 managing ownership unrelated, of Schedule K-1 (state or partner? excluded from foreign (Form 1065) tax under country) Yes No Yes No sections 512-514) (1) (2) (3) (4) (5) (6) (7)

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	(Section 5 contr ent	(i) 512(b)(13) rolled tity?
								Yes	No
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
.(7)									

Schedule R (Form 990) 2023

(6)

Part	V Transactions With Related Organizations. Complete if the organization answ	ered "Yes" on Form	n 990, Part IV, line 34	4, 35b, or 36.		
Note	: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.				Yes	No
1	During the tax year, did the organization engage in any of the following transactions with one					
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity					~
b	Gift, grant, or capital contribution to related organization(s)				-	~
С	Gift, grant, or capital contribution from related organization(s)				-	~
d	Loans or loan guarantees to or for related organization(s)					<u> </u>
е	Loans or loan guarantees by related organization(s)			1 e		~
f	Dividends from related organization(s)			1 f		V
n D	Sale of assets to related organization(s)				_	~
9 h	Purchase of assets from related organization(s)					~
i	Exchange of assets with related organization(s)					v
j	Lease of facilities, equipment, or other assets to related organization(s)					~
-						
k	Lease of facilities, equipment, or other assets from related organization(s)			1k		~
I	Performance of services or membership or fundraising solicitations for related organization(s)					~
m	Performance of services or membership or fundraising solicitations by related organization(s)				-	~
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) . $\ .$				-	
0	Sharing of paid employees with related organization(s)			10	~	
р	Reimbursement paid to related organization(s) for expenses					
q	Reimbursement paid by related organization(s) for expenses				~	
	Other transfer of cash or property to related organization(s)			1 r		~
s I	Other transfer of cash or property for related organization(s)					~
2	If the answer to any of the above is "Yes," see the instructions for information on who must c					-
	(a)	(b)	(c)	(d)		
	Name of related organization	Transaction type (a—s)	Amount involved	Method of determining amo	unt invol	ved
(1)						
(2)						
(3)						
(4)						
(5)						

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) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No	Yes	Yes No	
	-											
	-											
	-											
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	-											

Supplemental Information Part VI Provide additional information for responses to questions on Schedule R. See instructions. Schedule R, Part V, Line 1n - 34th Street Partnership Inc. and Bryant Park Corporation are commonly managed not-for-profit organizations sharing senior managers, department directors and administrative staff. The organizations also share office space and related expenses. The salaries of shared employees are allocated based on time devoted to each entity and are paid by each respective entity, under its own employer ID number. Shared expenses, such as rent, utilities and office expenses are allocated between companies based on percentage of salary and amount of space occupied by the shared employee. Allocated expenses are reconciled and reimbursed to the respective entities on a monthly basis.

Schedule R, Part VII, Statement 1

Form: Schedule R (2023)

34TH STREET PARTNERSHIP INC

EIN: 13-3629973

Part II

Name and EIN	Bryant Park Corporation (13-3009946)					
Address	1065 Avenue of the Americas Suite 2400					
	New York, NY 10018					
Primary activities	Management of Bryant Park in midtown Manhattan					
State or foreign country	NY					
Exempt code section	501(c)(3)					
Public charity status	Line 12a, I					
Direct controlling entity	N/A					
512(b)(13) controlled organization?	No					
Name and EIN	Bryant Park Management Corporation (13-3318053)					
Address	1065 Avenue of the Americas Suite 2400					
	New York, NY 10018					
Primary activities	Business improvement district serving the area around Bryant Park					
	NY					
State or foreign country	NY					
State or foreign country Exempt code section	NY 501(c)(3)					
• •						
Exempt code section	501(c)(3)					