			EXTENDED TO FEBRUARY 15, 2	2019		OMB No. 1545-0047	
r	0		Return of Organization Exempt From	m In	come Tax		
Form	9 5	JU	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code	le (exce	pt private foundations	» 201 /	
Departs	nent of	the Treasury	Do not enter social security numbers on this form as it	may be	made public.	OpeniolPublic	
Internal	Revenu	e Service	► Go to www.irs.gov/Form990 for instructions and the	latest in	nformation.	Inspection	
A Fo	r the	2017 calend	ar year, or tax year beginning APR 1, 2017 and endir		AR 31, 2018		
B Che	eck if licable:	C Name of	forganization	1	D Employer identific	ation number	
		NEW	YORK ROAD RUNNERS INC.				
	Addres: change		FINANCE DEPARTMENT		13_20	49483	
	Name change	Doing b	usiness as				
	Initial return	Number	and street (or P.O. box if mail is not delivered to street address) Room WEST 56TH STREET	m/suite	E Telephone number	58-9656	
	Final return/ termin-	112,777,418.					
	ated City or town, state or province, country, and zin on longin poetal code						
	return Applica		YORK, NY 10019-3800 nd address of principal officer: MICHAEL CAPIRASO		for subordinates?	Yes 🛣 No	
	tion pendin	F Name a	AS C ABOVE		H(b) Are all subordinates ind		
			X 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or	527		ist. (see instructions)	
	<u>ix exe</u>	mpt status: [NYRR.ORG		H(c) Group exemption		
JW	edsit		X Corporation Trust Association Other	L Year o	of formation: 1979 M	State of legal domicile; NY	
Pa		Summary					
		Duioflu dooril	the organization's mission or most significant activities: NEW YOF	RK RO	OAD RUNNERS	(NYRR) IS	
8	•	A NOT-F	OR-PROFIT ORGANIZATION DEDICATED TO	ENHA	NCING THE H	EALTH AND	
Governance	2	Check this bo	ox if the organization discontinued its operations or disposed o	of more	than 25% of its net ass	ets.	
Ver 1			ting members of the governing body (Part VI, line 1a)				
ဗီ	4	Number of in	dependent voting members of the governing body (Part VI, line 1b)			<u>25</u> 920	
Activities &	5	Total number	of individuals employed in calendar year 2017 (Part V, line 2a)			18861	
vitie	6	Total number	of volunteers (estimate if necessary)			312,015.	
G	7 a	Total unrelate	ed business revenue from Part VIII, column (C), line 12			-51,398.	
_◄	b	Net unrelated	business taxable income from Form 990-T, line 34	<u></u>		Current Year	
				-	Prior Year 36,258,442.	44,405,173.	
8			and grants (Part VIII, line 1h)		44,322,852.	46,523,414.	
Revenue	9	Program serv	vice revenue (Part VIII, line 2g)	···	1,087,264.	2,395,149.	
ě	10	Investment ir	come (Part VIII, column (A), lines 3, 4, and 7d)	····	5,641,790.	5,251,648.	
-	11	Other revenu	e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		87,310,348.	98,575,384.	
_	12	Total revenue	e - add lines 8 through 11 (must equal Part VIII, column (A), line 12) imilar amounts paid (Part IX, column (A), lines 1-3)		1,946,325.	1,517,021.	
			I to or for members (Part IX, column (A), lines (-0)		0.	0.	
	14	Benefits paid	er compensation, employee benefits (Part IX, column (A), lines 5-10)		24,533,922.	27,697,972.	
ses	15	Salaries, our	fundraising fees (Part IX, column (A), line 11e)		38,240.	0.	
Expenses			sing expenses (Part IX, column (D), line 25) 889,282	•			
Exp	17	Other expense	ses (Part IX, column (A), lines 11a-11d, 11f-24e)		62,232,541.	66,274,944.	
-	18	Total expens	es. Add lines 13-17 (must equal Part IX, column (A), line 25)		88,751,028.	95,489,937.	
	19		s expenses. Subtract line 18 from line 12		-1,440,680.	3,085,447.	
es -				Be	ginning of Current Year	End of Year	
ets (20	Total assets	(Part X, line 16)		74,816,415.	85,447,854.	
Assets or Balances	21	Total liabilitie	es (Part X, line 26)		41,886,410.	47,704,872.	
Net	22	Net assets o	r fund balances. Subtract line 21 from line 20		32,930,005.	37,742,982.	
Pa	int II	Signatu	re Block			to such that and halisf it is	
Und	er pen	alties of perjury	, I declare that I have examined this return, including accompanying schedules and	d statem	ents, and to the best of my	y knowledge and bellet, it is	
true,	corre	ct, and complet	te. Declaration of preparer (other than officer) is based on all information of which	preparer	nas any knowledge.		
			de tet d		Date	/	
Sig	n		RUNAU CENTOR UD OF FINANCE		2/6/	19	
Her	e		DA FRANKEN, SENIOR VP OF FINANCE		/	<u> </u>	
				A	Date Check	PTIN	
n-1			T M. HIGGINS	Т I,	1/28/2019 if self-empto	yed P00543209	
Paic		Firm's name	THE OLGONOR DEVITING IT D		Firm's EIN	27-1728945	
	oarer Only	Firm's name					
088	omy	Finit S auure	NEW YORK, NY 10022		Phone no. 21	.2-286-2600	
Mer	/ tha	BS discuss H	his return with the preparer shown above? (see instructions)			X Yes No	
IVIA			For Paperwork Reduction Act Notice, see the separate instructions.			Form 990 (2017)	

732001 11-28-17 LHA For Paperwork Reduction Act Notice, see the separate instructions. SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

	NEW YORK ROAD RUNNERS INC. 1990 (2017) C/O FINANCE DEPARTMENT 13-2949483 Page
	rt III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
-	BY FOSTERING A LIFE-LONG COMMITMENT TO RUNNING & FITNESS, NEW YORK
	ROAD RUNNERS (NYRR) WORKS TO ENHANCE THE LIVES OF PEOPLE OF ALL AGES
	AND ABILITIES THROUGH POSITIVE PHYSICAL ACTIVITY AND COMMUNITY
	ENGAGEMENT.
2	Did the organization undertake any significant program services during the year which were not listed on the
-	prior Form 990 or 990-EZ?
	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?
0	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
-	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$43,302,934. including grants of \$65,000.) (Revenue \$29,643,243.
	MARATHON:
	MARATION.
	IN FISCAL YEAR 2018, NEW YORK ROAD RUNNERS (NYRR) HELD THE 47TH RUNNING
	OF THE NEW YORK CITY MARATHON, WHICH WAS AGAIN THE LARGEST MARATHON IN
	THE WORLD. APPROXIMATELY 140,000 PEOPLE FROM OVER 139 COUNTRIES APPLIED
	TO PARTICIPATE WITH AROUND 50,000 PEOPLE FINISHING THE RACE. THE
	MARATHON WAS HELD ON NOVEMBER 5, 2017.
46	(Code:) (Expenses \$27,784,027. including grants of \$239,559.) (Revenue \$15,280,122.
4b	(Code:) (Expenses \$/ 1/84,027. including grants of \$239,559.) (Revenue \$15,280,122. OTHER COMMUNITY EVENTS:
	IN FISCAL YEAR 2018, 300,000 ADULTS AND YOUTH PARTICIPATED IN
	APPROXIMATELY 70 NEW YORK ROAD RUNNERS (NYRR) EVENTS, INCLUDING A WIDE
	VARIETY OF RACES OF VARYING DISTANCES FOR ADULT AND YOUTH RUNNERS
	THROUGHOUT THE FIVE BOROUGHS OF NEW YORK CITY. EVENTS INCLUDED THE NYRR
	FIVE BOROUGH SERIES (NYC HALF, BRONX 10-MILE, STATEN ISLAND HALF,
	QUEENS 10K AND BROOKLYN HALF), AS WELL AS WEEKLY AND NYRR HERITAGE
	RACES.
4c	(Code:) (Expenses \$10,454,227. including grants of \$1,212,462.) (Revenue \$316,422.
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4d	YOUTH & COMMUNITY PROGRAM SERVICES: THE NYRR YOUTH AND COMMUNITY SERVICES DIVISION PROVIDED FREE RUNNING PROGRAMS, EVENTS AND INITIATIVES TO 242,000 STUDENTS FOSTERING PHYSICAL FITNESS, CHARACTER DEVELOPMENT, AND PERSONAL ACHIEVEMENT. FEATURING THE RISING NEW YORK ROAD RUNNERS AND RUN FOR THE FUTURE PROGRAM, NYRR'S YOUTH RUNNING EFFORTS SERVED CHILDREN IN HUNDREDS OF UNDERSERVED SCHOOLS AND COMMUNITY CENTERS THROUGHOUT NEW YORK CITY AND THE NATION. NYRR COMMUNITY SERVICES ALSO PROVIDED CRITICAL HEALTH AND WELLNESS PROGRAMS TO SENIORS IN ALL FIVE BOROUGHS OF NEW YORK CITY. Other program services (Describe in Schedule O.) (Expenses 1,016,260. including grants of \$) (Revenue \$ 1,283,627.)

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	990 (2017) C/O FINANCE DEPARTMENT 13-2949	483	Р	age 3
Pa	t IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
-	public office? If "Yes," complete Schedule C, Part I	3		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
•	during the tax year? If "Yes," complete Schedule C, Part II	4	х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	–		
5	similar amounts as defined in Revenue Procedure 98-19? <i>If</i> "Yes," <i>complete Schedule C, Part III</i>	5		x
6		5		- 23
0	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			x
-	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			v
-	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		<u>x</u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Х	
с	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	х	
h	Was the organization included in consolidated, independent audited financial statements for the tax year?			
2	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
13 14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	<u> </u>	X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	170		
U	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
		446	х	
45	or more? If "Yes," complete Schedule F, Parts I and IV	14b	Δ	<u> </u>
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	4-		v
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			v
-	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	<u> </u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G. Part III	19		X

Form 990 (2017)

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Form	990 (2017) C/O FINANCE DEPARTMENT 13-294	9483	Р	age 4
Par	t IV Checklist of Required Schedules (continued)			
			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	. 20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	. 24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	. 24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	. <u>25a</u>		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV			X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	. 28b		x
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	. 29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X X
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		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	. <u>35a</u>		x
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	. <u>35b</u>		<u> </u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			v
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			v
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	. 37		X X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		x	
	Note. All Form 990 filers are required to complete Schedule O	38		<u> </u> (2017)
		⊢orm	330	(2017)

Form	990 (2017) C/O FINANCE DEPARTMENT 13-2949	483	P	age 5				
Pa	t V Statements Regarding Other IRS Filings and Tax Compliance							
	Check if Schedule O contains a response or note to any line in this Part V			X				
			Yes	No				
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 389							
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0							
с	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming							
	(gambling) winnings to prize winners?	1c						
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,							
	filed for the calendar year ending with or within the year covered by this return 2a 920							
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х					
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)							
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Х					
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b	Х					
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a							
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X				
b	If "Yes," enter the name of the foreign country: ►							
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).							
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X				
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X				
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c						
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit							
	any contributions that were not tax deductible as charitable contributions?	6a		X				
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts							
	were not tax deductible?	6b						
7	Organizations that may receive deductible contributions under section 170(c).		x					
	a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?							
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X					
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required							
		7c		X				
	If "Yes," indicate the number of Forms 8282 filed during the year 7d	7.		x				
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e 7f		X				
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?							
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7g 7h						
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the							
0		8						
9	sponsoring organization have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds.							
a		9a						
b	Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b						
10	Section 501(c)(7) organizations. Enter:							
a	Initiation fees and capital contributions included on Part VIII, line 12 10a							
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b							
11	Section 501(c)(12) organizations. Enter:							
а	Gross income from members or shareholders 11a							
b	Gross income from other sources (Do not net amounts due or paid to other sources against							
	amounts due or received from them.)							
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a						
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year							
13	Section 501(c)(29) qualified nonprofit health insurance issuers.							
а	Is the organization licensed to issue qualified health plans in more than one state?	13a						
	Note. See the instructions for additional information the organization must report on Schedule O.							
b	Enter the amount of reserves the organization is required to maintain by the states in which the							
	organization is licensed to issue qualified health plans 13b							
	Enter the amount of reserves on hand							
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X				
b	If "Yes," has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule O	14b						

Form	990	(2017)
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Check if Schedule O contains a response or note to any line in this Part VI

Section A. Governing Body and Management

Form 990 (2017)

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

13-2949483

Page **6**

X

Yes No

1a	Enter the number of voting members of the governing body at the end of the tax year	1a		27					
	If there are material differences in voting rights among members of the governing body, or if the governing								
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.								
b	Enter the number of voting members included in line 1a, above, who are independent	1b	2	25					
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship		ny other						
	officer, director, trustee, or key employee?								
3	Did the organization delegate control over management duties customarily performed by or under the	direct	supervision						
	of officers, directors, or trustees, or key employees to a management company or other person?			3	;		X		
4	Did the organization make any significant changes to its governing documents since the prior Form 99	90 was	filed?	4	ł		Х		
5	Did the organization become aware during the year of a significant diversion of the organization's asse	ets?		5	,		X		
6	Did the organization have members or stockholders?			. 6	;		X		
7a	Did the organization have members, stockholders, or other persons who had the power to elect or app	point o	ne or						
	more members of the governing body?			. 7	а		Х		
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, sto								
	persons other than the governing body?								
8									
а	The governing body?			8	a	Х			
b	Each committee with authority to act on behalf of the governing body?				0	Х			
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reach				T	Π			
	organization's mailing address? If "Yes." provide the names and addresses in Schedule O			🤤	,		Х		
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Rev								
			,			Yes	No		
10a	Did the organization have local chapters, branches, or affiliates?			10	a		Х		
	If "Yes," did the organization have written policies and procedures governing the activities of such cha								
	and branches to ensure their operations are consistent with the organization's exempt purposes?			. 10	b				
l1a	Has the organization provided a complete copy of this Form 990 to all members of its governing body			11	a	Х			
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.								
l2a	Did the organization have a written conflict of interest policy? If "No," go to line 13								
b	• Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?								
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Ye								
	in Schedule O how this was done	,		12	2c	x			
13	Did the organization have a written whistleblower policy?				3	X			
14	Did the organization have a written document retention and destruction policy?				4	Х			
15	Did the process for determining compensation of the following persons include a review and approval	by ind	ependent						
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?								
а	The organization's CEO, Executive Director, or top management official			15	ia	Х			
b	Other officers or key employees of the organization			15		Х			
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).								
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangem	ent wit	ha						
	taxable entity during the year?			16	ja	x			
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate								
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organize		-						
	exempt status with respect to such arrangements?			. 16	ΰb	х			
Sec	tion C. Disclosure								
17	List the states with which a copy of this Form 990 is required to be filed \blacktriangleright SEE SCHEDULE (2							
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (n 501(c)(3)s only) availa	ble				
	for public inspection. Indicate how you made these available. Check all that apply.								
	Own website X Another's website X Upon request Other (explain)	in Sch	edule ()						
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conf		,	nd fina	ncia	al			
	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 book	ks and	records: 🕨						
-	LINDA FRANKEN - SENIOR VP, FINANCE - 646-758-9656		· · · · · · · · · · · · · · · · · · ·						
	156 WEST 56TH STREET, NEW YORK, NY 10019-3800								
32006	3 11-28-17			F	orm	990	(2017		
	6						,		
.01	29 756359 1622800.000 2017.05030 NEW YORK	ROA	D RUNNER	s II	1C	16	228		
				-					

	NEW	YORK ROAD	RUNNERS	INC.	
- orm 990 (2	2017) C/O	FINANCE D	EPARTMENI	י	13-2949483
Part VII	Compensation of Of	ficers, Director	s, Trustees, H	Key Employees, High	lest Compensated
	Employees and Inde	nendent Contr	actors		

Employees, and independent Contractors

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

(D)

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 (Ď), (E), and (F) if no compensation was paid.

(. .

List all of the organization's current key employees, if any. See instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

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

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

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

()

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

(A)	(B) (C)							(D)	(F)			
Name and Title	Average	Position (do not check more than one					one	Reportable	Reportable	Estimated		
	hours per	box	box, unless person is officer and a director/		s both	an	compensation	compensation	amount of			
	week						.00)	from	from related	other		
	(list any hours for	directo				_		the organization	organizations (W-2/1099-MISC)	compensation from the		
	related	e or o	stee			nsated		(W-2/1099-MISC)	(11271000111100)	organization		
	organizations	truste	al tru:		yee	im per				and related		
	below	Individual trustee or director	nstitutional trustee	er	Key employee	est cc loyee	ler			organizations		
	line)	Indiv	Insti	Officer	Key	Highest compensated employee	Former					
(1) MICHAEL CAPIRASO	50.00											
PRESIDENT/CEO/BOARD MEMBER		Х		Х				479,195.	0.	29,328.		
(2) PETER CIACCIA	50.00											
PRESIDENT/EVENT & RD/BOARD MEMBER		Х		Х				487,105.	0.	28,828.		
(3) GEORGE HIRSCH	10.00											
CHAIRMAN/BOARD MEMBER		Х		Х				0.	0.	0.		
(4) MICHAEL FRANKFURT	3.00											
SECRETARY/BOARD MEMBER		Х		Х				0.	0.	0.		
(5) ANNE BEANE RUDMAN	3.00											
ASSISTANT SECRETARY/BOARD MEMBER		Х		Х				0.	0.	0.		
(6) THOMAS LABRECQUE, JR.	3.00											
TREASURER/BOARD MEMBER		Х		Х				0.	0.	0.		
(7) PRISCILLA ALMODOVAR	1.00											
BOARD MEMBER		Х						0.	0.	0.		
(8) MARK BILSKY	1.00											
BOARD MEMBER		Х						0.	0.	0.		
(9) RICHARD BYRNE	1.00											
BOARD MEMBER		Х						0.	0.	0.		
(10) RAUL DAMAS	1.00											
BOARD MEMBER		Х						0.	0.	0.		
(11) DOUG FELTMAN	1.00											
BOARD MEMBER		Х						0.	0.	0.		
(12) CHRISTOPHER FOSTER	1.00											
BOARD MEMBER		Х						0.	0.	0.		
(13) JASON GOREVIC	1.00											
BOARD MEMBER		Х						0.	0.	0.		
(14) MICHAEL GROSS	1.00											
BOARD MEMBER		Х						0.	0.	0.		
(15) MARK LEVENFUS	1.00											
BOARD MEMBER		Х						0.	0.	0.		
(16) NNENNA LYNCH	1.00											
BOARD MEMBER		Х						0.	0.	0.		
(17) CLAUDIA MALLEY	1.00											
BOARD MEMBER		Х						0.	0.	0.		
732007 11-28-17										Form 990 (2017)		

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NEW	YORK	ROAD	RUNNERS	INC.
C/0	FTNA	זרי דיסע		n

13-2010103

Form 990 (2017) C/O FINAN	ICE DEPA	ART	'ME	\mathbf{NT}					13-29	9494	483	Page 8
Part VII Section A. Officers, Directors, Trust	ees, Key Em	ploy	ees,	and	Hig	phest	t C	ompensated Employees	s (continued)			
(A)	(B)			(C	;)			(D)	(E)		((F)
Name and title	Average	(10		Posit				Reportable	Reportable		Esti	mated
	hours per	box	, unles	s pers	son is	than or both	an	compensation	compensatio	n	amo	ount of
	week	offic	cer an	d a dir	rector	r/truste	ee)	from	from related	ı	ot	ther
	(list any	ctor						the	organization	s	compe	ensation
	hours for	r dire				eq		organization	(W-2/1099-MIS	;C)	fror	m the
	related	tee o	ustee			ensat		(W-2/1099-MISC)			orgar	nization
	organizations	trus	nal tr		oyee	duo					and	related
	below	Individual trustee or director	nstitutional trustee	Ger	key employee	loyee	Former				organ	izations
	line)	lndi	Inst	Officer	Key	Highest compensated employee	Forr					
(18) ADAM MANUS	1.00											
BOARD MEMBER		Х						0.		0.		Ο.
(19) NNAMDI OKIKE	1.00											
BOARD MEMBER		х						0.		0.		Ο.
(20) MARTIN OPPENHEIMER	1.00											
BOARD MEMBER		х						0.		0.		0.
(21) STEVE PAMON	1.00	23		_	_					~ •		
BOARD MEMBER	1.00	x						0.		0.		0.
	1 00	^			_			0.		<u> </u>		0.
(22) JOHN ROBERTS	1.00											0
BOARD MEMBER	1	Х						0.		0.		0.
(23) STEVE ROTH	1.00											
BOARD MEMBER (THRU 06/2017)		Х						0.		0.		0.
(24) AMBER SABATHIA	1.00											
BOARD MEMBER		Х						0.		0.		0.
(25) ERIC A. SEIFF	1.00											
BOARD MEMBER (THRU 06/2017)		х						0.		0.		Ο.
(26) CIDRA SEBASTIEN	1.00											
BOARD MEMBER		x						0.		0.		0.
								966,300.		0.	58	,156.
1b Sub-total								1,866,839.		0.		,682.
c Total from continuation sheets to Part VI								2,833,139.		0.		,838.
d Total (add lines 1b and 1c)											254	,050.
2 Total number of individuals (including but no	ot limited to th	iose	listeo	d ab	ove)) who	o re	eceived more than \$100,0	000 of reportable	;		20
compensation from the organization												39
										r	۲ I	es No
3 Did the organization list any former officer,	director, or tru	ustee	e, key	y em	ploy	yee, o	or ł	highest compensated em	ployee on			
line 1a? If "Yes," complete Schedule J for su	uch individual										3	<u> </u>
4 For any individual listed on line 1a, is the su	m of reportab	le co	mpe	nsat	ion	and	oth	ner compensation from th	e organization			
and related organizations greater than \$150	,000? If "Yes.	" со	mple	ete S	che	dule	J f	or such individual		[4	X
5 Did any person listed on line 1a receive or a												
rendered to the organization? If "Yes." com											5	X
Section B. Independent Contractors	Diele Ochedul		<u>л зи</u>		10/30						-	
1 Complete this table for your five highest cor	mpensated inc	lono	ndor	nt co	ntra	otor	e th	nat received more than \$	100 000 of comr	oneat	ion from	
the organization. Report compensation for t	-	-								/crisal		1
	ne calendar y	eare	nain	g wi	un o	rwiti			ar.		(0)	
(A) Name and business	addross							(B) Description of se	nvicos	C	(C) ompens	
				~			_	Description of se			ompens	
CITY OF NEW YORK DEPARTME												
100 GOLD STREET, 2ND FLOO	R, NEW	YO	RK	<u>, 1</u>	NΥ		_	NYPD TRAFFIC		3	,078	<u>,942.</u>
STRAN & COMPANY, INC.								YOUTH INCENTI	IVES AND			
<u>2 HERITAGE DRIVE, # 600,</u>	QUINCY,	M	<u>A (</u>	021	171	1		RACE PRODUCTS	5	2	<u>,736</u>	<u>,581.</u>
TRANS WORLD INTERNATIONAL	INC.							PRODUCTION OF	F NYC			
P.O. BOX 17470, PALATINE,	IL 600	55	-74	470)			MARATHON BROA	DCAST	2	,691	,777.
TATA AMERICA INTERNATIONA							_	TECH SUPPORT				
COLLECTIONS CENTER DRIVE,	-		ΞI	L				PROJECTS		1	.314	,400.
ICREON TECH, INC., 597 FI					זיד (H	_	CONSULTING AN	ID TECH		,	<u>,</u>
FLOOR, NEW YORK, NY 10017		110	-,	± 2				DEVELOPMENT		1	308	,570.
				1.1.2.1	h c :	- 12-1			ua than		, 500	, 570.
2 Total number of independent contractors (ir		ot lin	nited		-		ed	above) who received mo	re than			
\$100,000 of compensation from the organiz	ation 🕨				05)						

SEE PART VII, SECTION A CONTINUATION SHEETS Form **990** (2017) 732008 11-28-17

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C/O FINANCE DEPARTMENT

Form 990 C/O FINA	NCE DEPA								13-294	9483
Part VII Section A. Officers, Directors, T	rustees, Key Er	nplo	yee	s, a	nd H	lighe	est (Compensated Employe	es (continued)	
(A) Name and title	(B) Average hours	(C) Position (check all that apply)					ly)	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	per week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest com pensated em ployee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(27) TOBY TANSER BOARD MEMBER (THRU 06/2017)	1.00	x						0.	0.	0.
(28) JUDY TURCHIN	1.00							0.	0.	0.
BOARD MEMBER	1.00	x						0.	0.	0.
(29) DAVID WEIL	1.00									
BOARD MEMBER		х						0.	0.	0.
(30) JULIE WOOD	1.00									
BOARD MEMBER		Х						0.	0.	0.
(31) JAMES GROOMS	40.00									
SVP OF LEGAL/ASST. SECRETARY				Х				263,811.	0.	22,745.
(32) LINDA FRANKEN	40.00									
SVP OF FINANCE/ASST. TREASURER		L		х				272,948.	0.	16,410.
(33) JAMES HEIM	40.00	-							•	
SVP/TECH. DIRECTOR EV DEV & OPS	40.00	╞			X			213,078.	0.	32,943.
(34) VERONICA O'SHEA TUCKER	40.00	-						040 070	•	01 406
VP MARKETING & DIGITAL	40.00	┢				X		248,273.	0.	21,426.
(35) SARAH CUMMINS VP BUS DEV/STRATEGIC PARTNERSHIPS	40.00	-				x		221 405	0.	25 027
(36) JEFFERY CARNEVALE	40.00	-						231,485.	0.	25,837.
VP INFORMATION TECHNOLOGY	40.00	1				x		212,692.	0.	25,726.
(37) CHRISTOPHER WEILLER	40.00	-						212/0921		2377200
VP MEDIA, PR & PRO ATHLETICS		1				x		215,152.	Ο.	31,635.
(38) MICHAEL RODGERS	40.00									
VP DEVELOPMENT & PHILANTHROPY						x		209,400.	0.	19,960.
		-								
		<u> </u>								
		1								
		<u> </u>								
		-								
		-								
		1								
		-								
		├				-				
		<u>.</u>			-	-		1 0 5 5 6 5 5		100 000
Total to Part VII, Section A, line 1c		<u></u>						1,866,839.		196,682.

732201 04-01-17

Form 990 (2017) C/O FIN

NEW YORK ROAD RUNNERS INC. C/O FINANCE DEPARTMENT

						in this Part VIII (A)	(B)	(C)	(D)
						Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue exclude from tax under sections 512 - 514
s	1 a	Federated campaigns		1a					
and Other Similar Amounts		Membership dues		1b	2,129,025.				
Bo		Fundraising events		1c	811,739.				
ΓA		Related organizations		1d	, ,				
nila		Government grants (contributi	Г	1e	248,302.				
Sin		All other contributions, gifts, grant	Г						
Jer	•	similar amounts not included abov		1f	41,216,107.				
ġ	~	Noncash contributions included in lines			8,318,173.				
pu	-	Total. Add lines 1a-1f				44,405,173.			
0		Total. Add lines 1a-11			Business Code	11,100,1701			
	2 a	EVENT ENTRY REVENUE			900099	41,606,800.	41,606,800.		
		MARATHON AUXILIARY REVE	IIIE		900099	3,643,618.	3,643,618.		
Revenue		MAGAZINE REVENUE	шоп		841800	699,522.	699,522.		
ven	•	CLASSES REVENUE			900099	533,109.	533,109.		
Be		MEMBERSHIP DUES			900099	21,965.	21,965.		
	•					,			
		All other program service reve			L	18,400.	18,400.		
+		Total. Add lines 2a-2f				46,523,414.			
	3	Investment income (including				074 511			074 51
		other similar amounts)				974,511.			974,51
	4	Income from investment of tax			· · ·	2 597 020			2 5 9 7 9 2
	5	Royalties				2,587,929.			2,587,92
	_		(i) R		(ii) Personal				
		Gross rents	2,221						
		Less: rental expenses		,618.					
		Rental income or (loss)	1,894	,202.		1 004 000			1 004 00
						1,894,202.			1,894,20
	7 a	Gross amount from sales of	(i) Secu		(ii) Other				
		assets other than inventory	15,023	648.					
	b	Less: cost or other basis							
		and sales expenses	13,603						
		Gain or (loss)							
		Net gain or (loss)			►	1,420,638.			1,420,63
,	8 a	Gross income from fundraising							
2		including \$ 811	<u>,739.</u> o	f					
5		contributions reported on line	1c). See						
		Part IV, line 18		а	228,908.				
	b	Less: direct expenses		b	271,406.				
'	с	Net income or (loss) from fund	Iraising e	/ents	►	-42,498.			-42,49
	9 a	Gross income from gaming ac	tivities. S	ee					
		Part IV, line 19		а					
	b	Less: direct expenses		b					
	с	Net income or (loss) from gam	ing activi	ties	►				
1	10 a	Gross sales of inventory, less	returns						
		and allowances		а					
	b	Less: cost of goods sold							
		Net income or (loss) from sales			>				
		Miscellaneous Revenue			Business Code				
1	1 a	REVERSAL OF RACE COUPON	I LIABII	LITY	900099	500,000.			500,00
	b	SPONSORSHIP INCOME			900099	230,036.		230,036.	
	С	MAGAZINE ADVERTISING IN	ICOME		541800	81,979.		81,979.	
	d	All other revenue							
1		Total. Add lines 11a-11d				812,015.			
	-								

10

NEW YORK ROAD RUNNERS INC. C/O FINANCE DEPARTMENT

1

427,291.

1,308,722.

4,035,691.

4,074,889.

483,328.

146,182.

2,946,098.

1,743,760.

26,936,171.

16,303,202.

95,489,937.

4,147,570.

542,784.

147,467.

(A)

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

(C)

(D) Fundraising

Х

Form 990 (2017)

Part IX Statement of Functional Expenses

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

(B)

	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(ם) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	1,336,759.	1,336,759.		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	180,262.	180,262.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	1,915,508.	632,118.	1,283,390.	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	21,427,199.	18,213,119.	3,214,080.	
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	734,471.	624,300.	110,171.	
9	Other employee benefits	1,769,760.	1,504,296.	265,464.	
10	Payroll taxes	1,851,034.	1,573,379.	277,655.	
11	Fees for services (non-employees):				
а	Management	124,807.		124,807.	
b	Legal	469,357.		469,357.	
с	Accounting	563,298.		563,298.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	174,225.		174,225.	
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch 0.)	700,102.		700,102.	

1,284,562.

2,037,444.

2,946,098.

1,482,196.

26,936,171.

16,303,202.

82,557,448.

3,258,288.

461,366.

2,

644,149.

824,984.

241,664.

73,091.

column (A) amount, list line 11g expenses on Sch 0.) Advertising and promotion 12 Office expenses 13 Information technology 14 Royalties 15 16 Occupancy 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 19 20 Interest Payments to affiliates 21 22 Depreciation, depletion, and amortization 23 Insurance Other expenses. Itemize expenses not covered 24

above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.) NYC MARATHON а WEEKLY EVENTS b YOUTH & COMMUNITY SERV. С STAFF EXPENSE (TRAINING d All other expenses е

Total functional expenses. Add lines 1 through 24e 25 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)

732010 11-28-17

11

889,282.

889,282.

142,729.

664,573.

210,707.

037,445

241,664.

73,091.

261,564.

81,418.

147,467.

12,043,207.

1

2

Eorm	000	(2017)	
-om	990	(2017)	

Part X Balance Sheet

NEW YORK ROAD RUNNERS INC. C/O FINANCE DEPARTMENT

Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 4,932,920. 8,227,876. 1 1 Cash - non-interest-bearing 2,770,265. 2,792,575. 2 Savings and temporary cash investments 2 532,295. 352,897. Pledges and grants receivable, net 3 3 6,910,037. 10,038,463. Accounts receivable, net 4 4 Loans and other receivables from current and former officers, directors, 5 trustees, key employees, and highest compensated employees. Complete 5 Part II of Schedule L 6 Loans and other receivables from other disgualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L 6 Assets 7 7 Notes and loans receivable, net 8 Inventories for sale or use 8 1,774,072. 1,897,772. 9 9 Prepaid expenses and deferred charges **10a** Land, buildings, and equipment: cost or other<u>10a</u> 25,227,168. basis. Complete Part VI of Schedule D b Less: accumulated depreciation 10b 16,480,163. 8,747,005. 8,575,812. 10c 47,734,396. 44,175,095. 11 Investments - publicly traded securities 11 Investments - other securities. See Part IV, line 11 5,201,617. 5,601,172. 12 12 13 Investments - program-related. See Part IV, line 11 13 14 Intangible assets 14 15 Other assets. See Part IV, line 11 15 Total assets. Add lines 1 through 15 (must equal line 34) 74,816,415. 16 85,447,854. 16 12,254,518. 17 11,822,215. 17 Accounts payable and accrued expenses 18 18 Grants payable 29,631,892. 35,882,657. 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 21 Escrow or custodial account liability. Complete Part IV of Schedule D Loans and other payables to current and former officers, directors, trustees, 22 Liabilities key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 23 23 Unsecured notes and loans payable to unrelated third parties 24 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 25 47,704,872. 41,886,410. 26 26 **Total liabilities.** Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here 🕨 and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 31,496,074. 36,220,803. 27 27 Unrestricted net assets 1,433,931. 1,522,179. 28 28 Temporarily restricted net assets 29 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here 🕨 and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 31 32 Retained earnings, endowment, accumulated income, or other funds 32 32,930,005. 37,742,982. Total net assets or fund balances 33 33 85,447,854. 74,816,415. 34 34 Total liabilities and net assets/fund balances

Form 990 (2017)

	NEW YORK ROAD RUNNERS INC.							
Form	990 (2017) C/O FINANCE DEPARTMENT	13-	29494	83	Ра	_{ge} 12		
Pa	t XI Reconciliation of Net Assets							
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>					
1	Total revenue (must equal Part VIII, column (A), line 12)	1				84.		
2	Total expenses (must equal Part IX, column (A), line 25)	2				37.		
3	Revenue less expenses. Subtract line 2 from line 1	3				47.		
4	4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4 3							
5	Net unrealized gains (losses) on investments	5	1,	727	7,5	30.		
6	Donated services and use of facilities	6						
7	Investment expenses	7						
8	Prior period adjustments	8						
9	Other changes in net assets or fund balances (explain in Schedule O)	9				0.		
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,							
_	column (B))	10	37,	742	2,9	82.		
Pa	t XII Financial Statements and Reporting							
	Check if Schedule O contains a response or note to any line in this Part XII	<u></u>						
				_	Yes	No		
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		- 1					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0.						
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X		
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a						
	separate basis, consolidated basis, or both:							
	Separate basis Consolidated basis Both consolidated and separate basis							
b	Were the organization's financial statements audited by an independent accountant?		·····	2b	X			
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basis,						
	consolidated basis, or both:							
	X 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 oversight of the							
	review, or compilation of its financial statements and selection of an independent accountant?		····· -	2c	X			
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche							
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Audi	t					
	Act and OMB Circular A-133?		ŀ	3a		X		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	red audi	t			1		
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits	<u></u>		3b	000	(2017)		
				-orm	771	(2017)		

Form **990** (2017)

SCHEDULE A		Dublic Cha	rity Status an	d Duk	lic Si	innort		OMB No. 1545-0047
(Form 990 or 990-EZ)			ization is a section 501					2017
			17(a)(1) nonexempt cha					2017
Department of the Treasury Internal Revenue Service			Attach to Form 990 or F					Open to Public Inspection
			/Form990 for instructio	ons and th	ie latest ir	formation.	Employer	
Name of the organizati		FINANCE DE	RUNNERS INC.					identification number 3 - 2949483
Part I Reason			All organizations must co	mploto th	is part) Sc	o instructions	<u> </u>	5-2949405
<u> </u>	•		For lines 1 through 12, cl n of churches described		,	V A V;)		
			Attach Schedule E (Form			·)(A)(i)•		
			inization described in se			i).		
	•		junction with a hospital)(iii). Enter	the hospital's name.
city, and stat	-		,				/////	·····,
	-	or the benefit of a col	lege or university owned	or operate	ed by a go	vernmental u	nit describe	d in
section 170	(b)(1)(A)(iv). ((Complete Part II.)						
6 🗌 A federal, sta	te, or local go	vernment or governm	ental unit described in	section 17	70(b)(1)(A)	(v).		
7 🚺 An organizat	on that norma	ally receives a substar	ntial part of its support fr	om a gove	ernmental	unit or from th	ne general p	ublic described in
section 170(b)(1)(A)(vi). (C	Complete Part II.)						
8 A community	rtrust describe	ed in section 170(b)(1)(A)(vi). (Complete Parl	: II.)				
-	-	-	in section 170(b)(1)(A)(i		-		-	-
	or a non-land-	grant college of agric	ulture (see instructions).	Enter the I	name, city	, and state of	the college	or
university:								
			than 33 1/3% of its supp					
			t to certain exceptions, a (less section 511 tax) fro					-
		mplete Part III.)			ses acqui	ed by the org	janization a	itel Julie 30, 1973.
			vely to test for public sat	etv See	section 50)9(a)(4).		
	•	-	vely for the benefit of, to	•			rrv out the	ourposes of one or
0	•	-	d in section 509(a)(1) o	-			•	
		-	supporting organization					
a 🗌 Type I. A s	upporting orga	anization operated, s	upervised, or controlled	by its supp	oorted org	anization(s), ty	pically by g	giving
the suppor	ted organizati	on(s) the power to req	gularly appoint or elect a	majority o	of the direc	tors or trustee	es of the su	pporting
organizatio	n. You must e	complete Part IV, Se	ctions A and B.					
b Type II. A	supporting org	ganization supervised	or controlled in connect	ion with its	s supporte	d organizatio	n(s), by hav	ing
control or r	nanagement o	of the supporting orga	anization vested in the sa	ame perso	ns that co	ntrol or manag	ge the supp	orted
		st complete Part IV,						
	-		g organization operated				ly integrate	d with,
			. You must complete F					-4'(-)
			orting organization oper				· ·	
	-	• •	ation generally must sati plete Part IV, Sections	2			analleniiv	eness
			vritten determination from				II Type III	
			nally integrated supportir			турс і, турс	n, rype m	
f Enter the number								
	• •	n about the supporte						
(i) Name of supp		(ii) EIN	(iii) Type of organization (described on lines 1-10	(iv) Is the orga in your governi	anization listed ing document?	(v) Amount of	,	(vi) Amount of other
organization	1		above (see instructions))	Yes	No	support (see ir	nstructions)	support (see instructions)
Total								
	duction Act N	Notice, see the Instru	uctions for Form 990 or	990-EZ.	732021 10-	06-17 Sche	dule A (For	m 990 or 990-EZ) 2017

¹⁴ 2017.05030 NEW YORK ROAD RUNNERS INC 16228001

Schedule A (Form 990 or 990-EZ) 2017 C/O FINANCE DEPARTMENT

13-2949483 Page 2

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

Sec	ction A. Public Support					-	
Cale	ndar year (or fiscal year beginning in) 🕨	• (a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	22312161.	<u>29201911.</u>	30018779.	36258442.	<u>44405173.</u>	162196466
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	22312161.	<u>29201911.</u>	30018779.	36258442.	<u>44405173.</u>	162196466
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)						63016458.
	Public support. Subtract line 5 from line 4.						99180008.
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
7	Amounts from line 4	22312161.	<u>29201911.</u>	30018779.	36258442.	<u>44405173.</u>	162196466
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources \dots	611,375.	3243498.	5183055.	4796187.	5784260.	19618375.
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.)		588,000.		1853185.		2941185.
11	Total support. Add lines 7 through 10						184756026
12	Gross receipts from related activities,	, etc. (see instructio	ons)			12 234	<u>,651,524.</u>
13	First five years. If the Form 990 is fo	r the organization's	s first, second, thir	d, fourth, or fifth ta	ax year as a section	n 501(c)(3)	
_	organization, check this box and sto	phere					
Sec	ction C. Computation of Public	ic Support Per	centage				
	Public support percentage for 2017 (•			14	53.68 %
	Public support percentage from 2016					15	54.26 %
16a	33 1/3% support test - 2017. If the	organization did no	ot check the box o	n line 13, and line	14 is 33 1/3% or m	ore, check this bo	
	stop here. The organization qualifies	as a publicly supp	orted organization				► X
b	33 1/3% support test - 2016. If the	organization did no	ot check a box on	line 13 or 16a, and	l line 15 is 33 1/3%	or more, check th	is box
	and stop here. The organization qua	lifies as a publicly s	supported organization	ation			▶∟
17a	10% -facts-and-circumstances test	t - 2017. If the org	anization did not o	check a box on line	e 13, 16a, or 16b, a	and line 14 is 10%	or more,
	and if the organization meets the "fac	cts-and-circumstand	ces" test, check th	nis box and stop h	here. Explain in Pa	rt VI how the orgar	nization
	meets the "facts-and-circumstances"	test. The organizat	tion qualifies as a	publicly supported	organization		▶□
b	10% -facts-and-circumstances test	t - 2016. If the org	anization did not o	check a box on line	e 13, 16a, 16b, or ⁻	17a, and line 15 is	10% or
	more, and if the organization meets the	he "facts-and-circur	mstances" test, cl	neck this box and	stop here. Explain	n in Part VI how the	e
	organization meets the "facts-and-cire	cumstances" test.	The organization o	qualifies as a public	cly supported orga	nization	
18	Private foundation. If the organization	on did not check a	box on line 13, 16	a, 16b, 17a, or 17b	o, check this box a	nd see instructions	s >
					Sche	edule A (Form 990	or 990-EZ) 2017

732022 10-06-17

Part II

15 2017.05030 NEW YORK ROAD RUNNERS INC 16228001

NEW YORK ROAD RUNNERS IN	NEW	YORK	ROAD	RUNNERS	INC
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13-2949483	Page 3
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Schedule A (Form 990 or 990-EZ) 2017 C/O FINANCE DEPARTMENT Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support						
Calendar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1 Gifts, grants, contributions, and						
membership fees received. (Do not						
include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or bus-						
iness under section 513						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities						
furnished by a governmental unit to						
the organization without charge \dots						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.) Section B. Total Support						
Calendar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income						
(less section 511 taxes) from businesses						
acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is fo	r the organization'	s first, second, thir	d, fourth, or fifth t	ax year as a sectio	n 501(c)(3) org	anization,
check this box and stop here						>
Section C. Computation of Publ	ic Support Per	rcentage				
15 Public support percentage for 2017 (ine 8, column (f) d	ivided by line 13, o	column (f))		15	%
16 Public support percentage from 2016					16	%
Section D. Computation of Inves	stment Income	e Percentage				
17 Investment income percentage for 20)17 (line 10c, colu	mn (f) divided by li	ne 13, column (f))		17	%
18 Investment income percentage from	2016 Schedule A,	Part III, line 17			18	%
19a 33 1/3% support tests - 2017. If the	organization did r	not check the box	on line 14, and lin	e 15 is more than 3	33 1/3%, and li	ne 17 is not
more than 33 1/3%, check this box a	nd stop here. The	e organization qua	lifies as a publicly	supported organiz	ation	
b 33 1/3% support tests - 2016. If the						
line 18 is not more than 33 1/3%, che	ck this box and s f	top here. The orga	anization qualifies	as a publicly suppo	orted organizat	ion ►
20 Private foundation. If the organization	on did not check a	box on line 14, 19	a, or 19b, check t	his box and see ins	structions	••••••••••••••••••••••••••••••••••••••
732023 10-06-17				Sch	edule A (Form	n 990 or 990-EZ) 2017

¹⁶

Schedule A (Form 990 or 990-EZ) 2017 C/O FINANCE DEPARTMENT

1

2

3a

3b

3c

4a

Yes No

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

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

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732024 10-06-17

Schedule A (Form 990 or 990-EZ) 2017

2017.05030 NEW YORK ROAD RUNNERS INC 16228001

4b 4c 5a 5b 5c 6 7 8 9a 9b 9c 10a 10b

NEW	YORK	ROAD	RUNNERS	INC
NEW	YORK	ROAD	RUNNERS	INC

Schedule A (Form 990 or 990 EZ) 2017 C/O FINANCE DEPARTMENT Part IV Supporting Organizations (continued)

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

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732025 10-06-17

Schedule A (Form 990 or 990-EZ) 2017

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2017.05030 NEW YORK ROAD RUNNERS INC 16228001

13-2949483 Pag	ge 6
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Schedule A (Form 990 or 990 EZ) 2017 C/O FINANCE DEPARTMENT Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations 1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI.) See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E. (B) Current Year Section A - Adjusted Net Income (A) Prior Year (optional) Net short-term capital gain 1 1 2 Recoveries of prior-year distributions 2 3 Other gross income (see instructions) 3 4 4 Add lines 1 through 3 5 5 Depreciation and depletion 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 7 Other expenses (see instructions) 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 (B) Current Year Section B - Minimum Asset Amount (A) Prior Year (optional) Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): a Average monthly value of securities 1a b Average monthly cash balances 1b c Fair market value of other non-exempt-use assets 1c d Total (add lines 1a, 1b, and 1c) 1d e Discount claimed for blockage or other factors (explain in detail in Part VI): 2 Acquisition indebtedness applicable to non-exempt-use assets 2 3 **3** Subtract line 2 from line 1d Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, 4

Section C - Distributable Amount Current Year 1 1 Adjusted net income for prior year (from Section A, line 8, Column A) Enter 85% of line 1 2 2 Minimum asset amount for prior year (from Section B, line 8, Column A) 3 3 Enter greater of line 2 or line 3 4 4 5 5 Income tax imposed in prior year 6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) 6 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see 7 instructions)

4

5

6

7

8

Schedule A (Form 990 or 990-EZ) 2017

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see instructions)

Multiply line 5 by .035

Recoveries of prior-year distributions

Minimum Asset Amount (add line 7 to line 6)

6

7

8

5 Net value of non-exempt-use assets (subtract line 4 from line 3)

Sche Par	dule A (Form 990 or 990-EZ) 2017 C/O FINANCE D. tV Type III Non-Functionally Integrated 509(3-2949483 Page 7
Secti	on D - Distributions		(° • · · · · · · • · • · ·	Current Year
1	Amounts paid to supported organizations to accomplish exer	mpt purposes		
2	Amounts paid to perform activity that directly furthers exemp			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	3	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the	ne organization is responsive		
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2017 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1	Distributable amount for 2017 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2017 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2017			
a				
b	From 2013			
C	From 2014			
d	From 2015			
e	From 2016			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2017 distributable amount			
i	Carryover from 2012 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2017 from Section D,			
	line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2017 distributable amount			
C	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2017, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2017. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2018. Add lines 3j and 4c.			
8	Breakdown of line 7:			
	Excess from 2013			
	Excess from 2014			
	Excess from 2015			
	Excess from 2016			
	Excess from 2017			

Schedule A (Form 990 or 990-EZ) 2017

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	NEW	YORK	ROAD	RUNNERS	INC.
2017	C/0	FINAN	ICE DI	EPARTMEN	C

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

SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:

LEGAL SETTLEMENT - BMW

Schedule A (Form 990 or 990-EZ) 2

2014 AMOUNT: \$ 588,000.

BUILDING SALES DEPOSIT FORFEITURE

2016 AMOUNT: \$ 1,003,185.

INSURANCE PROCEEDS - CLASS ACTION

2016 AMOUNT: \$ 850,000.

REVERSAL OF RACE COUPON LIABILITY

2017 AMOUNT: \$ 500,000.

Schedule A (Form 990 or 990-EZ) 2017

Schedule B (Form 990, 990-EZ,

or 990-PF) Department of the Treasury Internal Revenue Service

** PUBLIC DISCLOSURE COPY *

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2017

Employer identification number

Name of the organization							
	NEW	YORK	ROAD	RUNNERS	INC		

C/O FINANCE DEPARTMENT Organization type (check one): 13-2949483

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

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

General Rule

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

Special Rules

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

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

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

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

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

Page 2

Employer identification number

13-2949483

NEW YORK ROAD RUNNERS INC. C/O FINANCE DEPARTMENT

Name of organization

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u> 1 </u>		\$ <u>11,319,403.</u>	PersonXPayrollImage: Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>2</u>		\$ <u>1,610,152.</u>	PersonXPayrollImage: Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u> </u>		\$ <u>10,098,451.</u> 	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>4</u>		\$ <u>2,054,782.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		_ \$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

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2017.05030 NEW YORK ROAD RUNNERS INC 16228001

ne of organi			Page Employer identification number
	K ROAD RUNNERS INC. ANCE DEPARTMENT		13-2949483
	Noncash Property (see instructions). Use duplicate copies of Par	t II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	
	LOTHING AND HOUSEHOLD GOODS		
-		<u> </u>	03/31/18
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	
<u>2</u>	ICKETS/EVENTS		0 03/31/19
		\$11,00	0. 03/31/18
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	
		\$	
3453 11-01-17	25	Schedule B	(Form 990, 990-EZ, or 990-PF) (2017)

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Name of org	anization				Employer identification number		
	ORK ROAD RUNNERS INC.						
	INANCE DEPARTMENT						
Part III	<i>Exclusively</i> religious, charitable, etc., con the year from any one contributor. Complete	columns (a) through (e) and th	ne followina line	entry, For organization	าร		
	completing Part III, enter the total of exclusively religiou	us, charitable, etc., contributions of \$	1,000 or less for the	e year. (Enter this info. onc	e.) ▶ \$		
(a) No	Use duplicate copies of Part III if addition	nal space is needed.					
(a) No. from	(b) Purpose of gift	(c) Use of gift	t	(d) Desc	cription of how gift is held		
Part I							
		(e) Transfer	of gift				
	Transferee's name, address, a	and ZIP + 4	R	elationship of tra	nsferor to transferee		
		-					
		-					
		-					
(a) No.							
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	t	(d) Desc	cription of how gift is held		
Ļ							
		(e) Transfer	of gift				
-	Transferee's name, address, a	and ZIP + 4	K	elationship of tra	nsferor to transferee		
		-					
(a) No. from	(b) Purpose of gift	(c) Use of gift		(d) Desc	cription of how gift is held		
Part I				(4) 2000			
	(e) Transfer of gift						
	Transferee's name, address, a	and ZIP + 4	R	elationship of tra	nsferor to transferee		
		-					
		-					
		-					
(a) No. from							
from Part I	(b) Purpose of gift	(c) Use of gift	t	(d) Desc	cription of how gift is held		
F							
		(e) Transfer	of gift				
	Transforação nomo addresa	and 7 ID + 4	Р	alationahin of tra	noferer to transferee		
F	Transferee's name, address, a		<u> </u>		nsferor to transferee		
		-					
723454 11-01-	.17			Schedule	B (Form 990, 990-EZ, or 990-PF) (2017)		

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SCHEDULE C Political Campaign and Lobbying Activities					OMB No. 1545-0047	
(Form 990 or 990-EZ)	90 or 990-EZ)					2017
	For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ.					
Department of the Treasury Internal Revenue Service	Open to Public Inspection					
If the organization answ	vered "Yes," on	Form 990, Part IV, line 3, or For	m 990-EZ, Part V, lir	ne 46 (Political Camp	aign Ac	tivities), then
 Section 501(c)(3) org 	anizations: Com	plete Parts I-A and B. Do not com	plete Part I-C.			
 Section 501(c) (other 	than section 50	1(c)(3)) organizations: Complete F	Parts I-A and C below.	Do not complete Par	t I-B.	
 Section 527 organiza 	ations: Complete	Part I-A only.				
If the organization answ	vered "Yes," on	Form 990, Part IV, line 4, or For	m 990-EZ, Part VI, li	ne 47 (Lobbying Acti	vities), t	hen
 Section 501(c)(3) org 	anizations that h	nave filed Form 5768 (election und	der section 501(h)): Co	omplete Part II-A. Do r	iot comp	olete Part II-B.
 Section 501(c)(3) org 	anizations that h	nave NOT filed Form 5768 (electio	n under section 501(h	n)): Complete Part II-B	. Do not o	complete Part II-A.
-		Form 990, Part IV, line 5 (Proxy	Tax) (see separate i	nstructions) or Form	990-EZ	, Part V, line 35c (Proxy
Tax) (see separate instr	uctions), then					
• Section 501(c)(4), (5)						
Name of organization		K ROAD RUNNERS IN	с.		Employ	ver identification number
Dort LA Comple		ANCE DEPARTMENT	r agation E01(a)	or io o postion E	7 orac	<u>13-2949483</u>
Part I-A Comple	ete il the org	anization is exempt unde			in orga	
		ation's direct and indirect politica				
2 Political campaign a	, ,					
3 Volunteer hours for	political campai	gn activities			·	
Part I-B Comple	ete if the ora	anization is exempt unde	r section 501(c)(3).		
•		incurred by the organization unde			▶\$	
	•	incurred by organization manager				
		n 4955 tax, did it file Form 4720 fo				
b If "Yes," describe in	Part IV.					
Part I-C Comple	ete if the org	anization is exempt unde	r section 501(c),	except section 5	501(c)(3	3).
1 Enter the amount d	rectly expended	by the filing organization for sect	ion 527 exempt funct	ion activities	. ►\$_	
2 Enter the amount of	f the filing organi	ization's funds contributed to othe	er organizations for se	ection 527		
exempt function ac					►\$_	
		. Add lines 1 and 2. Enter here an			. .	
					▶\$_	
						Yes No
		ployer identification number (EIN)				
		tion listed, enter the amount paid omptly and directly delivered to a				
		additional space is needed, provid			sparate s	segregated fund of a
		· · ·	Т		from	(a) Amount of political
(a) Name		(b) Address	(c) EIN	(d) Amount paid filing organizatio		(e) Amount of political contributions received and
				funds. If none, ent		promptly and directly
						delivered to a separate political organization.
						If none, enter -0
						<u> </u>
			<u> </u>			

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. LHA Schedule C (Form 990 or 990-EZ) 2017

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Schedule C (Form 990 or 990-EZ) 2017 C					949483 Page 2
Part II-A Complete if the orga section 501(h)).	nization is exel	npt under sectior	1 501(c)(3) and file	d Form 5768 (ele	ection under
		iliated group (and list in	Part IV each affiliated	group member's nam	e, address, EIN,
expenses, and share	, ,	• •			
B Check ▶ if the filing organization	on checked box A a	nd "limited control" pro	ovisions apply.	() =:::	
	on Lobbying Expe tures" means amo	nditures unts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influe	nce public opinion (grass roots lobbying)			
b Total lobbying expenditures to influe	nce a legislative bo	dy (direct lobbying)			
c Total lobbying expenditures (add line	es 1a and 1b)				
d Other exempt purpose expenditures					
e Total exempt purpose expenditures	(add lines 1c and 1c	(k			
f Lobbying nontaxable amount. Enter	the amount from th				
If the amount on line 1e, column (a) or		bying nontaxable am			
Not over \$500,000		the amount on line 1e.			
Over \$500,000 but not over \$1,000,		00 plus 15% of the exc	ess over \$500.000		
Over \$1,000,000 but not over \$1,500		00 plus 10% of the exc	· /		
Over \$1,500,000 but not over \$1,00		00 plus 5% of the exce			
			<u>ss over \$1,500,000.</u>		
Over \$17,000,000	\$1,000	,000.			
Cressrests pontavable amount (ante	vr OEU/ of line 1f				
g Grassroots nontaxable amount (ente	, ,				
h Subtract line 1g from line 1a. If zero	-				
i Subtract line 1f from line 1c. If zero o					
j If there is an amount other than zero		line 1i, did the organiza	ation file Form 4720	ſ	—
reporting section 4911 tax for this ye					Yes No
(Some organizations that	it made a section 5	eraging Period Under 01(h) election do not l ate instructions for lir	have to complete all o	of the five columns be	elow.
	Lobbying Expe	nditures During 4-Yea	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount					
(150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2017

732042 11-09-17

Schedule C (Form 990 or 990-EZ) 2017 C/O FINANCE DEPARTMENT

13-2949483 Page 3 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For e	ach "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description	(;	a)	()	o)
	e lobbying activity.	Yes	No	Amo	ount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter				
	or referendum, through the use of:				
а	Volunteers?		X		
	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	X	v		
	Media advertisements?		X		
	Mailings to members, legislators, or the public?		X X		
	Publications, or published or broadcast statements?		X		
T	Grants to other organizations for lobbying purposes?	x	A	F	5,090.
9 5	Direct contact with legislators, their staffs, government officials, or a legislative body?		X		5,090.
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X		
	Other activities?			F	5,090.
	Total. Add lines 1c through 1i Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X		,050.
	If "Yes," enter the amount of any tax incurred under section 4912				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	n 501(c)(5), or sec	tion	
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the				
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered '				e 3, is
	answered "Yes."	-	.,		
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic				
	expenses for which the section 527(f) tax was paid).				
а	Current year		2a		
b	Carryover from last year				
	Total				
3					
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exce	ess			
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and po	olitical			
	expenditure next year?		4		
5	Taxable amount of lobbying and political expenditures (see instructions)		5		
Par					
	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	list); Part II-	A, lines 1 a	nd 2 (see	
	uctions); and Part II-B, line 1. Also, complete this part for any additional information.				
PA	RT II-B, LINE 1, LOBBYING ACTIVITIES:				
NTVT	R LOBBIED NEW YORK CITY COUNCIL MEMBERS AND NEW YOR		n17		
IN I I	RR LOBBIED NEW YORK CITY COUNCIL MEMBERS AND NEW YOR	A SIA	16		
LEC	GISLATORS SEEKING FUNDS IN SUPPORT OF NYRR'S YOUTH A	ND CON	MUNIT	Y	
PRO	GRAMS, AND SUPPORT FOR UPDATES TO LEGISLATION PERM	፲፹፹ፐ እሪ	7		
<u>- 1((</u>	Schuld, And Bollowi for Sibrids to Belideritor LEAM		•		
<u>0U</u>	-OF-STATE MEDICAL PROVIDERS TO VOLUNTEER AS PART OF	THE N	(EDICA	L TEAM	1
AT	CERTAIN NYRR EVENTS, INCLUDING THE TCS NEW YORK CIT	Y MAR	ATHON.		
73204	3 11-09-17	Schedu	ile C (Form	990 or 990	D-EZ) 2017

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2017.05030 NEW YORK ROAD RUNNERS INC 16228001

NEW YORK ROAD RUNNERS INC. Schedule C (Form 990 or 990-EZ) 2017 C/O FINANCE DEPARTMENT Part IV Supplemental Information (continued)	13-2949483	Page 4
LOBBYING ACTIVITIES INCLUDED MAKING TELEPHONE CALLS, SENDIN	IG EMAILS TO,	
AND SCHEDULING MEETINGS WITH, SUCH OFFICIALS AND MEMBERS OF	THEIR	
STAFF, ATTENDING MEETINGS, HEARINGS, AND ANY RELATED PREPAR	ATION FOR	
THE FOREGOING. ACTIVITIES ALSO INCLUDED FOLLOW-UP COMMUNICA	TIONS WITH	
OFFICIALS AND STAFF.		

Schedule C (Form 990 or 990-EZ) 2017

732044 11-09-17

	HEDULE D		al Financial Statements		OMB No. 1545-0047
(Forr	n 990)	Complete if the organization of the complete is the complete if the complete is the	anization answered "Yes" on Form 990, , 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.		ZU I /
	ment of the Treasury		Attach to Form 990. 90 for instructions and the latest informatio	n	Open to Public Inspection
	Revenue Service		r identification number		
Nam		on NEW YORK ROAD RUNN C/O FINANCE DEPARTI			3-2949483
Pa	t I Organiza		d Funds or Other Similar Funds or <i>I</i>	Accounts.	Complete if the
	organizatior	n answered "Yes" on Form 990, Part IV, lin	e 6.		
			(a) Donor advised funds	(b) Funds an	d other accounts
1	Total number at en	d of year			
2		contributions to (during year)			
3	Aggregate value of	f grants from (during year)			
4		end of year			
5	-		writing that the assets held in donor advised fu		
_			exclusive legal control?		Yes No
6			dvisors in writing that grant funds can be used		
			r donor advisor, or for any other purpose confe	0	
Pa			ganization answered "Yes" on Form 990, Part		Yes No
1		ervation easements held by the organization			
•		of land for public use (e.g., recreation or e		ally important la	and area
		f natural habitat	Preservation of a certified		
		of open space			
2		• •	ied conservation contribution in the form of a	conservation e	asement on the last
	day of the tax year	• •			at the End of the Tax Year
а				2a	
b					
с	Number of conserv	vation easements on a certified historic stru	ucture included in (a)	2c	
d	Number of conserv	vation easements included in (c) acquired a	after 7/25/06, and not on a historic structure		
	listed in the Nation	al Register		2d	
3	Number of conserv	vation easements modified, transferred, rel	eased, extinguished, or terminated by the orga	anization during	g the tax
	year 🕨				
4		where property subject to conservation eas			
5		tion have a written policy regarding the per			
•	,	provide the conservation easements it			
6	Staff and volunteer	r nours devoted to monitoring, inspecting,	handling of violations, and enforcing conserva	tion easements	s during the year
7			ling of violations, and enforcing concernation.	accomente dur	ing the year
7	► \$	es incurred in monitoring, inspecting, nand	lling of violations, and enforcing conservation	easements dur	ing the year
8	· · ·	vation easement reported on line 2(d) abov	e satisfy the requirements of section 170(h)(4)	(B)(i)	
Ŭ					Yes No
9			on easements in its revenue and expense state		
		e .	ion's financial statements that describes the c		
	conservation easer			0	5
Pa	t III Organiza	tions Maintaining Collections of	Art, Historical Treasures, or Other	Similar As	sets.
	Complete if	the organization answered "Yes" on Form	990, Part IV, line 8.		
1a	If the organization	elected, as permitted under SFAS 116 (AS	C 958), not to report in its revenue statement	and balance sh	neet works of art,
	historical treasures	s, or other similar assets held for public exh	nibition, education, or research in furtherance of	of public servic	e, provide, in Part XIII,
	the text of the foot	note to its financial statements that descril	bes these items.		
b	If the organization	elected, as permitted under SFAS 116 (AS	C 958), to report in its revenue statement and	balance sheet	works of art, historical
	treasures, or other	similar assets held for public exhibition, ed	ducation, or research in furtherance of public s	ervice, provide	the following amounts
	relating to these ite			. .	
-	.,				
2			asures, or other similar assets for financial gair	n, provide	
-	-	Ints required to be reported under SFAS 1		▶ ^	
a b					
		eduction Act Notice, see the Instructions	s for Form 990		dule D (Form 990) 2017
	10-09-17			Scile	
10200	10-00-17		31		

2017.05030 NEW YORK ROAD RUNNERS INC 16228001

	NEW YOR	K ROAD RUNI	NERS	INC.							
Sche		ANCE DEPAR							49483		.ge 2
Pa	rt III Organizations Maintaining C	ollections of Ar	t, Histo	orical Tre	asures, o	r Other	Similar	Assets	continu	ed)	
3	Using the organization's acquisition, accessi	on, and other record	s, check	any of the f	ollowing that	t are a sigr	nificant us	se of its c	ollection it	ems	
	(check all that apply):										
а	Public exhibition	d			hange progra						
b	Scholarly research	e	. [] (Other							
С	Preservation for future generations										
4	Provide a description of the organization's co	•			•		• •	e in Part	XIII.		
5	During the year, did the organization solicit of		,		,				-		
De	to be sold to raise funds rather than to be ma								Yes		No
Ра	rt IV Escrow and Custodial Arran		ete if the	organizatio	n answered '	"Yes" on F	orm 990,	, Part IV,	line 9, or		
	reported an amount on Form 990, Pa						- 1 11				
па	Is the organization an agent, trustee, custodi		•					_	7.2		
	on Form 990, Part X?							∟	Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the fol	llowing ta	ible:					<u> </u>		
	5								Amount		
c	Beginning balance						1c				
	Additions during the year						1d				
e	Distributions during the year						1e				
f Oo	0						1f		Yes		No
	Did the organization include an amount on F							∟			No
_	If "Yes," explain the arrangement in Part XIII. t V Endowment Funds. Complete										
		(a) Current year		rior year	(c) Two yea			ears back	(e) Four y	are h	nack
1a	Beginning of year balance	(a) Ourient year		ioi yeai	(C) 1 WO you						
b	Contributions										
c	Net investment earnings, gains, and losses										
d	Grants or scholarships										
	O										
C											
f	and programsAdministrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the curr	ent year end balance	l a (line 1a	column (a)) held as:						
a	Board designated or guasi-endowment		%	, oolanni (a)	/ 10/0 00.						
h	Permanent endowment	%									
c c	Temporarily restricted endowment	%									
Ŭ	The percentages on lines 2a, 2b, and 2c sho										
3a	Are there endowment funds not in the posse		ation that	are held ar	nd administer	red for the	organiza	tion			
ou	by:			are note a			organiza		5	/es	No
	(i) unrelated organizations								3a(i)		
	(ii) related organizations								3a(ii)		
b	If "Yes" on line 3a(ii), are the related organiza								3b		
4	Describe in Part XIII the intended uses of the										
	rt VI Land, Buildings, and Equipm										
	Complete if the organization answere), Part IV,	line 11a. S	ee Form 990	, Part X, lir	ne 10.				
	Description of property	(a) Cost or o			or other		cumulate	d	(d) Book	value	•
		basis (investr		. ,	(other)	. ,	reciation	-	(1) 2001	, alore	
1 a	Land										
b	Buildings	1	880.	1,60	6,570.	1,6	06,57	/0.	462	,88	30.
	Leasehold improvements		_		5,657.		84,11		2,421	-	
d	Equipment			-	0,999.	13,2			<u>3,335</u>	-	
e				-	1,062.		73,90		2,527	-	
-	I. Add lines 1a through 1e. (Column (d) must e		X colum		-				8,747		
		gaar onn 000, i alt.							D (Form		

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	- 21°			
C/0	FINAL	ICE D	EPARTMEN'	г
NEW	YORK	ROAD	RUNNERS	INC.

Schedul	e D (Form 990) 2017	C/O FINANCE	DEPARTMENT	r			13-2949483	Page 3
Part V	/II Investments - C	Other Securities.						
		nization answered "Yes"	on Form 990, Part IV	, line 11b.	See Form 990, P	art X, line 12.		
(a) Des	scription of security or catego	NY (including name of security)	(b) Book value		(c) Method of va	luation: Cost or	r end-of-year market v	alue
(1) Fina	ncial derivatives							
	sely-held equity interests							
(3) Oth								
(A)	ALTERNATIVE I	NVESTMENTS	5,601,1	72.	END-OF-YE	CAR MARK	ET VALUE	
(B)								
(C)								
(D)								
(E)								
(F)								
(G)								
(H)								
	ol. (b) must equal Form 990,		5,601,1	72.				
Part	/III Investments - P	•						
		nization answered "Yes"						
	(a) Description of in	nvestment	(b) Book value		(c) Method of va	luation: Cost or	r end-of-year market v	alue
(1)								
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
	ol. (b) must equal Form 990,	Part X, col. (B) line 13.) 🕨						
Part I					~ ~ ~ ~ ~			
	Complete if the orga	nization answered "Yes"	on Form 990, Part IV Description	, line 11d.	See Form 990, P	art X, line 15.	(b) Book va	
		(a)	Description					
(1)								
(2)								
(3)								
<u>(4)</u>								
(5)								
(6)								
<u>(7)</u>								
(8)								
<u>(9)</u>							•	
Part)	Column (b) must equal For Column (b) must equal For		<u>9 15.)</u>					
i art /		nization answered "Yes"	on Form 000 Part IV	lino 11o c	or 11f Soo Form	000 Part V lin	o 25	
		scription of liability	011F0111 990, Fait IV		ook value	550, Fart A, III	6 2J.	
<u>1.</u>				(6) 0				
	Federal income taxes							
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9) Tatal (6								
	Column (b) must equal For	, , , , ,	,		and a straight of the straight	an alal at stars	4 - 4 - 4 - 4 - 4 - 4 - 4 -	
	ility for uncertain tax posi							
orga	anization's liability for unce	ertain tax positions under	FIN 48 (ASC 740). C	neck here	IT THE TEXT OF THE	rootnote has be	een provided in Part X	(III <u>X</u>

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Schedule D (Form 990) 2017

.	dule D (Form 990) 2017 C/O FINANCE DEPARTMENT			12	2949483 Page 4
	Adule D (Form 990) 2017 C/O FINANCE DEPARTMENT	nte Wit	h Dovonuo nor Do		
Fa			n nevenue per ne	ium.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a				100,284,449.
1				1	100,204,449.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		1 7 7 7 5 3 0		
a	Net unrealized gains (losses) on investments		<u>1,727,530</u> 1,349,510.	-	
b	Donated services and use of facilities		1,349,510.	-	
С	Recoveries of prior year grants		E00 004	-	
d	Other (Describe in Part XIII.)		599,024.		2 676 064
е	Add lines 2a through 2d			2e	3,676,064.
3	Subtract line 2e from line 1			3	96,608,385.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 1	194 005		
а	Investment expenses not included on Form 990, Part VIII, line 7b		174,225.	-	
b		4b	1,792,774.		1 0 0 0 0 0 0
С	Add lines 4a and 4b			4c	1,966,999.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.)			5	98,575,384.
Pa	rt XII Reconciliation of Expenses per Audited Financial Stateme		th Expenses per i	Retur	n.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a				
1	Total expenses and losses per audited financial statements			1	95,471,472.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 1	1 0 4 0 5 4 0		
а	Donated services and use of facilities		1,349,510.	_	
b	Prior year adjustments			_	
С	Other losses			_	
d	Other (Describe in Part XIII.)	2d	599,024.		
е	Add lines 2a through 2d			2e	1,948,534.
3	Subtract line 2e from line 1			3	93,522,938.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	. 4a	174,225.		
b	Other (Describe in Part XIII.)	4b	1,792,774.		
с	Add lines 4a and 4b			4c	1,966,999.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	95,489,937.
Pa	rt XIII Supplemental Information.				

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

PART X, LINE 2:

MANAGEMENT RECOGNIZES THE EFFECT OF INCOME TAX POSITIONS ONLY IF THOSE

POSITIONS ARE MORE LIKELY THAN NOT TO BE SUSTAINED. MANAGEMENT HAS

DETERMINED THAT NYRR HAD NO UNCERTAIN TAX POSITIONS THAT WOULD REQUIRE

FINANCIAL STATEMENT RECOGNITION OR DISCLOSURE. NYRR IS NO LONGER SUBJECT

TO EXAMINATIONS BY THE APPLICABLE JURISDICTIONS FOR PERIODS PRIOR TO MARCH

31, 2015.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

SPECIAL EVENTS DIRECT EXPENSES REPORTED ON PART VIII, LINE

8C:		271,406.
RENTAL EXPENSES F	EPORTED ON PART VIII, LINE 6	B: 327,618.
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	34	

NEW YORK ROAD RUNNERS INC. Schedule D (Form 990) 2017 C/O FINANCE DEPARTMENT Part XIII Supplemental Information (continued)	13-2949483 Page 5
TOTAL TO SCHEDULE D, PART XI, LINE 2D	599,024.
PART XI, LINE 4B - OTHER ADJUSTMENTS:	
MEMBERSHIP DUE EXPENSES NETTED AGAINST REVENUE:	129,045.
CREDIT CARD PROCESSING FEE NETTED AGAINST REVENUE:	1,163,729.
REVERSAL OF RACE COUPON LIABILITY:	500,000.
TOTAL TO SCHEDULE D, PART XI, LINE 4B	1,792,774.
PART XII, LINE 2D - OTHER ADJUSTMENTS:	
SPECIAL EVENTS DIRECT EXPENSES REPORTED ON PART VIII, LINE	
<u>8C:</u>	271,406.
RENTAL EXPENSES REPORTED ON PART VIII, LINE 6B:	327,618.
TOTAL TO SCHEDULE D, PART XII, LINE 2D	599,024.
PART XII, LINE 4B - OTHER ADJUSTMENTS:	
MEMBERSHIP DUE EXPENSES NETTED AGAINST REVENUE:	129,045.
CREDIT CARD PROCESSING FEE NETTED AGAINST REVENUE:	1,163,729.
REVERSAL OF RACE COUPON LIABILITY:	500,000.
TOTAL TO SCHEDULE D, PART XII, LINE 4B	1,792,774.
PART VI, LAND, BUILDINGS, AND EQUIPMENT:	
PART VI, LINE 1D INCLUDES FURNITURE, FIXTURES, HARDWARE AND	SOFTWARE.
PART VI, LINE 1E INCLUDES WORK IN PROGRESS AND AUTOMOBILES.	
732055 10-09-17	Schedule D (Form 990) 2017

SC			Stateme	nt of Act	ivities Outside the Un	ited Sta	ites	OME	3 No. 1545-0047
(Fo	orm 990)		Complete if	the organizatio	n answered "Yes" on Form 990, Part	IV, line 14b, 1	5, or 16.	- 2	PO17
	rtment of the Treasury				Attach to Form 990.	information			en to Public spection
	nal Revenue Service ne of the organizatio	n		www.irs.gov/Fu	rm990 for instructions and the latest	information.	Employer id		ation number
	W YORK ROA		UNNERS IN	NC.					
	O FINANCE	DEP	ARTMENT				13-294	9483	3
Pa	Form 990,			ctivities Out	side the United States. Comple	ete if the organ	ization answer	ed "Ye	es" on
1			•	n maintain record	ds to substantiate the amount of its gra	nts and other	assistance.		
	-		•		the selection criteria used to award the		-	<u> </u>	res 🗌 No
2	For grantmakers United States.	. Desc	ribe in Part V the	e organization's	procedures for monitoring the use of its	grants and ot	her assistance	outsid	le the
3		ion. (Tł			an be duplicated if additional space is n				
	(a) Region		(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, pro- gram services, investments, grants to recipients located in the region)	is a pro describe	vity listed in (d) gram service, specific type (s) in the region		(f) Total expenditures for and investments in the region
	TRAL AMERICA AN	ID							
THE	CARIBBEAN				INVESTMENTS				4,922,935.
	Sub-total		0	0					4,922,935.
k	Total from continu		0	0					0.
,	sheets to Part I Totals (add lines :		0	0					υ.
,	and 3b)	<u> </u>	0	0					4,922,935.

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

732071 10-06-17

Schedule F (Form 990) 2017

NEW YORK ROAD RUNNERS INC. C/O FINANCE DEPARTMENT

Schedule F (Form 990) 2017

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

1 (g) Amount of (h) Description (i) Method of (b) IRS code section (d) Purpose of (f) Manner of (e) Amount (a) Name of organization (c) Region valuation (book, FMV, noncash of noncash and EIN (if applicable) grant of cash grant cash disbursement assistance assistance appraisal, other) 2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

3 Enter total number of other organizations or entities

Schedule F (Form 990) 2017

13-2949483

Page 2

NEW YORK ROAD RUNNERS INC. C/O FINANCE DEPARTMENT

Schedule F (Form 990) 2017

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

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

Schedule F (Form 990) 2017

13-2949483

Page 3

NEW YORK ROAD RUNNERS INC.

C/O FINANCE DEPARTMENT

13-2949483	Page 4
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Sched	le F (Form 990) 2017 C/O FINANCE DEPARTMENT	13-2949483	Page 4
Part	IV Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	X Yes	No No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? <i>If</i> "Yes," <i>the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471)</i>	X Yes	No No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? <i>If</i> "Yes," <i>the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)</i>	X Yes	No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? <i>If</i> "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? <i>If</i> "Yes," <i>the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)</i>	Yes	X No

Schedule F (Form 990) 2017

732074 10-06-17

NEW	YORK	ROAD	RUNNERS	INC.
C/0	FINAL	NCE D	EPARTMEN	Г

Schedule F (Form 990) 2017 C/O FINA

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

PART I, LINE 3:

THE ACTIVITIES REPORTED IN PART I, LINE 3 ARE ACCOUNTED FOR USING THE

ACCRUAL METHOD OF ACCOUNTING IN CONFORMITY WITH AUDITED FINANCIAL

STATEMENTS.

PART IV, FOREIGN FORMS, LINE 1:

THE ORGANIZATION IS REQUIRED TO FILE FORM 926 BECAUSE IT MEETS THE

APPLICABLE FILING THRESHOLD REQUIREMENT.

PART IV, FOREIGN FORMS, LINE 3:

THE ORGANIZATION IS NOT REQUIRED TO FILE FORM 5471 BECAUSE IT DOES NOT

MEET THE APPLICABLE THRESHOLD OWNERSHIP OR OTHER FILING REQUIREMENTS.

PART IV, FOREIGN FORMS, LINE 4:

THE ORGANIZATION IS NOT REQUIRED TO FILE FORM 8621 BECAUSE IT DOES NOT

MEET THE APPLICABLE THRESHOLD OWNERSHIP OR OTHER FILING REQUIREMENTS.

732075 10-06-17

SCHEDULE G	Suppleme	ntal Information Regarding	Fund	raisi	ng or Gaming A	ctivities	OMB No. 1545-0047
(Form 990 or 990-EZ)	Complete if the	e organization answered "Yes" on	Form	990, P	Part IV, line 17, 18, o		2017
Department of the Treasury Internal Revenue Service	C	organization entered more than \$15 ► Attach to Form 990 ► Go to <u>www.irs.gov/Form990</u>	or Fo	rm 99	0-EZ.		Open to Public Inspection
Name of the organization		K ROAD RUNNERS INC					identification number
Part I Fundraisi		ANCE DEPARTMENT Complete if the organization answe	red "Y	es" or	n Form 990, Part IV, I	13-29 ine 17. Form 990	
required to c	complete this part	t.					
a Mail solicitati b Internet and e c Phone solicita d In-person soli 2 a Did the organization	ons email solicitations ations citations n have a written o		ion of ion of fundra (includ	non-g gover iising (overnment grants nment grants events ficers, directors, trus		Yes 🗌 No
b If "Yes," list the 10 compensated at lea	0	viduals or entities (fundraisers) pursua	ant to a	agreer	ments under which th	ne fundraiser is t	o be
(i) Name and address or entity (fund	of individual	(ii) Activity	(iii) fundr have ci or con contribu	aiser ustody trol of	(iv) Gross receipts from activity	(v) Amount pa to (or retained fundraiser listed in col. (by) to (or retained by)
			Yes	No			<u>,</u>
Total 3 List all states in which	ch the organizatio	n is registered or licensed to solicit c	ontrib	▶ utions	or has been notified	it is exempt fror	n registration
or licensing.						-	
LHA For Paperwork Re	duction Act Noti	ce, see the Instructions for Form 9	90 or	990-E	Z. 5	Schedule G (For	rm 990 or 990-EZ) 2017

NEW YORK ROAD RUNNERS INC. Schedule G (Form 990 or 990-EZ) 2017 C/O FINANCE DEPARTMENT 13-2949483 Page 2 Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other events (d) Total events NIGHT OF JINGLE BELL NONE (add col. (a) through CHAMPIONS JOG col. (c)) (event type) (total number) (event type) Revenue 738,737. 301,910. 1,040,647. Gross receipts 1 231,829. 2 Less: Contributions 579,910. 811,739. 228,908. Gross income (line 1 minus line 2) 158,827. 70,081. 3 4 Cash prizes 5 Noncash prizes Direct Expense: 17,727. 17,727. Rent/facility costs 6 144,644. 10,917. 155,561. 7 Food and beverages 5,115. 5,115. Entertainment 8 38,954. 93,003. 54,049. 9 Other direct expenses 271,406. 10 Direct expense summary. Add lines 4 through 9 in column (d) ► -42,498. 11 Net income summary. Subtract line 10 from line 3, column (d) Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add (c) Other gaming (a) Bingo Revenue bingo/progressive bingo col. (a) through col. (c)) Gross revenue 1 2 Cash prizes Direct Expenses 3 Noncash prizes Rent/facility costs 4 Other direct expenses 5 Yes % Yes % Yes % 6 Volunteer labor No No No 7 Direct expense summary. Add lines 2 through 5 in column (d) ► 8 Net gaming income summary. Subtract line 7 from line 1, column (d) 9 Enter the state(s) in which the organization conducts gaming activities: a Is the organization licensed to conduct gaming activities in each of these states? Yes No **b** If "No," explain: 10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No **b** If "Yes," explain:

732082 09-13-17

Schedule G (Form 990 or 990-EZ) 2017

NEW YORK ROAD RUNNERS INC.	12 2040402
Schedule G (Form 990 or 990-EZ) 2017 C/O FINANCE DEPARTMENT	13-2949483 Page 3
11 Does the organization conduct gaming activities with nonmembers?	
12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity for to administer charitable gaming?	
13 Indicate the percentage of gaming activity conducted in:	
a The organization's facility	
b An outside facility	
14 Enter the name and address of the person who prepares the organization's gaming/special events books a	
Name	
Address 🕨	
15a Does the organization have a contract with a third party from whom the organization receives gaming rever	nue? Yes No
b If "Yes," enter the amount of gaming revenue received by the organization > \$ and	the amount
of gaming revenue retained by the third party $ ightarrow$ \$	
c If "Yes," enter name and address of the third party:	
Name	
Address ►	
16 Gaming manager information:	
Name	
Gaming manager compensation 🕨 💲	
Description of services provided 🕨	
Director/officer Employee Independent contractor	
17 Mandatory distributions:	
a Is the organization required under state law to make charitable distributions from the gaming proceeds to	
retain the state gaming license?	Yes No
b Enter the amount of distributions required under state law to be distributed to other exempt organizations of	or spent in the
organization's own exempt activities during the tax year 🕨 💲	
Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and	(v); and Part III, lines 9, 9b, 10b, 15b,
15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	

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732083 09-13-17

2017.05030 NEW YORK ROAD RUNNERS INC 16228001

	NEW YORK ROAD RUNNERS INC.	
Schedule G (Form 990 or 990-EZ)	C/O FINANCE DEPARTMENT	13
Part IV Supplemental In	formation (continued)	

Schedule G (Form 990 or 990-EZ)

732084 04-01-17

SCHEDULE I		G	arants and Oth	er Assistan	ce to Organ	izations,			OMB No. 15	545-0047
(Form 990)			vernments, an ete if the organization						20 ⁻	17
Department of the Treasury		Compi		Attach to For	-	rt iv, inte z i or zz.			Open to	
Internal Revenue Service			Go to www.ir	s.gov/Form990 fo	r the latest inform	nation.			Inspec	ction
Name of the organization	on NEW YORK C/O FINAN							Employer ide	entificatio L3-294	
Part I General In	formation on Grants a									
1 Does the organiz	ation maintain records t	o substantiate the	amount of the grants	or assistance. the	arantees' eligibility	for the grants or assis	stance, and the selecti	on		
	ward the grants or assis							_	∑ Yes	No No
2 Describe in Part I	IV the organization's pro	ocedures for monit	oring the use of grant	funds in the United	States.					
Part II Grants and	d Other Assistance to	Domestic Organiz	zations and Domestic	Governments. C	complete if the org	anization answered "Y	es" on Form 990, Part	IV, line 21, for	r any	
recipient th	nat received more than \$	5,000. Part II can	be duplicated if addition	onal space is need	ed.			-		
	dress of organization vernment	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance		rpose of g assistance	
ARMORY FOUNDATION										
216 FORT WASHINGTO	ON AVENUE							SPONSOR TR	ACK AND	FIELD
NEW YORK, NY 10032	2-3704	13-3680286	501(C)(3)	465,000.	0.			EVENTS		
CENTRAL PARK CONSI	ERVANCY INC.									
14 EAST 60TH STREE	ET							SUPPORT CE	NTRAL PA	ARK
NEW YORK, NY 10022	2	13-3022855	501(C)(3)	145,000.	0.			PROGRAMS A	ND ACTIV	/ITIES
CITY PARKS FOUNDAT 830 FIFTH AVENUE	TION							ENRICH AND AND COMMUN		
NEW YORK, NY 1006	5	13-3561657	501(C)(3)	65,000.	0.			ALL FIVE B		
NEW TORK, NI 1008	5	13-3301037	501(0)(3)	85,000.	0.			ALL FIVE D	OROUGHS	OF NIC
RANDALL'S ISLAND H	PARK ALLIANCE									
INC 24 WEST 618	,							RANDALLS I	SLAND PA	ARK
FLOOR - NEW YORK,	,	13-3787630	501(C)(3)	10,000.	0.			ALLIANCE 2	018 GALA	A
·				,						
THE TRUST FOR PUB	LIC LAND									
101 MONTGOMERY STR	REET, SUITE 900							CREATE PLA	YGROUNDS	5 FOR
SAN FRANCISCO, CA	94104	23-7222333	501(C)(3)	500,000.	0.			NYC CHILDR	EN	
PROSPECT PARK ALL	,									
95 PROSPECT PARK V								PROSPECT P		IANCE
BROOKLYN, NY 11215		11-2843763		7,500.	0.			GALA BENEF	IT	1.0
	er of section 501(c)(3) a			e line 1 table				🕨 _		12.
	er of other organizations							·····		. 0
LHA For Paperwork	Reduction Act Notice,	, see the Instructi	ons for Form 990.		_			Schedule	e I (Form §	990) (2017)

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

NEW YORK ROAD RUNNERS INC.

Part II Continuation of Grants and Other A	Assistance to Gov	vernments and Organ	nizations in the Un	ited States (Sche	edule I (Form 990), Pa	urt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HE GREATER HARLEM CHAMBER OF							
COMMERCE COMMUNITY FUND - 200A							
EST 136TH STREET - NEW YORK, NY							
.0030	80-0790349	501(C)(3)	28,000.	0.			SPONSOR RACE EVENTS
							CITYWIDE RECOGNITION
UND FOR PUBLIC SCHOOLS, INC.							AWARD CELEBRATING
2 CHAMBERS STREET							EDUCATIONS - PHYSICAL
IEW YORK, NY 10007	11-2656137	501(C)(3)	7,000.	0.			EDUCATION RECIPIENT
,			,				YEARLY SPONSORSHIP OF T
HE ASPEN INSTITUTE, INC							PROJECT PLAY SHARED GOAD
NE DUPONT CIRCLE NW NO 700							INITIATIVE ADVISORY
ASHINGTON, DC 20036	84-0399006	501(C)(3)	25,000.	0.			GROUP. MULTIYEAR EFFORT
,			, -				
MOMEN IN SPORTS AND EVENTS INC.							
44 FIFTH AVENUE, SUITE 2087							WISE WOMEN OF THE YEAR
IEW YORK, NY 10001	13-4119533	501(C)(3)	9,000.	0.			LUNCHEON
	10 111000		,				
AVE THE CHILDREN FEDERATION, INC.							
01 KINGS HWY EAST, SUITE 400							
AIRFIELD, CT 06825	06-0726487	501(C)(3)	10,000.	0.			DISASTER RELIEF WORK
YC & COMPANY FOUNDATION INC.							
10 SEVENTH AVE, 3RD FL							VISIONARIES & VOICE GAL
IEW YORK, NY 10019	13-4020446	501(C)(3)	6,000.	0.			TICKETS
	13 1020110	501(0)(5)	0,000.	••			
HE TRUST FOR PUBLIC LAND							
.01 MONTGOMERY STREET, SUITE 900							GALA IN SUPPORT OF THE
CAN FRANCISCO, CA 94104	23-7222333	501(C)(3)	12,500.	0.			TRUST FOR PUBLIC LAND
AN FRANCISCO, CA 94104	23-7222333	501(0)(3)	12,500.	0.			IRUSI FOR FUBLIC LAND

Schedule I (Form 990)

NEW YORK ROAD RUNNERS INC.

Schedule I (Form 990) (2017)

7) C/O FINANCE DEPARTMENT

13-2949483

Page 2

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
SCHOLARSHIPS	183	180,262.	0.		
Dent IV Complemental Information Describe the information					

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

PART I, LINE 2:

THE TRUST FOR PUBLIC LAND IS REQUIRED TO SUBMIT TO NYRR QUARTERLY

NARRATIVE, FINANCIAL PROGRESS REPORTS AND ANNUALLY REPORT FOR THE SPECIFIC

PLAYGROUNDS COVERED BY THE GRANT.

A TOTAL OF \$98,111.95 INCLUDES \$89,104.30 TUITION GRANTS ISSUED TO 63

PARTICIPANTS AND \$9,007.65 FOR RELATED SCHOOL EXPENSES FOR 8 PARTICIPANTS

IN THE RUN FOR THE FUTURE PROGRAM. RUN FOR THE FUTURE PARTICIPANTS ARE

ELIGIBLE FOR THIS SCHOLARSHIP UPON SUCCESSFUL COMPLETION OF PROGRAM

 Schedule ((Form 990)
 C/O FINANCE DEPARTMENT
 13-2949483 Page 2

 Part IV
 Supplemental Information

 REQUIREMENTS (80%+ ATTENDANCE AT PRACTICES AND A 5K RACE FINISHER). THE

 INDIVIDUAL IS REQUIRED TO SUBMIT A BILL FROM THEIR COLLEGE OF CHOICE

 Showing the BALANCE due in order for us to award the scholarship.

 RECIPIENTS ARE NOT REQUIRED TO REPORT ON THEIR USE OF THE GRANT, SINCE

 PAYMENT IS ISSUED DIRECTLY TO THE INSTITUTION AND RELATED SCHOOL EXPENSES

 ARE PURCHASED DIRECTLY AND/OR REQUIRE RECEIPTS FOR REIMBURSEMENT.

NEW YORK ROAD RUNNERS INC.

ADDITIONALLY, 100 PARTICIPANTS WERE ABLE TO ATTEND THE RUNNING SCHOOL, OPERATED OUT OF CAMP CHIPINAW IN CATSKILLS MOUNTAIN, NY IN AUGUST 2017. A TOTAL OF \$70,000 WAS GRANTED TO THE RUNNING SCHOOL TO COVER THE PARTICIPANTS' TUITION AND TRAVEL EXPENSES FOR THE CAMP. THE ONE-WEEK CAMP FOCUSES ON DEVELOPMENTALLY APPROPRIATE AEROBIC, STRENGTH AND FLEXIBILITY TRAINING, AS WELL AS PROVIDING ATHLETES WITH NUTRITION AND WELLNESS INFORMATION AND OVERALL BEST PRACTICES AS RUNNING ATHLETES.

FINALLY, 18 PARTICIPANTS WERE ABLE TO ATTEND THE NEW PALTZ RUNNING CAMP, OPERATED IN NEW PALTZ, NY IN JULY 2017. A TOTAL OF \$12,150 WAS GRANTED TO THE RUNNING SCHOOL TO COVER THE PARTICIPANTS' TUITION AND TRAVEL EXPENSES FOR THE CAMP. NORC STRIVES TO STRIKE A BALANCE BETWEEN THE HARD WORK REQUIRED TO EXECEL IN RUNNING AND SCHOOL WITH ACTIVITIES THAT BOTH EDUCATE AND MOTIVATE.

PART II, LINE 1, COLUMN (H):

NAME OF ORGANIZATION OR GOVERNMENT: THE ASPEN INSTITUTE, INC

(H) PURPOSE OF GRANT OR ASSISTANCE: YEARLY SPONSORSHIP OF THE PROJECT

PLAY SHARED GOALS INITIATIVE ADVISORY GROUP. MULTIYEAR EFFORT BY LEADING

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ORGANIZIATIONS TO GROW NATIONAL SPORT PARTICIPATION RATES AND RELATED

METRICS AMONG YOUTHS.

732291 04-01-17 Schedule I (Form 990)

SCI	EDULE J	I	OMB No.	545-004	47
	rm 990) For certain Officers, Directors, Trustees, Key Employees, and Highest			4 7	
(10)	Compensated Employees		- 20	٦/	/
	Complete if the organization answered "Yes" on Form 990, Part IV, line 23.		Open to		ic
	ment of the Treasury ► Attach to Form 990. I Revenue Service ► Go to www.irs.gov/Form990 for instructions and the latest information.		Inspe		
		Employer ide	entificatio	on nur	mber
	C/O FINANCE DEPARTMENT	13-29			
Pa				-	
				Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 9	90		100	
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.	,			
	X First-class or charter travel	al use			
	Travel for companions Payments for business use of personal res				
	Tax indemnification and gross-up payments Health or social club dues or initiation fees				
	Discretionary spending account Personal services (such as, maid, chauffeu				
		, 0101/			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or				
			1b	х	
	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,				
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?		2	Х	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organizati	ion's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organizatio				
	establish compensation of the CEO/Executive Director, but explain in Part III.				
	X Compensation committee Written employment contract				
	Independent compensation consultant				
	X Form 990 of other organizations X Approval by the board or compensation co	ommittee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing				
	organization or a related organization:				
а	Receive a severance payment or change-of-control payment?		4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?		. 4b		X
с	Participate in, or receive payment from, an equity-based compensation arrangement?		. 4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.				
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.				
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	1			
	contingent on the revenues of:				
а	The organization?		5a		X
b	Any related organization?		5b		X
	If "Yes" on line 5a or 5b, describe in Part III.				
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	1			
	contingent on the net earnings of:				
а	The organization?		6a		<u> </u>
b	Any related organization?		6b		x
	If "Yes" on line 6a or 6b, describe in Part III.				
	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments				
	not described on lines 5 and 6? If "Yes," describe in Part III		. 7	Х	<u> </u>
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the	9			
			. 8		X X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in				
	Regulations section 53.4958-6(c)?		9		
LHA	For Paperwork Reduction Act Notice, see the Instructions for Form 990.	Schedu	le J (Forn	n 990)	2017

732111 10-17-17

NEW YORK ROAD RUNNERS INC. C/O FINANCE DEPARTMENT

Schedule J (Form 990) 2017

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.

13 - 2949483

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 and/or 1099-MI	SC compensation	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns	(F) Compensation in column (B)	
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	Denents	(B)(i)-(D)	reported as deferred on prior Form 990
(1) MICHAEL CAPIRASO	(i)	428,629.	50,000.	566.	27,900.	1,428.	508,523.	0.
PRESIDENT/CEO/BOARD MEMBER	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) PETER CIACCIA	(i)	436,539.	50,000.	566.	27,900.	928.	515,933.	0.
PRESIDENT/EVENT & RD/BOARD MEMBER	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) JAMES GROOMS	(i)	245,830.	17,600.	381.	14,722.	8,023.	286,556.	0.
SVP OF LEGAL/ASST. SECRETARY	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) LINDA FRANKEN	(i)	256,505.	16,200.	243.	15,211.	1,199.	289,358.	0.
SVP OF FINANCE/ASST. TREASURER	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) JAMES HEIM	(i)	198,181.	14,550.	347.	12,189.	20,754.	246,021.	0.
SVP/TECH. DIRECTOR EV DEV & OPS	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) VERONICA O'SHEA TUCKER	(i)	232,515.	15,400.	358.	13,427.	7,999.	269,699.	0.
VP MARKETING & DIGITAL	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) SARAH CUMMINS	(i)	215,741.	15,400.	344.	12,882.	12,955.	257,322.	0.
VP BUS DEV/STRATEGIC PARTNERSHIPS	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) JEFFERY CARNEVALE	(i)	200,543.	11,850.	299.	12,050.	13,676.	238,418.	0.
VP INFORMATION TECHNOLOGY	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) CHRISTOPHER WEILLER	(i)	200,140.	14,650.	362.	12,336.	19,299.	246,787.	0.
VP MEDIA, PR & PRO ATHLETICS	(ii)	0.	0.	0.	0.	0.	0.	0.
(10) MICHAEL RODGERS	(i)	201,151.	7,950.	299.	12,010.	7,950.	229,360.	0.
VP DEVELOPMENT & PHILANTHROPY	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Schedule J (Form 990) 2017

Page 2

Schedule J (Form 990) 2017

Part III Supplemental Information

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

PART I, LINE 1A:

THE ORGANIZATION REIMBURSED THE FOLLOWING OFFICERS, VP AND BOARD MEMBERS

FOR BUSINESS/BUSINESS FIRST CLASS TRAVEL FOR TRAVEL TO WORLD MARATHON

MAJORS:

-PETER CIACCIA

-GEORGE HIRSCH

-JAMES HEIM

-CHRIS WEILLER

PART I, LINE 1B:

THE ORGANIZATION FOLLOWS A WRITTEN POLICY REGARDING REIMBURSEMENT OR

PAYMENT FOR ALL EXPENSES DESCRIBED IN PART I, LINE 1A.

PART I, LINE 7:

THE FOLLOWING PERSONS LISTED IN FORM 990, PART VII, SECTION A, LINE 1A

RECEIVED NON-FIXED PAYMENTS IN THE FORM OF BONUSES AS SET FORTH BELOW. IN

ALL CASES, SUCH BONUSES WERE DETERMINED BY THE HR/COMPENSATION COMMITTEE OF

THE BOARD, BASED ON EVALUATIONS, PERFORMANCE REPORTS, AND COMPARABILITY

Schedule J (Form 990) 2017

Schedule J (Form 990) 2017

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.

DATA, AND THE ORGANIZATION'S FINANCIAL RESULTS FOR THE YEAR. THE

DETERMINATIONS OF THE HR/COMPENSATION COMMITTEE WERE PRESENTED TO THE BOARD

OF DIRECTORS FOR APPROVAL, FOLLOWING DELIBERATIONS WHICH EXCLUDED ANY

AFFECTED OFFICER/EMPLOYEE.

PETER CIACCIA	\$ 50,000
NTOUVEL CADIDAGO	¢ EQ 000
MICHAEL CAPIRASO	\$ 50,000
LINDA FRANKEN	\$ 16,200
JAMES GROOMS	\$ 17,600
JAMES HEIM	\$ 14,550
JEFFERY CARNEVALE	\$ 11,850
SARAH CUMMINS	\$ 15,400
VERONICA O'SHEA TUCKER	\$ 15,400
MICHAEL RODGERS	\$ 7,950
CHRISTOPHER WEILLER	\$ 14,650

Department of the Treasury		Noncash Contributions						OMB No. 1545-0047			
		Attach to Form 990	rganizations answered "Yes" on Form 990, Part IV, lines 29 or 30. 90. v/Form990 for the latest information.					2017 Open To Public Inspection			
Name	e of the organization					E	mployer iden	tificatio	on nur	nber	
		C/O FINANCE					13-2				
Par	rt I Types of										
	·		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	nor	(d) Method of de ncash contribu	etermin	0	 s	
1	Art - Works of art				· • • • • • • • • • • • • • • • • • • •						
2		sures									
3		rests									
4		tions									
5		ehold goods	X		6,728,354.	COST					
6		icles									
7											
8		у									
9		/ traded									
10		held stock									
11	Securities - Partner										
12		aneous									
13	Qualified conservat										
	Historic structures										
14	Qualified conservat	tion contribution - Other									
15	Real estate - Reside										
16	Real estate - Comn	nercial									
17											
18											
19			X	7	1,432,603.	COST					
20		supplies									
21											
22	Historical artifacts										
23		າຣ									
24	Archeological artifa										
25	· · · —	WARDS)	X	2	86,445.						
26	· · · ·	AGGAGE TRANS	X	1	25,121.						
27	· · · ·	JEL)	X	1	24,700.						
28	Other 🕨 (EV	VENT TICKETS)	X	4	20,950.	COST					
29	Number of Forms 8	3283 received by the organiz	zation during	g the tax year for co	ontributions				_		
	for which the organ	nization completed Form 82	83, Part IV, I	Donee Acknowledg	ement 29				0		
									Yes	No	
30a			•		orted in Part I, lines 1 throug	•	at it				
			`		which isn't required to be us					v	
		or the entire holding period	?					30a		X	
		he arrangement in Part II.		auiroo the median		tions			v		
31	-		•	-	of any nonstandard contribu	uons?		31	X		
	32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?							32a		x	
	If "Yes," describe in										
33		didn't report an amount in c	olumn (c) fo	r a type of property	for which column (a) is che	cked,					
	describe in Part II.		4h - 1.				0.1	A /F	. 000	00.17	
LHA	For Paperwork I	Reduction Act Notice, see		uons for Form 990			Schedule N	n (Forr	n 990)	2017	

732141 09-07-17

Schedule M (Form 990) 2017 Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE M, PART I, COLUMN (B):

Part II

THE ORGANIZATION IS REPORTING THE NUMBER OF CONTRIBUTORS.

Schedule M (Form 990) 2017

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SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Information to Form 990 or 990-EZ OMB №. 1545-0047 Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information. OMB №. 1545-0047 Attach to Form 990 or 990-EZ. Open to Public
Inspection Go to www.irs.gov/Form990 for the latest information. Open to Public
Inspection

NEW YORK ROAD RUNNERS INC. C/O FINANCE DEPARTMENT Employer identification number

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

WELL-BEING OF ADULTS AND KIDS OF ALL ABILITIES THROUGH YEAR-ROUND

EVENTS AND FREE YOUTH AND COMMUNITY PROGRAMS AND INITIATIVES SERVING

NEARLY 600,000 INDIVIDUALS IN NEW YORK CITY, THE NATION AND AROUND THE WORLD.

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

OTHER PROGRAM SERVICES INCLUDE PUBLICATIONS, CLASSES AND MERCHANDISING.

EXPENSES \$ 1,016,260. INCLUDING GRANTS OF \$ 0. REVENUE \$ 1,283,627.

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

THE FORM 990 IS DRAFTED BY INDEPENDENT ACCOUNTANTS BASED ON INFORMATION PROVIDED BY THE ORGANIZATION. THE DRAFT FORM 990 IS PROVIDED TO THE ORGANIZATION'S FINANCE AND LEGAL DEPARTMENTS FOR REVIEW, AND COMMENTS ARE DISCUSSED WITH THE ACCOUNTANTS AND APPROPRIATE REVISIONS ARE MADE TO THE FORM 990. A COPY OF THE FORM 990 IS PROVIDED TO THE PRESIDENT/CEO FOR REVIEW. AFTER ALL INTERNAL MANAGEMENT REVIEWS, THE FORM 990 IS PROVIDED TO MEMBERS OF THE AUDIT COMMITTEE, WHICH HAS BEEN DESIGNATED BY THE BOARD OF DIRECTORS WITH THE RESPONSIBILITY FOR REVIEWING THE COMPLETED FORM 990 PRIOR TO IT BEING MADE AVAILABLE TO THE BOARD OF DIRECTORS. AUDIT COMMITTEE MEMBERS PARTICIPATE IN A MEETING OR CONFERENCE CALL WITH REPRESENTATIVES OF THE LEGAL AND FINANCE DEPARTMENTS AND THE INDEPENDENT ACCOUNTANTS TO DISCUSS THE CONTENT OF THE FORM 990. BEFORE BEING FILED, A COPY OF THE APPROVED FORM 990 IS PROVIDED ELECTRONICALLY TO THE ENTIRE BOARD OF DIRECTORS.

55 7.05030 NEW YORK FORM 990, PART I, LINE 5 AND PART V, LINE 2A:

TOTAL INDIVIDUALS EMPLOYED INCLUDE BOTH FULL-TIME AND PART-TIME

EMPLOYEES.

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

ON AN ANNUAL BASIS, DIRECTORS, OFFICERS AND MEMBERS OF SENIOR MANAGEMENT DEPARTMENT HEADS AND DEPARTMENT DIRECTORS RECEIVE A COPY OF THE ORGANIZATION'S CONFLICT OF INTEREST POLICY, SIGN A DECLARATION TO ADHERE TO THE POLICY, AND COMPLETE A QUESTIONNAIRE SEEKING DISCLOSURE OF POTENTIAL CONFLICTS. THE POLICY REQUIRES THE FILING OF AMENDED DISCLOSURE IN THE EVENT OF ANY CHANGE IN CIRCUMSTANCES. INITIAL DETERMINATIONS AS TO WHETHER CONFLICTS EXIST AND, IF SO, WHAT ACTIONS SHOULD BE TAKEN, ARE MADE BY THE GENERAL COUNSEL IN CONSULTATION WITH THE PRESIDENT/CEO, OR THE AUDIT COMMITTEE AND IF WARRANTED, REVIEWED BY THE CHAIR OR A DESIGNATED MEMBER OF THE EXECUTIVE COMMITTEE. DEPENDING ON ITS NATURE AND SERIOUSNESS, ANY POTENTIAL CONFLICT WILL BE REVIEWED BY THE BOARD AND ANY RESULTING ACTION SHOULD BE DETERMINED BY THE BOARD. IN MOST INSTANCES, THE APPROPRIATE ACTIONS IN THE FACE OF POTENTIAL OR ACTUAL CONFLICTS ARE DISCLOSURE OF THE CONFLICT AND REMOVAL OF THE INDIVIDUAL WITH THE CONFLICT FROM THE CONSIDERATION AND DECISION-MAKING PROCESSES WITH REGARD TO CERTAIN MATTERS WHERE HIS OR HER JUDGMENT WOULD OR MIGHT BE COMPROMISED BY THE CONFLICT.

FORM 990, PART VI, SECTION B, LINE 15: (A) COMPENSATION OF THE ORGANIZATION'S PRESIDENT & CEO AND THE PRESIDENT OF EVENTS & RACE DIRECTOR OF THE NEW YORK CITY MARATHON IS DETERMINED BY THE HUMAN RESOURCES & COMPENSATION COMMITTEE, WHICH CONSIDERS INDIVIDUAL Schedule O (Form 990 or 990-EZ) (2017) 732212 09-07-17 56 2017.05030 NEW YORK ROAD RUNNERS INC 16228001

15040129 756359 1622800.000

<u>Schedule O (Form 990 or 990 EZ) (2017)</u>	Page 2			
Name of the organization NEW YORK ROAD RUNNERS INC. C/O FINANCE DEPARTMENT	Employer identification number 13-2949483			
ACCOMPLISHMENTS, ORGANIZATIONAL PERFORMANCE AND COMPARABLE	COMPENSATION			
DATA. THE COMMITTEE'S RECOMMENDATION IS PRESENTED TO THE B	OARD OF DIRECTORS			
FOR REVIEW AND APPROVAL.				

(B) THE COMPENSATION PERCENTAGES OF SALARY INCREASES AND BONUSES FOR SENIOR/VICE PRESIDENTS, DEPARTMENT HEADS AND DEPARTMENTAL DIRECTORS, MANAGERS AND STAFF POSITIONS ARE DETERMINED BY THE HUMAN RESOURCES & COMPENSATION COMMITTEE, BASED UPON THE RECOMMENDATIONS OF THE PRESIDENT & CEO AND THE PRESIDENT OF EVENTS & RACE DIRECTOR OF THE NEW YORK CITY MARATHON WHO REVIEW PERFORMANCE REPORTS AND BENCHMARKING DATA. THE RECOMMENDATIONS OF THE HUMAN RESOURCES & COMPENSATION COMMITTEE ARE PRESENTED TO THE BOARD OF DIRECTORS FOR APPROVAL, AND ITS DELIBERATIONS AND DECISION ARE CONTEMPORANEOUSLY DOCUMENTED AS PART OF THE MINUTES OF THE PROCEEDINGS. PERSONS WHOSE COMPENSATION ARE AT ISSUE ARE EXCUSED FROM PARTICIPATION AT MEETINGS IN WHICH SUCH COMPENSATION DECISIONS ARE DISCUSSED AND/OR DECIDED. THE FOREGOING PROCESS IS FOLLOWED ANNUALLY AND WAS LAST UNDERTAKEN FOR ALL EMPLOYEES EXCEPT OFFICERS AND OTHER MEMBERS OF SENIOR MANAGEMENT IN MARCH 2017, AND FOR OFFICERS AND OTHER MEMBERS OF SENIOR MANAGEMENT IN JUNE 2018.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990: NJ,NY,CA,MA,PA,IL,AL,AR,FL,GA,HI,KS,KY,ME,MD,MI,MN,NH,NC,ND,OK,OR,RI,SC,TN UT,VA,WV,WI,MS,NM

FORM 990, PART VI, SECTION C, LINE 19: CONSISTENT WITH ITS OBLIGATIONS UNDER STATUTORY LAW, RULES AND REGULATIONS, AS APPLICABLE, THE ORGANIZATION MAKES ITS DOCUMENTS, SUCH AS ITS APPLICATION FOR TAX EXEMPTION, ANNUAL INFORMATION RETURNS, CONFLICT OF 732212 09-07-17 Schedule O (Form 990 or 990-EZ) (2017) 57

15040129 756359 1622800.000

2017.05030 NEW YORK ROAD RUNNERS INC 16228001

Schedule O (Form 990 or 990-EZ) (2017) Page 2						
Name of the organization NEW YORK ROAD RUNNERS INC. C/O FINANCE DEPARTMENT	Employer identification number 13-2949483					
INTEREST POLICY, FINANCIAL STATEMENTS, AND GOVERNING DOCUMENTS, AVAILABLE						
THROUGH PUBLIC FILINGS AND/OR ON WRITTEN REQUEST, EITHER B	Y PROVIDING					
COPIES OR MAKING THEM AVAILABLE FOR INSPECTION AT THE OFFI	CES OF THE					

ORGANIZATION.

FORM 990, PART IX, LINE 24E, ALL OTHER FUNCTIONAL EXPENSES:

LEGAL SETTLEMENT EXPENSES

FORM 990, PART XII, LINE 2C:

THE AUDIT COMMITTEE OF THE BOARD HIRES THE AUDIT FIRM, THE REVIEW OF

THE RISK ISSUES FOR THE ORGANIZATION AND THE FINAL AUDIT REVIEW AND

PACKAGE THAT IS ACCEPTED BY THE BOARD. THE COMMITTEE MEETS WITH THE

AUDIT FIRM INDEPENDENTLY FROM STAFF DURING THE AUDIT REVIEW PROCESS AND

RECOMMENDS TO THE BOARD THE ACCEPTANCE OF THE AUDIT AND ITS FINDINGS.

THIS PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.