

**Return of Organization Exempt From Income Tax**  
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

Open to Public Inspection

**A For the 2010 calendar year, or tax year beginning** JUL 1, 2010 **and ending** JUN 30, 2011

|   |   |  |   |
|---|---|--|---|
| <b>B</b> Check if applicable:<br><br><input type="checkbox"/> Address change<br><input type="checkbox"/> Name change<br><input type="checkbox"/> Initial return<br><input type="checkbox"/> Terminated<br><input type="checkbox"/> Amended return<br><input type="checkbox"/> Application pending | <b>C Name of organization</b><br>THE MAYOR'S FUND TO ADVANCE<br>NEW YORK CITY<br><b>Doing Business As</b><br>_____<br>Number and street (or P.O. box if mail is not delivered to street address) Room/suite<br>253 BROADWAY, 8TH FLOOR _____<br>City or town, state or country, and ZIP + 4<br>NEW YORK, NY 10007 |  | <b>D Employer identification number</b><br>13-3783906   |
|   | <b>F Name and address of principal officer:</b> MEGAN SHEEKEY<br>SAME AS C ABOVE  |  | <b>E Telephone number</b><br>212-788-7794   |
|   | <b>I Tax-exempt status:</b> <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527  |  | <b>G Gross receipts \$</b> 29,797,110.  |
|   | <b>J Website:</b> ▶ WWW.NYC.GOV/FUND  |  | <b>H(a) Is this a group return for affiliates?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br><b>H(b) Are all affiliates included?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No<br>If "No," attach a list. (see instructions)<br><b>H(c) Group exemption number</b> ▶ _____ |
| <b>K Form of organization:</b> <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶ _____   |   |  | <b>L Year of formation:</b> 1994 <b>M State of legal domicile:</b> NY   |

**Part I Summary**

|   |   |                           |              |
|---|---|---------------------------|--------------|
| <b>1</b>  | Briefly describe the organization's mission or most significant activities: THE MAYOR'S FUND TO ADVANCE NEW YORK CITY FACILITATES INNOVATIVE PUBLIC-PRIVATE PARTNERSHIPS IN (SEE SCHEDULE O FOR CONTINUATION) |                           |              |
| <b>2</b>  | Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.   |                           |              |
| <b>3</b>  | Number of voting members of the governing body (Part VI, line 1a)   | <b>3</b>                  | 3            |
| <b>4</b>  | Number of independent voting members of the governing body (Part VI, line 1b)   | <b>4</b>                  | 3            |
| <b>5</b>  | Total number of individuals employed in calendar year 2010 (Part V, line 2a)  | <b>5</b>                  | 181          |
| <b>6</b>  | Total number of volunteers (estimate if necessary)  | <b>6</b>                  | 2            |
| <b>7a</b>   | Total unrelated business revenue from Part VIII, column (C), line 12  | <b>7a</b>                 | 0.           |
| <b>7b</b>   | Net unrelated business taxable income from Form 990-T, line 34  | <b>7b</b>                 | 0.           |
| <b>Revenue</b>  | <b>8</b> Contributions and grants (Part VIII, line 1h)  | Prior Year                | Current Year |
|   | <b>9</b> Program service revenue (Part VIII, line 2g)   | 28,813,882.               | 29,602,048.  |
|   | <b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)   | 0.                        | 0.           |
|   | <b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)  | 115,806.                  | 133,187.     |
|   | <b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)  | 28,844,794.               | 29,613,740.  |
| <b>Expenses</b>   | <b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)  | 0.                        | 1,840,962.   |
|   | <b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)   | 0.                        | 0.           |
|   | <b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)   | 630,581.                  | 830,000.     |
|   | <b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)  | 5,000.                    | 0.           |
|   | <b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ 91,503.  |                           |              |
| <b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)              | 29,118,273.   | 29,201,679.               |              |
| <b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) | 29,753,854.   | 31,872,641.               |              |
| <b>19</b> Revenue less expenses. Subtract line 18 from line 12                      | -909,060.   | -2,258,901.               |              |
| <b>Net Assets or Fund Balances</b>  | <b>20</b> Total assets (Part X, line 16)  | Beginning of Current Year | End of Year  |
|   | <b>21</b> Total liabilities (Part X, line 26)   | 36,628,518.               | 34,989,443.  |
|   | <b>22</b> Net assets or fund balances. Subtract line 21 from line 20  | 3,659,408.                | 4,279,234.   |
|   |   | 32,969,110.               | 30,710,209.  |

**Part II Signature Block**

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

|                               |   |                         |  |
|-------------------------------|---|-------------------------|--|
| <b>Sign Here</b>              | Signature of officer  | Date                    |  |
|                               | MEGAN SHEEKEY, PRESIDENT<br>Type or print name and title                |                         |  |
| <b>Paid Preparer Use Only</b> | Print/Type preparer's name<br>MARTIN GREIF                              | Preparer's signature    | Date   |
|                               | Firm's name ▶ MCGLADREY & PULLEN, LLP                                   | Firm's EIN ▶ 41-1944416 | Check if self-employed <input type="checkbox"/> PTIN P00029738 |
|                               | Firm's address ▶ 1185 AVENUE OF THE AMERICAS<br>NEW YORK, NY 10036-2602 | Phone no. 212-372-1000  |  |

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

**Part III Statement of Program Service Accomplishments**

Check if Schedule O contains a response to any question in this Part III

1 Briefly describe the organization's mission:  
THE MAYOR'S FUND IS COMMITTED TO SUPPORTING CONTINUOUS DEVELOPMENT AND  
EMERGING NEEDS, WHILE SIMULTANEOUSLY EVALUATING THEIR EFFICACY AND  
FUNDING SUSTAINABILITY.

2 Did the organization undertake any significant program services during the year which were not listed on  
the prior Form 990 or 990-EZ?  Yes  No  
If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?  
If "Yes," describe these changes on Schedule O.  Yes  No

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

4a (Code: ) (Expenses \$ 13,030,896. including grants of \$ 1,840,692. ) (Revenue \$ )  
OPPORTUNITYNYC AND THE SOCIAL INNOVATION FUND ARE BOTH PROGRAMS OF NYC  
CENTER FOR ECONOMIC OPPORTUNITY (CEO). OPPORTUNITYNYC IS THE NATION'S  
FIRST CONDITIONAL CASH TRANSFER PROGRAM TO REDUCE POVERTY BY PROVIDING  
FINANCIAL INCENTIVES TO LOW-INCOME FAMILIES TO IMPROVE EDUCATION,  
HEALTH AND WORKFORCE OUTCOMES. THE SOCIAL INNOVATION FUND IS PARTIALLY  
FUNDED WITH A FEDERAL GRANT FROM THE CORPORATION FOR NATIONAL AND  
COMMUNITY SERVICE (CNCS) TO REPLICATE FIVE OF CEO'S MOST PROMISING  
ANTI-POVERTY PROGRAMS IN EIGHT CITIES ACROSS THE NATION.

4b (Code: ) (Expenses \$ 3,955,361. including grants of \$ ) (Revenue \$ )  
OUT-OF-SCHOOL TIME (OST) AND SUMMER YOUTH EMPLOYMENT PROGRAM (SYEP) ARE  
BOTH PROGRAMS OF NYC DEPARTMENT OF YOUTH AND COMMUNITY DEVELOPMENT.  
THE OST INITIATIVE IS AN EFFORT TO PROVIDE COMMUNITIES WITH STRUCTURED  
YOUTH DEVELOPMENT SERVICES DURING NON-SCHOOL HOURS AND SYEP PROVIDES  
NYC YOUTH WITH IMPORTANT SUMMER EMPLOYMENT AND EDUCATIONAL  
OPPORTUNITIES.

4c (Code: ) (Expenses \$ 3,739,424. including grants of \$ ) (Revenue \$ )  
NYC SERVICE OVERSEES VARIOUS INITIATIVES, INCLUDING NYC CIVIC CORPS,  
COOL ROOFS, LOVE YOUR BLOCK AND MIDDLE SCHOOL MENTORSHIP. NYC SERVICE  
AIMS TO ACHIEVE THREE OVERARCHING GOALS: MAKING OUR CITY THE EASIEST  
PLACE IN THE WORLD TO VOLUNTEER; TARGETING VOLUNTEERS TO ADDRESS THE  
CITY'S GREATEST NEEDS; AND PROMOTING SERVICE AS A CORE PART OF BEING A  
CITIZEN OF THE CITY.

4d Other program services. (Describe in Schedule O.)  
(Expenses \$ 10,825,072. including grants of \$ ) (Revenue \$ )

4e Total program service expenses 31,550,753.

**Part IV Checklist of Required Schedules**

|  | Yes | No |
|--|-----|----|
| 1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?<br><i>If "Yes," complete Schedule A</i>  | X   |    |
| 2 Is the organization required to complete Schedule B, Schedule of Contributors?   | X   |    |
| 3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>  |     | X  |
| 4 <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>   |     | X  |
| 5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>                         | N/A |    |
| 6 Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>  |     | X  |
| 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>                                      |     | X  |
| 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>   |     | X  |
| 9 Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i> |     | X  |
| 10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>   |     | 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.   |     |    |
| a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>   |     | X  |
| b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>   |     | X  |
| c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>   |     | 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? <i>If "Yes," complete Schedule D, Part IX</i>  |     | X  |
| e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>   |     | 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)? <i>If "Yes," complete Schedule D, Part X</i>      | X   |    |
| 12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i>   | X   |    |
| b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional</i>              |     | X  |
| 13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>  |     | X  |
| 14a Did the organization maintain an office, employees, or agents outside of the United States?  |     | X  |
| b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If "Yes," complete Schedule F, Parts I and IV</i>                     |     | X  |
| 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Parts II and IV</i>                              |     | X  |
| 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Parts III and IV</i>                                  |     | 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? <i>If "Yes," complete Schedule G, Part I</i>   |     | 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? <i>If "Yes," complete Schedule G, Part II</i>   | X   |    |
| 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>   |     | X  |
| 20a Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>   |     | X  |
| b If "Yes" to line 20a, did the organization attach its audited financial statements to this return? <b>Note.</b> Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)                        |     | X  |

Form 990 (2010)

**Part IV Checklist of Required Schedules** (continued)

|  | Yes | No |
|--|-----|----|
| 21 Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>   | X   |    |
| 22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>  |     | X  |
| 23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>                           | X   |    |
| 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25</i> |     | X  |
| b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  |     |    |
| c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?   |     |    |
| d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  |     |    |
| 25a <b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>  |     | 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? <i>If "Yes," complete Schedule L, Part I</i>             |     | X  |
| 26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>   |     | X  |
| 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>                 |     | 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 A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>   |     | X  |
| b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>  |     | X  |
| c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>  |     | X  |
| 29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>   |     | X  |
| 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>   |     | X  |
| 31 Did the organization liquidate, terminate, or dissolve and cease operations?<br><i>If "Yes," complete Schedule N, Part I</i>  |     | X  |
| 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>   |     | 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? <i>If "Yes," complete Schedule R, Part I</i>   |     | X  |
| 34 Was the organization related to any tax-exempt or taxable entity?<br><i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>   |     | X  |
| 35 Is any related organization a controlled entity within the meaning of section 512(b)(13)?   |     | X  |
| a Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                 |     |    |
| 36 <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>  |     | X  |
| 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>  |     | X  |
| 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?<br><b>Note.</b> All Form 990 filers are required to complete Schedule O   | X   |    |

**Part V Statements Regarding Other IRS Filings and Tax Compliance**

Check if Schedule O contains a response to any question in this Part V

|     |  | Yes | No  |
|-----|--|-----|-----|
| 1a  | Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable   |     |     |
| 1a  | 58   |     |     |
| b   | Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable  |     |     |
| 1b  | 0  |     |     |
| c   | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?   | X   |     |
| 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  | 181  |     |     |
| b   | If at least one is reported on line 2a, did the organization file all required federal employment tax returns?<br><b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)  | X   |     |
| 2b  |  |     |     |
| 3a  | Did the organization have unrelated business gross income of \$1,000 or more during the year?  |     | X   |
| 3a  |  |     |     |
| b   | If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O   |     |     |
| 3b  |  |     |     |
| 4a  | At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?                                   |     | X   |
| 4a  |  |     |     |
| b   | If "Yes," enter the name of the foreign country:<br>See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.   |     |     |
| 4b  |  |     |     |
| 5a  | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  |     | X   |
| 5a  |  |     |     |
| b   | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?   |     | X   |
| 5b  |  |     |     |
| c   | If "Yes," to line 5a or 5b, did the organization file Form 8886-T?   |     |     |
| 5c  |  |     |     |
| 6a  | Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?  |     | X   |
| 6a  |  |     |     |
| b   | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  |     |     |
| 6b  |  |     |     |
| 7   | <b>Organizations that may receive deductible contributions under section 170(c).</b>   |     |     |
| 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?  | X   |     |
| 7a  |  |     |     |
| b   | If "Yes," did the organization notify the donor of the value of the goods or services provided?  | X   |     |
| 7b  |  |     |     |
| c   | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?   |     | X   |
| 7c  |  |     |     |
| d   | If "Yes," indicate the number of Forms 8282 filed during the year  |     |     |
| 7d  |  |     |     |
| e   | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  |     | X   |
| 7e  |  |     |     |
| f   | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?   |     | X   |
| 7f  |  |     |     |
| g   | If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?   | N/A |     |
| 7g  |  |     |     |
| h   | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?   | N/A |     |
| 7h  |  |     |     |
| 8   | <b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? |     |     |
| 8   |  |     |     |
| 9   | <b>Sponsoring organizations maintaining donor advised funds.</b>   |     |     |
| a   | Did the organization make any taxable distributions under section 4966?  |     | N/A |
| 9a  |  |     |     |
| b   | Did the organization make a distribution to a donor, donor advisor, or related person?   |     | N/A |
| 9b  |  |     |     |
| 10  | <b>Section 501(c)(7) organizations.</b> Enter:   |     |     |
| a   | Initiation fees and capital contributions included on Part VIII, line 12   | N/A |     |
| 10a |  |     |     |
| b   | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  |     |     |
| 10b |  |     |     |
| 11  | <b>Section 501(c)(12) organizations.</b> Enter:  |     |     |
| a   | Gross income from members or shareholders  | N/A |     |
| 11a |  |     |     |
| b   | Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)   |     |     |
| 11b |  |     |     |
| 12a | <b>Section 4947(a)(1) non-exempt charitable trusts.</b> 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  | N/A |     |
| 12b |  |     |     |
| 13  | <b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>  |     |     |
| a   | Is the organization licensed to issue qualified health plans in more than one state?<br><b>Note.</b> See the instructions for additional information the organization must report on Schedule O.   |     | N/A |
| 13a |  |     |     |
| b   | Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans  |     |     |
| 13b |  |     |     |
| c   | Enter the amount of reserves on hand   |     |     |
| 13c |  |     |     |
| 14a | Did the organization receive any payments for indoor tanning services during the tax year?   |     | X   |
| 14a |  |     |     |
| b   | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O  |     |     |
| 14b |  |     |     |

**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.

Check if Schedule O contains a response to any question in this Part VI

**Section A. Governing Body and Management**

|    |   | Yes | No |
|----|---|-----|----|
| 1a | Enter the number of voting members of the governing body at the end of the tax year   |     |    |
| 1a |   |     |    |
| b  | Enter the number of voting members included in line 1a, above, who are independent  |     |    |
| 1b |   |     |    |
| 2  | Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?   |     | X  |
| 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? |     | X  |
| 4  | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?  |     | X  |
| 5  | Did the organization become aware during the year of a significant diversion of the organization's assets?  |     | X  |
| 6  | Does the organization have members or stockholders?   |     | X  |
| 7a | Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?   |     | X  |
| b  | Are any decisions of the governing body subject to approval by members, stockholders, or other persons?   |     | X  |
| 7b |   |     |    |
| 8  | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:   |     |    |
| a  | The governing body?   | X   |    |
| 8a |   |     |    |
| b  | Each committee with authority to act on behalf of the governing body?   | X   |    |
| 8b |   |     |    |
| 9  | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O        |     | X  |
| 9  |   |     |    |

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

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

**Section C. Disclosure**

- 17 List the states with which a copy of this Form 990 is required to be filed  NY
- 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.  
 Own website     Another's website     Upon request
- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization:   
 PETER BERTUGLIA - 212-788-7794  
 253 BROADWAY, 8TH FLOOR, NEW YORK, NY 10007





**Part VIII Statement of Revenue**

|   |  |   |                      | (A)<br>Total revenue | (B)<br>Related or<br>exempt function<br>revenue | (C)<br>Unrelated<br>business<br>revenue | (D)<br>Revenue<br>excluded from<br>tax under<br>sections 512,<br>513, or 514 |           |
|---|--|---|----------------------|----------------------|---|---|--|-----------|
| <b>Contributions, gifts, grants and other similar amounts</b>     | <b>1 a</b> Federated campaigns   | <b>1a</b>   |                      |                      |   |   |  |           |
|   | <b>b</b> Membership dues   | <b>1b</b>   |                      |                      |   |   |  |           |
|   | <b>c</b> Fundraising events  | <b>1c</b>   | 900,451.             |                      |   |   |  |           |
|   | <b>d</b> Related organizations   | <b>1d</b>   |                      |                      |   |   |  |           |
|   | <b>e</b> Government grants (contributions)   | <b>1e</b>   | 5,747,790.           |                      |   |   |  |           |
|   | <b>f</b> All other contributions, gifts, grants, and similar amounts not included above  | <b>1f</b>   | 22,953,807.          |                      |   |   |  |           |
|   | <b>g</b> Noncash contributions included in lines 1a-1f: \$   |   |                      |                      |   |   |  |           |
|   | <b>h Total.</b> Add lines 1a-1f  |   |                      | 29,602,048.          |   |   |  |           |
| <b>Program Service Revenue</b>                                    | <b>2 a</b>   | <b>Business Code</b>                                  |                      |                      |   |   |  |           |
|   | <b>b</b>   |   |                      |                      |   |   |  |           |
|   | <b>c</b>   |   |                      |                      |   |   |  |           |
|   | <b>d</b>   |   |                      |                      |   |   |  |           |
|   | <b>e</b>   |   |                      |                      |   |   |  |           |
|   | <b>f</b> All other program service revenue   |   |                      |                      |   |   |  |           |
|   | <b>g Total.</b> Add lines 2a-2f  |   |                      |                      |   |   |  |           |
| <b>Other Revenue</b>  | <b>3</b> Investment income (including dividends, interest, and other similar amounts)  |   |                      | 133,187.             |   |   | 133,187.   |           |
|   | <b>4</b> Income from investment of tax-exempt bond proceeds  |   |                      |                      |   |   |  |           |
|   | <b>5</b> Royalties   |   |                      |                      |   |   |  |           |
|   | <b>6 a</b> Gross Rents   | (i) Real  | (ii) Personal        |                      |   |   |  |           |
|   |  | <b>b</b> Less: rental expenses                        |                      |                      |   |   |  |           |
|   |  | <b>c</b> Rental income or (loss)                      |                      |                      |   |   |  |           |
|   |  | <b>d</b> Net rental income or (loss)                  |                      |                      |   |   |  |           |
|   | <b>7 a</b> Gross amount from sales of assets other than inventory  | (i) Securities  | (ii) Other           |                      |   |   |  |           |
|   |  | <b>b</b> Less: cost or other basis and sales expenses |                      |                      |   |   |  |           |
|   |  | <b>c</b> Gain or (loss)                               |                      |                      |   |   |  |           |
|   |  | <b>d</b> Net gain or (loss)                           |                      |                      |   |   |  |           |
|   | <b>8 a</b> Gross income from fundraising events (not including \$ 900,451. of contributions reported on line 1c). See Part IV, line 18 | <b>a</b>  |                      | 61,875.              |   |   |  |           |
|   |  | <b>b</b> Less: direct expenses                        |                      | 183,370.             |   |   |  |           |
|   |  | <b>c</b> Net income or (loss) from fundraising events |                      |                      | -121,495.                                       |   |  | -121,495. |
|   | <b>9 a</b> Gross income from gaming activities. See Part IV, line 19   | <b>a</b>  |                      |                      |   |   |  |           |
| <b>b</b> Less: direct expenses                                    |  |   |                      |                      |   |   |  |           |
| <b>c</b> Net income or (loss) from gaming activities              |  |   |                      |                      |   |   |  |           |
| <b>10 a</b> Gross sales of inventory, less returns and allowances | <b>a</b>   |   |                      |                      |   |   |  |           |
|   | <b>b</b> Less: cost of goods sold  |   |                      |                      |   |   |  |           |
|   | <b>c</b> Net income or (loss) from sales of inventory  |   |                      |                      |   |   |  |           |
| <b>Miscellaneous Revenue</b>                                      |  |   | <b>Business Code</b> |                      |   |   |  |           |
| <b>11 a</b>   |  |   |                      |                      |   |   |  |           |
|   | <b>b</b>   |   |                      |                      |   |   |  |           |
|   | <b>c</b>   |   |                      |                      |   |   |  |           |
|   | <b>d</b> All other revenue   |   |                      |                      |   |   |  |           |
|   | <b>e Total.</b> Add lines 11a-11d  |   |                      |                      |   |   |  |           |
| <b>12 Total revenue.</b> See instructions.                        |  |   |                      | 29,613,740.          | 0.  | 0.                                      | 11,692.  |           |

**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) but are not required to complete columns (B), (C), and (D).

| Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.  | (A)<br>Total expenses | (B)<br>Program service expenses | (C)<br>Management and general expenses | (D)<br>Fundraising expenses |
|---|-----------------------|---------------------------------|--|-----------------------------|
| 1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21   | 1,840,962.            | 1,840,962.                      |  |                             |
| 2 Grants and other assistance to individuals in the U.S. See Part IV, line 22   |                       |                                 |  |                             |
| 3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16  |                       |                                 |  |                             |
| 4 Benefits paid to or for members   |                       |                                 |  |                             |
| 5 Compensation of current officers, directors, trustees, and key employees  | 202,720.              | 105,166.                        | 49,542.                                | 48,012.                     |
| 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  | 491,658.              | 408,717.                        | 60,455.                                | 22,486.                     |
| 8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)   | 6,642.                | 5,686.                          | 533.                                   | 423.                        |
| 9 Other employee benefits   | 82,832.               | 66,950.                         | 8,860.                                 | 7,022.                      |
| 10 Payroll taxes  | 46,148.               | 17,355.                         | 16,061.                                | 12,732.                     |
| 11 Fees for services (non-employees):   |                       |                                 |  |                             |
| a Management  |                       |                                 |  |                             |
| b Legal   |                       |                                 |  |                             |
| c Accounting  | 86,460.               |                                 | 86,460.                                |                             |
| d Lobbying  |                       |                                 |  |                             |
| e Professional fundraising services. See Part IV, line 17   |                       |                                 |  |                             |
| f Investment management fees  |                       |                                 |  |                             |
| g Other   |                       |                                 |  |                             |
| 12 Advertising and promotion  |                       |                                 |  |                             |
| 13 Office expenses  | 9,002.                | 3,054.                          | 5,327.                                 | 621.                        |
| 14 Information technology   |                       |                                 |  |                             |
| 15 Royalties  |                       |                                 |  |                             |
| 16 Occupancy  |                       |                                 |  |                             |
| 17 Travel   |                       |                                 |  |                             |
| 18 Payments of travel or entertainment expenses for any federal, state, or local public officials   |                       |                                 |  |                             |
| 19 Conferences, conventions, and meetings   |                       |                                 |  |                             |
| 20 Interest   |                       |                                 |  |                             |
| 21 Payments to affiliates   |                       |                                 |  |                             |
| 22 Depreciation, depletion, and amortization  |                       |                                 |  |                             |
| 23 Insurance  | 8,196.                | 5,328.                          | 2,868.                                 |                             |
| 24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.)                                     |                       |                                 |  |                             |
| a PROGRAM EXP SEE STMT 1  | 26,784,110.           | 26,784,110.                     |  |                             |
| b AMERICORP STIPEND & FRINGE  | 2,171,089.            | 2,171,089.                      |  |                             |
| c PROGRAM - UNRESTRICTED  | 141,550.              | 141,550.                        |  |                             |
| d OTHER EXPENSES  | 1,272.                | 786.                            | 279.                                   | 207.                        |
| e   |                       |                                 |  |                             |
| f All other expenses  |                       |                                 |  |                             |
| 25 Total functional expenses. Add lines 1 through 24f   | 31,872,641.           | 31,550,753.                     | 230,385.                               | 91,503.                     |
| 26 Joint costs. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation |                       |                                 |  |                             |

**Part X Balance Sheet**

|                                    |   | (A)<br>Beginning of year  |             | (B)<br>End of year |             |
|------------------------------------|---|---|-------------|--------------------|-------------|
| <b>Assets</b>                      | 1   | Cash - non-interest-bearing .....   | 115,599.    | 1                  | 53,678.     |
|                                    | 2   | Savings and temporary cash investments .....  | 34,551,750. | 2                  | 30,450,614. |
|                                    | 3   | Pledges and grants receivable, net .....  | 1,956,582.  | 3                  | 4,479,597.  |
|                                    | 4   | Accounts receivable, net .....  |             | 4                  |             |
|                                    | 5   | Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L .....   |             | 5                  |             |
|                                    | 6   | Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) ..... |             | 6                  |             |
|                                    | 7   | Notes and loans receivable, net .....   |             | 7                  |             |
|                                    | 8   | Inventories for sale or use .....   |             | 8                  |             |
|                                    | 9   | Prepaid expenses and deferred charges .....   | 4,587.      | 9                  | 5,554.      |
|                                    | 10a   | Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....   |             |                    |             |
|                                    |   | <b>10a</b>  |             |                    |             |
|                                    | b   | Less: accumulated depreciation .....  |             | <b>10c</b>         |             |
|                                    |   | <b>10b</b>  |             |                    |             |
|                                    | 11  | Investments - publicly traded securities .....  |             | 11                 |             |
|                                    | 12  | Investments - other securities. See Part IV, line 11 .....  |             | 12                 |             |
|                                    | 13  | Investments - program-related. See Part IV, line 11 .....   |             | 13                 |             |
| 14                                 | Intangible assets .....   |   | 14          |                    |             |
| 15                                 | Other assets. See Part IV, line 11 .....  |   | 15          |                    |             |
| 16                                 | <b>Total assets.</b> Add lines 1 through 15 (must equal line 34) .....  | 36,628,518.   | <b>16</b>   | 34,989,443.        |             |
| <b>Liabilities</b>                 | 17  | Accounts payable and accrued expenses .....   | 3,659,408.  | 17                 | 4,279,234.  |
|                                    | 18  | Grants payable .....  |             | 18                 |             |
|                                    | 19  | Deferred revenue .....  |             | 19                 |             |
|                                    | 20  | Tax-exempt bond liabilities .....   |             | 20                 |             |
|                                    | 21  | Escrow or custodial account liability. Complete Part IV of Schedule D .....   |             | 21                 |             |
|                                    | 22  | Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L .....  |             | 22                 |             |
|                                    | 23  | Secured mortgages and notes payable to unrelated third parties .....  |             | 23                 |             |
|                                    | 24  | Unsecured notes and loans payable to unrelated third parties .....  |             | 24                 |             |
|                                    | 25  | Other liabilities. Complete Part X of Schedule D .....  |             | 25                 |             |
|                                    | 26  | <b>Total liabilities.</b> Add lines 17 through 25 .....   | 3,659,408.  | <b>26</b>          | 4,279,234.  |
| <b>Net Assets or Fund Balances</b> | <b>Organizations that follow SFAS 117, check here <input type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.</b> |   |             |                    |             |
|                                    | 27  | Unrestricted net assets .....   |             | 27                 |             |
|                                    | 28  | Temporarily restricted net assets .....   |             | 28                 |             |
|                                    | 29  | Permanently restricted net assets .....   |             | 29                 |             |
|                                    | <b>Organizations that do not follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 30 through 34.</b>    |   |             |                    |             |
|                                    | 30  | Capital stock or trust principal, or current funds .....  | 0.          | 30                 | 0.          |
|                                    | 31  | Paid-in or capital surplus, or land, building, or equipment fund .....  | 0.          | 31                 | 0.          |
|                                    | 32  | Retained earnings, endowment, accumulated income, or other funds .....  | 32,969,110. | 32                 | 30,710,209. |
|                                    | 33  | <b>Total net assets or fund balances</b> .....  | 32,969,110. | <b>33</b>          | 30,710,209. |
| 34                                 | <b>Total liabilities and net assets/fund balances</b> .....   | 36,628,518.   | <b>34</b>   | 34,989,443.        |             |

**Part XI Reconciliation of Net Assets**

Check if Schedule O contains a response to any question in this Part XI

|          |  |          |             |
|----------|--|----------|-------------|
| <b>1</b> | Total revenue (must equal Part VIII, column (A), line 12)  | <b>1</b> | 29,613,740. |
| <b>2</b> | Total expenses (must equal Part IX, column (A), line 25)   | <b>2</b> | 31,872,641. |
| <b>3</b> | Revenue less expenses. Subtract line 2 from line 1   | <b>3</b> | -2,258,901. |
| <b>4</b> | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))                      | <b>4</b> | 32,969,110. |
| <b>5</b> | Other changes in net assets or fund balances (explain in Schedule O)   | <b>5</b> | 0.          |
| <b>6</b> | Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B)) | <b>6</b> | 30,710,209. |

**Part XII Financial Statements and Reporting**

Check if Schedule O contains a response to any question in this Part XII

|           |   | Yes | No |
|-----------|---|-----|----|
| <b>1</b>  | Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____<br>If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.   |     |    |
| <b>2a</b> | Were the organization's financial statements compiled or reviewed by an independent accountant?   |     | X  |
| <b>b</b>  | Were the organization's financial statements audited by an independent accountant?  | X   |    |
| <b>c</b>  | If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?<br>If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. | X   |    |
| <b>d</b>  | If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both:<br><input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis                  |     |    |
| <b>3a</b> | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?  | X   |    |
| <b>b</b>  | If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.   | X   |    |

Form **990** (2010)

**SCHEDULE O**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990 or 990-EZ**

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

OMB No. 1545-0047

**2010**

Open to Public  
Inspection

|                          |  |                                |            |
|--------------------------|--|--------------------------------|------------|
| Name of the organization | THE MAYOR'S FUND TO ADVANCE<br>NEW YORK CITY | Employer identification number | 13-3783906 |
|--------------------------|--|--------------------------------|------------|

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

AREAS INCLUDING THE ENVIRONMENT, YOUTH DEVELOPMENT, FINANCIAL

EMPOWERMENT, HEALTH, VOLUNTEERISM, AND THE ARTS.

FORM 990, PART I, LINE 5 AND PART V, LINE 2A

TOTAL NUMBER OF INDIVIDUALS EMPLOYED IN CALENDAR YEAR 2010

THE MAYOR'S FUND RECEIVED A GRANT FROM AMERICORPS OF \$1,874,618 THROUGH

THE CORPORATION FOR NATIONAL AND COMMUNITY SERVICES TO ADMINISTER

STIPENDS TO 173 CORPS MEMBERS. AS REGULATED BY THE GRANT, THE MEMBERS

ARE TO BE CONSIDERED PARTICIPANTS; NOT EMPLOYEES. HOWEVER, THE MAYOR'S

FUND IS REQUIRED TO WITHHOLD FEDERAL INCOME AND EMPLOYMENT TAXES.

FORM 990, PART III, LINE 2, NEW PROGRAM SERVICES:

MAYOR'S FUND WAS AWARDED A \$5.7M FEDERAL GRANT FROM THE CORPORATION FOR

NATIONAL AND COMMUNITY SERVICE TO IMPLEMENT THE SOCIAL INNOVATION FUND.

THE INITIATIVE IS TO REPLICATE FIVE OF THE CITY'S MOST PROMISING

ANTI-PROVERTY PROGRAMS IN NYC AND SEVEN PARTNERING CITIES.

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

VARIOUS PUBLIC PROGRAMS THAT IMPROVE OR ENHANCE THE QUALITY OF LIFE IN

NEW YORK CITY.

EXPENSES \$ 10,825,072. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

FORM 990, PART VI, SECTION B, LINE 11: PRIOR TO FILING, IT IS REVIEWED BY

THE FOLLOWING: OUR PRESIDENT, ACCOUNTANT, AND TREASURER. THE STAFF AT

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

Schedule O (Form 990 or 990-EZ) (2010)

032211  
01-24-11

Name of the organization THE MAYOR'S FUND TO ADVANCE  
NEW YORK CITY

Employer identification number  
13-3783906

GELLER & COMPANY'S TAX DEPARTMENT ALSO REVIEW THE RETURN, SERVICES PROVIDED

IN-KIND. ALL BOARD MEMBERS ARE ALSO PROVIDED THE FORM 990 PRIOR TO

SUBMISSION FOR QUESTIONS OR COMMENTS.

FORM 990, PART VI, SECTION B, LINE 12C: THE BY-LAWS REQUIRE BOARD MEMBERS,

OFFICERS AND KEY EMPLOYEES TO DISCLOSE ANY CONFLICT OF INTEREST ANNUALLY.

THE ORGANIZATION HAS IMPLEMENTED A POLICY OF ANNUALLY DISTRIBUTING THE

CONFLICT OF INTEREST QUESTIONNAIRE.

FORM 990, PART VI, SECTION B, LINE 15: PERFORMANCE REVIEWS ARE COMPLETED

FOR KEY EMPLOYEES AND PRESIDENT. COMPENSATION TO PRESIDENT AND KEY

EMPLOYEES ARE BASED ON ANNUAL PERFORMANCE REVIEW AND COMPARISON TO FORM 990

OF OTHER SIMILAR NON-PROFITS. BOARD CHAIR AND GOVERNANCE/COMPENSATION

COMMITTEE APPROVE OF ANY SALARY ADJUSTMENTS.

FORM 990, PART VI, SECTION C, LINE 19: ANY DOCUMENT THAT THE ORGANIZATION

IS REQUIRED TO MAKE AVAILABLE TO THE GENERAL PUBLIC IS PROVIDED UPON

WRITTEN REQUEST MADE TO THE ORGANIZATION. THE ORGANIZATION'S ANNUAL REPORT

IS POSTED TO ITS WEBSITE.

FORM 990, PART IX

STATEMENT OF FUNCTIONAL EXPENSES - LINE 24B

THE FUNCTION OF THIS PROGRAM EXPENSE SUPPORTED BY THE AMERICORPS GRANT

IS TO PLACE NYC CIVIC CORPS MEMBERS AT LOCAL NON-PROFIT ORGANIZATIONS

TO ASSIST WITH PRESSING SOCIAL ISSUES ACROSS THE CITY. TOTAL PROGRAM

EXPENSES OF \$2,171,089 CONSIST OF PARTICIPANT SALARIES \$1,989,723,

PAYROLL TAXES \$153,871 AND OTHER BENEFITS \$27,495.

**Mayor's Fund to Advance NYC**  
**EIN 13-3783906**  
**For the year ended 06/30/2011**

**Form 990, Part IX, Line 24a**  
**Program Expenses**

|  | Expenses<br>Incurred |
|--|----------------------|
| Center for Economic Opportunity                                | \$ 10,916,294        |
| City Hall Conservancy  | 375                  |
| Civic Innovation   | 197,919              |
| Civilian Complaint Review Board                                | 831                  |
| Commission on Women's Issues                                   | 48,000               |
| Department of Buildings  | 47,804               |
| Department of Consumer Affairs                                 | 1,999,677            |
| Department of Cultural Affairs                                 | 75,000               |
| Department of Education  | 279,252              |
| Department of Environmental Protection                         | 24,849               |
| Department of Health and Mental Hygiene                        | 500,976              |
| Department of Homeless Services                                | 337,489              |
| Department of Housing Preservation and<br>Development          | 352,221              |
| Department of Information Technology and<br>Telecommunications | 30,000               |
| Department of Parks and Recreation                             | 118,396              |
| Department of Sanitation                                       | 1,625                |
| Department of Small Business Services                          | 129,079              |
| Department of Transportation                                   | 116,500              |
| Department of Youth and Community<br>Development               | 3,916,050            |
| Greater NY   | 128,445              |
| Human Rights Commission  | 719                  |
| Law Department   | 19,366               |
| Latin Media and Entertainment Commission                       | 5,133                |
| Memorial Park  | 4,000                |
| New York City Housing Authority                                | 107,676              |
| NYC Libraries  | 14,760               |
| NYC Service  | 1,417,647            |
| Office for People With Disabilities                            | 24,675               |
| Office of Criminal Justice Coordinator                         | 102,505              |
| Office of Emergency Management                                 | 35,856               |
| Office of Film, Theatre and Broadcasting                       | 125,735              |
| Office of Immigrant Affairs                                    | 44,099               |
| Office of Operations   | 106,216              |
| Office of Special Projects and Community Events                | 423,041              |
| Office of Veterans' Affairs                                    | 121,333              |
| Office to Combat Domestic Violence                             | 599,604              |
| PlaNYC   | 3,314,658            |
| Public Design Commission                                       | 11,202               |
| Relief Efforts   | 574,655              |
| September 11 Commemoration Fund                                | 500,648              |
| Voter Assistance Commission                                    | 9,800                |
|  | <u>\$ 26,784,110</u> |