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### Form

Department of the Treasury Internal Revenue Service

#### **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

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

OMB No 1545-0047 2008
Open to Public Inspection

		The organization may have to do a copy or time to control or time.			Inspection
<u>A</u> _	For the 200	B calendar year, or tax year beginning $7/01/08$ , and ending $6/30/09$	9		
В	Check if applical			D Emplo	oyer identification number
	Address change	PENNSYLVANIA DOWNTOWN CENTER	, INC.		
$\Box$	Alo	label or print or Doing Business As		23-	-2531296
님	Name change	type. Number and street (or P O box if mail is not delivered to street address)	Room/suite		none number
	Initial return	See 130 LOCUST STREET	101		7-233-4675
	Termination	Specific			
		Instruc City or town, state or country, and ZIP + 4		G Gross rece	eipts \$ 1,753,189
닏	Amended return				
	Application pend			H(a) Is this	a group return for
		BILL FONTANA		affiliat	
		130 LOCUST STREET, SUITE 101		H(b) Are all include	
		HARRISBURG PA 17101		If "No.	* attach a list (see instructions)
T	Tax-exempt	status <b>X</b> 501(c) ( <b>3</b> ) ◀ (insert no ) 4947(a)(1) or 527			
	Website.			H(c) Gmun	exemption number
<u> </u>				87	M State of legal domicile PA
	Type of organiz		real of formation 🚨 🗸	707	W State of legal domicile 223
<u>_</u>	Part I	Summary	<del> </del>		<del></del>
3	1 Brief	ly describe the organization's mission or most significant activities			
$\sim$	E	NCOURAGE DEVELOPMENT OF DOWNTOWN AREAS.			
ي ا					
ي سح	}				
MAR 1 1 2010	2 Chec	ck this box 🕨 🔲 if the organization discontinued its operations or disposed of more than 25	% of its assets		
≥	3\ Num	ber of voting members of the governing body (Part VI, line 1a)	1FD-01	3	19
en.	4 Num	ber of independent voting members of the governing body (Part VI, line 16)	980	4	19
<u></u>	5 Tala	ber of independent voting members of the governing body (Fart VI, line 10)	., 191	5	16
SCANNED Activities	5 Total	I number of employees (Part V, line 2a) I number of volunteers (estimate if necessary) I gross unrelated business revenue from Part VIII, line 12, column (C)	, 5010  \E\	\ <del></del>	1
漫る		number of volunteers (estimate if necessary) I gross unrelated business revenue from Part VIII, line 12, column (C)		\	<u> </u>
\$	7a Total	gross unrelated business revenue from Part VIII, line 12, column (C)	117	<u> 7a</u>	
~ ~	b Net u	unrelated business taxable income from Form 990-T, line 34	M. O.	7b	0
Ge	1	\ 000	Prior Year		Current Year
٠	8 Cont	ributions and grants (Part VIII, line 1h)		,203	1,365,520
Revenue	9 Prog	ram service revenue (Part VIII, line 2g)		,011	373,588
9,4	10 Inves	stment income (Part VIII, column (A), lines 3, 4, and 7d)		,273	3,136
~	11 Othe	r revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	13	811	10,769
	12 Total	revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,364	,298	1,753,013
	T	its and similar amounts paid (Part IX, column (A), lines 1-3)			
	1	efits paid to or for members (Part IX, column (A), line 4)			<del></del>
	45 0-1-	· · · · · · · · · · · · · · · · · · ·	473	, 935	564,718
es		ries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	- 4/5	,, 933	304,710
Expense	16a Prote	essional fundraising fees (Part IX, column (A), line 11e)			<del></del>
Ž	-   <b>b</b> Tota	fundraising expenses (Part IX, column (D), line 25)			
ш	17 Othe	r expenses (Part IX, column (A), lines 11a-11d, 11f-24f)		, 342	1,126,732
	18 Total	expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	1,370		1,691,450
	19 Reve	enue less expenses Subtract line 18 from line 12		,979	61,563
Net Assets or	80		Beginning of		End of Year
seta	<b>20</b> Total	assets (Part X, line 16)	2,554	,150	1,910,786
. As	21 Total	Habilities (Part X, line 26)	2,268	8,817	1,696,116
Ž,	1 22 Net a	assets or fund balances. Subtract line 21 from line 20	285	, 333	214,670
	Part II	Signature Block			
<del>·</del>			od statements, and t	o the hest o	of my knowledge
		Under penalties of perjury, I declare that I have examined this return, including accompanying schedules are and belief, it is true, correct, and companying the Declaration of preparer (other than officer) is based on all inform	nation of which prep	arer has an	y knowledge
٥:				1	-/-/-
	gn		<del></del>		2/3//0
He	ere	Signature of officer		Date	
		Chistopher / 12 Kockey, Chair	Maa		
		Type or print name and title			
		Preparer's A A A A A A A A A Date	Check if		Preparer's identifying number
Pa	iid	signature Hallh L Rottfredd Cott 1/27	self- employe	ا ⊾ ا	(see instructions) P00633225
Pr	eparer's	HAMILTON & MUSSER, PC, CPAS	, — I employe	<b>⊤</b>	► 23-2113999
Us	se Only	176 CINDEDIAND DARKIAY	<del></del>	EIN	<u> </u>
				Phone	717 607 3000
_		address, and ZIP + 4 MECHANICSBURG, PA 17055		no 🕨	717-697-3888
Ma	v the IRS di	scuss this return with the preparer shown above? (see instructions)			X Yes No

DAA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2008)

**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		x	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete			
	Schedule C, Part II	4		<u> </u>
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)			
	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete	1 1		
	Schedule D, Part I	6		<u> </u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		<u> </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
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? If "Yes,"			
	complete Schedule D, Part IV	9		<u> </u>
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D,			
	Parts VI, VIII, IX, or X as applicable	11	X	
12	Did the organization receive an audited financial statement for the year for which it is completing this return			
	that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the U S ?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,	)	ļ	
	business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			77
	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	40		v
4=	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16	-	$\frac{\mathbf{x}}{\mathbf{x}}$
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		$\frac{\mathbf{x}}{\mathbf{x}}$
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	20		$\frac{x}{x}$
20 21	Did the organization operate one or more hospitals? If "Yes," complete Schedule H  Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete			
	Schedule J	23	ļ	X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	<del></del>		
-	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions			
	24b-24d and complete Schedule K. If "No," go to question 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			_
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified			
	person from a pnor year? If "Yes," complete Schedule L, Part I	25b		<u> </u>
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? If "Yes," complete Schedule L, Part II	26		<u> </u>
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or	1 1		77
	substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		X
		Form	990	(2008)

#### Part JV Checklist of Required Schedules (continued)

			Yes	No
28	Dunng the tax year, did any person who is a current or former officer, director, trustee, or key employee			1
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or			i
	employee), or an indirect business relationship through ownership of more than 35% in another entity			
	(individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L,			زـــــا
	Part IV	28a_		<u> </u>
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes,"			
	complete Schedule L, Part IV	28b		<u> </u>
C	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a			
	professional corporation) doing business with the organization? 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		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	Ì		
	conservation contributions? If "Yes," complete Schedule M	30		<u> </u>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		<u> </u>
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		<u>X</u>
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		<u> </u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,			
	III, IV, and V, line 1	34		<u> </u>
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete			
	Schedule R, Part V, line 2	35_		<u> </u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
	organization? If "Yes," complete Schedule R, Part V, line 2	36		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? If "Yes," complete Schedule R, Part			
	VI	37		<u> </u>

Form **990** (2008)

	Statements Regarding Other INS Finings and Tax Comphanice						
12	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of		Ī	<u> </u>	+	Yes	No
ıa	U.S. Information Returns. Enter -0- if not applicable	1a	29		1		
ь	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 repor	لتنب				l	
•	gaming (gambling) winnings to prize winners?			10	- -		X
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			<del></del>	+		
	Statements, filed for the calendar year ending with or within the year covered by this return	2a	16		-		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			21	-  -	$\bar{\mathbf{x}}$	
-	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see			<u></u> -	1		
	instructions)					ł	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered b	٧			1		
	this return?	•		38	3		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			31	, T		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other auti	nonity					
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	cial					
	account)?			4			X
b	If "Yes," enter the name of the foreign country						
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bar	nk				- 1	
	and Financial Accounts				-  -		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			58	<u>.  </u>		<u> </u>
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	٦?		51	<u> </u>		X
С	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity						
	Regarding Prohibited Tax Shelter Transaction?			50	-		
6a	Did the organization solicit any contributions that were not tax deductible?			68	<u> </u>		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions	or					
_	gifts were not tax deductible?			61	<u> </u>		
7	Organizations that may receive deductible contributions under section 170(c).						
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of more tha	ın		1	-  -	-	v
_	\$75?			76			<u> </u>
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			71	-	$\overline{}$	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			<b>-</b>			x
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d		70	<del>'</del>		
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a persi						
•	benefit contract?	onai		76	:   -		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	,		7f			X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?			79	$\overline{}$		X
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as	ı		<u> </u>	+	T	
	required?			71	,		X
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and secti	on		<u> </u>	十	寸	
	509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponso						
	organization, have excess business holdings at any time during the year?	•		8			X
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.					[	
а	Did the organization make any taxable distributions under section 4966?			9a			X
b	Did the organization make a distribution to a donor, donor advisor, or related person?			91			X
10	Section 501(c)(7) organizations. Enter						
а	Initiation fees and capital contributions included on Part VIII, line 12	10a					
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b					
11	Section 501(c)(12) organizations. Enter						
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 )	11b			-	-	
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 10			12:	a	$\dashv$	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b					

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

<u>Sec</u>	tion A. Governing Body and Management		· ·	
	For each "Yes" response to lines 2~7b below, and for a "No" response to lines 8 or 9b below, describe the		Yes	_No_
	circumstances, processes, or changes in Schedule O. See instructions			1
1a	Enter the number of voting members of the governing body  1a 19			,
b	Enter the number of voting members that are independent  1b 19			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
-	any other officer, director, trustee, or key employee?	2	-	<b>X</b>
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 organizational documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			
	of the governing body?	7a		X
ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			ı
	the year by the following			l_
а	The governing body?	8a	Х	 
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9a	Does the organization have local chapters, branches, or affiliates?	9a_		X
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?	9b		<u></u>
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations			
	must describe in Schedule O the process, if any, the organization uses to review the Form 990	10	X	
11	Is there any officer, director or 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			<u> </u>
Sec	tion B. Policies			
			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	<u> </u>
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
	nse to conflicts?	12b	X	
C	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this is done	12c	X	<u> </u>
13	Does the organization have a written whistleblower policy?	13	X	<del></del>
14	Does the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision			
а	The organization's CEO, Executive Director, or top management official?	15a	X	
b	Other officers or key employees of the organization?	15b	Х	
	Describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement		-	
	with a taxable entity during the year?	16a	<del>                                     </del>	<u>x</u>
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	L	<u> </u>
	tion C. Disclosure	•		
17	List the states with which a copy of this Form 990 is required to be filed PA			
18	Section 6104 requires an organization to make its Form 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			
40	X Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest			
00	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   BILL FONTANA  130 LOCUST STREET, SUITE	101		
นา	organization BILL FONTANA 130 LOCUST STREET, SUITE ARRISBURG PA 17101	717-23	3-4	675
	24/1020//0			(2008)

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

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

- 1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid
- 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

(A)	ganization did not compo (B)	1			C)		1, 110	(D)	(E)	(F)
Name and Title	Average hours per	Posit	tion (	-		hat ap		Reportable	Reportable compensation	Estimated
	week	Individual trustee or director	Former Highest compensated where employee Cofficer Compensated Institutional trustee Individual trustee		the organization	from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations			
CYNTHIA PILO				一		<u> </u>				
CHAIR	0-1	X						o	0	0
CHRIS ROCKEY										
TREASURER	0-1	X						0	0	0
JAMES E WHIT	E									
PAST CHAIR	0-1	X		<u> </u>				0	0	0
VERA ANDERSO										
BOARD MEMBER	0-1	X					<u> </u>	0	0	0
KIM BARNES									_	_
BOARD MEMBER	0-1	X		L_		_		0	0	0
JANE CONOVER					İ			_		_
BOARD MEMBER	0-1	X			<u> </u>	_	<u> </u>	0	0	0
CHRISTIAN CO										
BOARD MEMBER	0-1	X		<u> </u>	<u> </u>		<u> </u>	0	0	0
MINDY CRAWFO										•
BOARD MEMBER	0-1	X				├	<u> </u>	0	0	0
DAN HOLLAND	0 1							ا		•
BOARD MEMBER	0-1	X		<del> </del>	_	-	_	0	0	0
ERIC MENZER BOARD MEMBER	0_1					1		ا	O	0
MATHILDA SHE	0-1	X		-	-	├	<u> </u>	0	<u>_</u>	
BOARD MEMBER	0-1	x						o	o	0
ANDY TOY	<u> </u>	-		├─	┢╌	$\vdash$	$\vdash$			
BOARD MEMBER	0-1	x						o	o	0
PAUL CULLINA		-		-	$\vdash$	┢				
BOARD MEMBER	0-1	x					·	o	o	0
ANDREW WALKE		<del> </del>		<del>                                     </del>						
BOARD MEMBER	0-1	$ \mathbf{x} $						ol	o	0
KIM KMETZ	<del></del>	1		Ι						
BOARD MEMBER	0-1	$ \mathbf{x} $						o	o	0
TODD VONDERH										
BOARD MEMBER	0-1	X		L				0	0	0
DALE FOX					Γ					
BOARD MEMBER	0-1	x	l	l				l ol	0	0

TRI-COUNTY HDC, LTD.	1514	ERRY STREET	
HARRISBURG	PA 17104	LOAN COORD.	237,694
			1
	<del></del>		
	· · · · · · · · · · · · · · · · · · ·		
2 Total number of independent contra	ctors (including those in 1) who re	ceived more than \$100,000 in	
compensation from the organization		octived more trially problems	-
DAA		_ <del></del>	Form <b>990</b> (2008)
//·V1			Form 330 (2008)

<u>Pa</u>	<u>irt V.</u>	III Statement of Rev	<u>enue</u>						
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
इस	1a	Federated campaigns	1a						
Contributions, gifts, grants and other similar amounts	ь	Membership dues	1b						
g,E	c	Fundraising events	1c						
ji ar a	ď	Related organizations	1d						
S,E		Government grants (contributions)	1e	1.3	65,520				
io Si	f	All other contributions, gifts, grants,	<del>- "</del>		33,020				
be the	•	and similar amounts not included above	1f						
d d	_	Noncash contributions included in lines 1							
āÖ	9	Total. Add lines 1a–1f	a-11 <b>J</b>			1,365,520	}		
	-"	Total. Add lines Ta-11	<u>_</u>		In	1,303,320			
Program Service Revenue	2-				Busn. Code	119,387	119,387		
ě	2a	THINK TANK			<del></del>				
ě	b	CONFERENCES			<del></del>	97,835	97,835		
ξ	C	CONTRACTS & WORKSH	OPS		$\longrightarrow$	84,949	84,949		
ຂັ	d	MEMBERSHIPS			<del> </del>	71,417	71,417		
Lan	е	-			$\longrightarrow$				
<u>5</u>	f	All other program service rev	enue						
<u> </u>	9	Total. Add lines 2a-2f				373,588			
	3	Investment income (including	dividend	ls, interes	t, and				
		other similar amounts)			▶ [	3,312			3,312
	4	Income from investment of ta	x-exemp	t bond pro	ceeds 🕨				
	5	Royalties						<del></del>	
		(ı) Real	$\overline{}$	(n) P	ersonal				
	6a	Gross Rents	3,303						
	b	Less rental exps				ì			
	С	Rental inc or (loss)	3,303						; 
	_d	Net rental income or (loss)			<b>•</b>	8,303			8,303
	7a	Gross amount from sales of assets (1) Securit	ies	(11)	Other				
		other than inventory							
	b	Less cost or other							
		basis & sales exps			176				
	С	Gain or (loss)			-176				
	d	Net gain or (loss)			<b>•</b>	-176	-176		
	8a	Gross income from fundraising ev	ents				"		
Ф		(not including \$							
ile.		of contributions reported on line 1	c)						
86		See Part IV, line 18	' а						
10	Ь	Less direct expenses	b						
Other Revenu	ı	Net income or (loss) from fun	draisino	events	<b>•</b>				
•	ı	Gross income from gaming activit	-			<del> </del>			
	"	See Part IV, line 19	a				ì		
	<sub> </sub>	Less direct expenses	b						
	ı	Net income or (loss) from gar	1	uties					
	ı	Gross sales of inventory, less	-	VILICS					
	100	returns and allowances	a						
	١,	Less cost of goods sold	b			ļ	,		
	l	<del>-</del>	- (	nton		-			
	ᡰ᠆ᢆ	Net income or (loss) from sal Miscellaneous Reven		ыногу	Busn. Code		· <del>···</del>	<del></del>	<del></del>
	11a	<del></del>				2,466	-		2,466
		MISCELLANEOUS			<del>   </del>	2,400	<del>_</del>		2,400
	b				<del>                                     </del>				
	C	All -15			<del></del>			<del>-</del>	
	d	All other revenue			<u> </u>	2 455			
	1 0	Total. Add lines 11a-11d	0- 0 :	E 02 -	• •	2,466			
	12	Total Revenue. Add lines 1h	, ∠g, 3, 4	, 5, 6d, 7d	1, 8C,	1 752 012	272 410	•	14 001
	I	9c, 10c, and 11e			▶	1,753,013	373,412	0	14,081

#### 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).

	All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).											
	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	(D) Fundraising expenses							
1	Grants and other assistance to governments and											
•	organizations in the U.S. See Part IV, line 21				1							
2	Grants and other assistance to individuals in											
•	the U.S. See Part IV, line 22											
3	Grants and other assistance to governments,											
Ū	organizations, and individuals outside the											
	U S See Part IV, lines 15 and 16				4							
4	Benefits paid to or for members	<del></del>			<del></del>							
5	Compensation of current officers, directors,			1	<del></del>							
3	trustees, and key employees	74,697	67,975	5,975	747							
6	Compensation not included above, to disqualified		0.70.0	0/0/-								
•	persons (as defined under section 4958(f)(1)) and											
	persons described in section 4958(c)(3)(B)											
-		387,996	353,647	30,468	3,881							
7	Other salaries and wages	301,330		30,100	3,002							
8	Pension plan contributions (include section 401(k)	4,990	4,541	399	50							
_	and section 403(b) employer contributions)	61,334	55,814	4,907	613							
9	Other employee benefits	35,701	32,488	2,856	357							
10	Payroll taxes	33,701	32,400	2,000								
11	Fees for services (non-employees)											
a	Management	······································			<del></del>							
b	Legal											
C	Accounting	· <del>-</del>	· · · · · · · · · · · · · · · · · · ·		<del> </del>							
d	Lobbying			<del></del>								
0	Professional fundraising services See Part IV, line 17											
f	Investment management fees	100 000	02 670	07 015								
g	Other	120,893	93,678	27,215	<del> </del>							
12	Advertising and promotion	8,027	694	7,333	<del></del>							
13	Office expenses	21,437	16,078	5,359								
14	Information technology				<del></del>							
15	Royalties	40.070	24 055		<del></del>							
16	Occupancy	40,079	34,077	6,002	41							
17	Travel	82,033	36,391	45,642	<del></del>							
18	Payments of travel or entertainment expenses		•									
	for any federal, state, or local public officials		2 5 4 2	5 050	505							
19	Conferences, conventions, and meetings	9,421	3,543	5,253	625							
20	Interest	1,217		1,217								
21	Payments to affiliates											
22	Depreciation, depletion, and amortization	19,113	4,568	14,545								
23	Insurance	5,981	4,968	1,013								
24	Other expenses Itemize expenses not				1							
	covered above (Expenses grouped together											
	and labeled miscellaneous may not exceed											
	5% of total expenses shown on line 25 below )			_								
а	ELM ST DEMONSTRATION PROJ	589,634	589,634									
b	STIPENDS - SUMMER INTERNS	64,758	64,758									
C	TRAINING	59,133	59,133									
d	SUPPLIES	54,533	43,074	10,484	975							
ө	TELEPHONE	15,507	12,759	2,656	92							
f	All other expenses	34,966	15,574	19,392	<u></u>							
25	Total functional expenses. Add lines 1 through 24f	1,691,450	1,493,394	190,716	7,340							
26												
	SOP 98-2 Complete this line only if the											
	organization reported in column (B) joint costs from a combined educational campaign and											
	fundraising solicitation											
DAA					Form 990 (2008)							

<u>.P</u>	art >	C Balance Sheet		<u> </u>					
	•				(A) Beginning of year		( <b>B</b> End of		
					70,801			17,	201
	1	Cash—non-interest bearing			1,316,702	1		20,	
	2	Savings and temporary cash investments			1,310,702	3	- 3	20,	<u>550</u>
	3	Pledges and grants receivable, net Accounts receivable, net			162,658	4	1	66,	436
	4	•	ıotooo	kov	102,030	4		00,	330
	5	Receivables from current and former officers, directors, true employees, or other related parties. Complete Part II of Science 1.		·		5			
	_	Receivables from other disqualified persons (as defined un				-		-	
	6	4958(f)(1)) and persons described in section 4958(c)(3)(B)							
		Part II of Schedule L	Com	piete		6			
(A)	7	Notes and loans receivable, net			937,438	7	1,1	44.	229
ets	8	Inventories for sale or use			331,7230	8	-/-		
Assets	9	Prepaid expenses and deferred charges			8,622	9		13,	821
Q	10a	Land, buildings, and equipment cost basis	10a	119,524	<u> </u>	_		1	===
	ŀ	Less accumulated depreciation Complete	1.00						
	~	Part VI of Schedule D	10b	71,354	57,929	10c		48,	170
	11	Investments—publicly traded securities		/	1	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	Total assets. Add lines 1 through 15 (must equal line 34)			2,554,150	16	1,9	10,	786
_	17	Accounts payable and accrued expenses			100,402	17	2	98,	594
	18	Grants payable	944,438	18	1,1	83,	629		
	19	Deferred revenue	1,190,421	19		54,	774		
	20	Tax-exempt bond liabilities			20				
es	21	Escrow account liability Complete Part IV of Schedule D			21				
Liabilities	22	Payables to current and former officers, directors, trustees	s, key						
abi		employees, highest compensated employees, and disqual	lified						_
Ξ		persons Complete Part II of Schedule L				22			
	23	Secured mortgages and notes payable to unrelated third p	arties			23			
	24	Unsecured notes and loans payable				24			
	25	Other liabilities Complete Part X of Schedule D			33,556	25		<u>59,</u>	
	26	Total liabilities. Add lines 17 through 25	_		2,268,817	26	1,6	96,	116
ces		Organizations that follow SFAS 117, check here	and						
2		complete lines 27 through 29, and lines 33 and 34.				-	_ ا	4.4	ر ت
Balan	27	Unrestricted net assets			285,333	27	2	14,	6/6
Õ	28	Temporarily restricted net assets				28			
Fund	29	Permanently restricted net assets		<del>-</del> 1		29			
됴		Organizations that do not follow SFAS 117, check her	ө ▶ [						
ō		and complete lines 30 through 34.							
sts	30	Capital stock or trust principal, or current funds				30_			
Assets	31	Paid-in or capital surplus, or land, building, or equipment fi				31			
ğ	32	Retained earnings, endowment, accumulated income, or o	other fu	nas	285,333	32	2	14,	670
Net	33	Total net assets or fund balances			2,554,150	33	1,9		
	34	Total liabilities and net assets/fund balances			2,332,130	34	1,3	10,	<del>/ 0 (</del>
	art )	(I Financial Statements and Reporting		<del></del>				Yes	No
	۸-	counting method used to proper the Form 000	ash	X Accrual O	ther		<u> </u>	163	_ <del></del>
1		counting method used to prepare the Form 990 Cere the organization's financial statements compiled or revie					2a	_	X
2		ere the organization's financial statements complied of revie are the organization's financial statements audited by an ind			"		2b	X	_ <u></u>
		Yes" to lines 2a or 2b, does the organization have a commit			r oversight of		-=-		
•		e audit, review, or compilation of its financial statements and					2c	X	
3:		a result of a federal award, was the organization required to							
-		Single Audit Act and OMB Circular A-133?					3a		L
ı		Yes," did the organization undergo the required audit or aud	dits?				3b		
_									

#### SCHEDULE A (Form 990 or 990-EZ)

**Public Charity Status and Public Support** 

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

Reason for Public Charity Status (All organizations must complete this part.) (see instructions)

OMB No 1545-0047

Employer identification number

23-2531296

Schedule A (Form 990 or 990-EZ) 2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

\_\_\_\_\_\_

PENNSYLVANIA DOWNTOWN CENTER, INC.

A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).

The organization is not a private foundation because it is (Please check only one organization)

A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)

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

DAA

3	$\sqcup$	A hospital or	a cooperative hospital service	e organization described in secti	on 170(b)	(1)(A)(iii)	. (Attach	Schedu	ile H)				
4		A medical res	ical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name,										
		city, and state	•										
5	$\Box$	An organization	on operated for the benefit of	a college or university owned or	operated	by a gove	ernmenta	al unit de	scribed	ın			
	_	•	b)(1)(A)(iv). (Complete Part I	•		-, . g							
6	$\Box$	-		· / vernmental unit described in <b>sec</b>	tion 170/	h\/1\/A\/\	Λ						
	$\mathbf{x}$		-					. 41		مالط			
7	A	_	•	ubstantial part of its support from	a govern	mentai ur	iit or iror	n the gei	nerai pu	IDIIC			
_			section 170(b)(1)(A)(vi). (Co	·									
8	Н	A community	trust described in section 17	0(b)(1)(A)(vi). (Complete Part II	)								
9	Ш	An organization that normally receives (1) more than 33 1/3 % of its support from contributions, membership fees, and gross											
		receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3 % of its											
		support from	gross investment income and	l unrelated business taxable inco	me (less	section 5°	11 tax) fr	om busii	nesses				
	_	acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)											
10		An organization	on organized and operated ex	clusively to test for public safety	See sec	tion 509(	a)(4). (s	ee instru	ctions)				
11	П	An organization	on organized and operated ex	clusively for the benefit of, to pe	rform the	functions	of, or to	carry ou	it the				
	_	purposes of o	ne or more publicly supported	d organizations described in sec	tion 509(a	)(1) or se	ction 509	9(a)(2) S	See <b>sec</b>	tion			
		-		e type of supporting organization									
		a Type		c Type III-Functiona			d		e III–Oti	her			
6				nization is not controlled directly	, ,		or more	_					
•	ш	•		nd other than one or more public						ction			
			ection 509(a)(2)		.,								
f			,	mination from the IRS that it is a	Type I Ty	ne II or T	Tune III s	unnortin					
•		_	check this box	illiation from the two that was a	1,400 1, 1,	pc 11, 01 1	, pc c	оррогии	9				$\Box$
		•		an annual and an anatabut.	on from o	ov of the							Ш
g		ū	•	on accepted any gift or contributi	OH HORE A	ly of the							
		following per										<u> </u>	Γ
			· ·	ntrols, either alone or together wi	tn person:	s aescribe	ea in (ii)				[	Yes	No
			pelow, the governing body of	.,							11g(i)	<u> </u>	<del></del>
		(ii) A famıly	member of a person describe	ed in (i) above?							11g(ii)	<u> </u>	<u> </u>
		(iii) A 35% c	ontrolled entity of a person de	escribed in (i) or (ii) above?							11g(iii)		L
h		Provide the f	ollowing information about the	e organizations the organization	supports_								
(i)	Name	of supported	(ii) EIN	(III) Type of organization	(iv) Is the o	rganization	(v) Did y	ou notify	(vi) l	s the	(vii) Am	ount of	
	org	anization		(described on lines 1-9	1	sted in your	_	nization in	organizat		supp	ort	
				above or IRC section (see instructions))	governing	document?	∞l (i)	ot your oort?		zed in the S ?			
				(see insulactions))	Yes	No	Yes	No	Yes	No			
		<del>-</del>	<del></del>	<del></del>			<del></del>						
						ł		,	· '				
					<del>                                     </del>								
					1								
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					]	]			] .				
						ļ	<u> </u>	ļ					

	edule A (Form 990 or 990-EZ) 2008 PEN					-2531296	Page 2
Pa	art II Support Schedule for Or	ganizations De	scribed in Se	ctions 170(b)(1	)(A)(iv) and 17	'0(b)(1)(A)(vi)	
	(Complete only if you che	cked the box of	on line 5, 7, or	8 of Part I.)			
Sec	tion A. Public Support						
Ça	lendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	304,094	1,951,718	1,005,392	1,092,626	1,457,457	5,811,287
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1-3	304,094	1,951,718	1,005,392	1,092,626	1,457,457	5,811,287
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						5,811,287
Sec	tion B. Total Support						
Ca	lendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7	Amounts from line 4	304,094	1,951,718	1,005,392	1,092,626	1,457,457	5,811,287
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,506	26,589	4,183	3,808	3,312	39,398
9	Net income from unrelated business activities, whether or not the business is regularly carried on	19,560	16,160	13,572	11,661	8,303	69,256
10 11	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)  Total support. Add lines 7 through 10	2,800	1,435	4,417	2,150	2,466	13,268 5,933,209
12	Gross receipts from related activities, etc. (s	see instructions)				12	241,496
13	First five years. If the Form 990 is for the o	•	econd, third, fourth	n, or fifth tax vear a	s a section 501(c)(		
	organization, check this box and stop here	•		•		,	▶ □
Sec	tion C. Computation of Public Sup	port Percenta	ge	·····			
14	Public support percentage for 2008 (line 6,	column (f) divided b	y line 11, column (	())		14	97.9451 %
15	Public support percentage from 2007 Scheo					15	97.5132 %
16a	33 1/3 % support test—2008. If the organiz	zation did not check	the box on line 13	, and line 14 is 33	1/3 % or more, che	ck this box	
	and stop here. The organization qualifies a						▶ X
b	33 1/3 % support test—2007. If the organization		-	r 16a, and line 15 i	s 33 1/3 % or more	, check this	
-	box and stop here. The organization qualifi						▶ □
17a	10%-facts-and-circumstances test—2008	• • •	. •		or 16b, and line 14	ıs 10% or	
	more, and if the organization meets the "fac						
	organization meets the "facts-and-circumsta			•	•		▶ □
b	10%-facts-and-circumstances test—2007	•	•		<del>-</del>	e 15 is 10% or	• •
-	more, and if the organization meets the "fac						
	organization meets the "facts-and-circumsta		*	<u>-</u>	•		▶ 🗆
18	Private foundation. If the organization did	_	•		<del>-</del>	structions	▶ 🗆

Schedule A (Form 990 or 990-EZ) 2008

	ı.						
	edule A (Form 990 or 990-EZ) 2008 PE	rganizations De	escribed in Se	ction 509(a)(2)		-2531296	Page 3
500	(Complete only if you clution A. Public Support	recked the box o	on line 9 of Pa	rt I.)			<del></del>
	lendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(a) 2009	(f) Total
Vu	ichidal year (of fiscal year beginning iii)	(a) 2004	(b) 2005	(6) 2006	(a) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513			<u> </u>			
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						·-,
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1-5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
	Add lines 7a and 7b			<del></del>			
8	Public support (Subtract line 7c from line 6)			<del></del>			
500	tion B. Total Support			L		L	
	lendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	Amounts from line 6	(a) 2004	(6) 2003	(6) 2000	(4) 2007	(0) 2000	(i) rotar
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						
С	Add lines 10a and 10b	<u> </u>					
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carned on	·					···
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12)						
14	First five years. If the Form 990 is for the		second, third, fourt	h, or fifth tax year a	is a section 501(c)	(3)	_
	organization, check this box and stop he						<u>▶                                  </u>
<u>Sec</u>	tion C. Computation of Public S					<del></del>	
15	Public support percentage for 2008 (line 8		•	<b>(f)</b> )		15	%
16	Public support percentage from 2007 Sch	edule A, Part IV-A, III	ne 27g			16	%

					7 1 1110 -13
O 4:	_	. ^	 	- 4 1	Doroontago

<u> </u>	aon D. Computation of investment income referriage		
17	Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f))	17	%
18	Investment income percentage from 2007 Schedule A, Part IV-A, line 27h	18	%

19a 33 1/3 % support tests—2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3 %, and line 17 is not more than 33 1/3 %, check this box and stop here. The organization qualifies as a publicly supported organization

b	33 1/3 % support tests—2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and
	line 18 is not more than 33 1/3 %, check this box and stop here. The organization qualifies as a publicly supported organization

Schedule A (Form 990 or 990-EZ) 2008 PENNSYLVANIA DOWNTOWN CENTER, INC. 23-2531296

Page 4

Supplemental Information. Complete this part to provide the explanation required by Part II, line 10;

Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. (see instructions)

PART II, LINE 10 - OTHER INCOME DETAIL

**MISCELLANEOUS** 

\$

13,268

#### SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

#### **Supplemental Financial Statements**

▶ Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990. Part IV, line 6, 7, 8, 9, 10, 11, or 12.

OMB No 1545-0047

2008

Open to Public

Inspection Name of the organization Employer identification number PENNSYLVANIA DOWNTOWN CENTER, INC. 23-2531296 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year 2 Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit? Yes Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Protection of natural habitat Preservation of certified historic structure Preservation of open space Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year a Total number of conservation easements 2a 2b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during 3 the taxable year 

\_ \_ \_ \_ \_ \_ Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds? Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year 7 Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section □l No Yes 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art. historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X

Sche			DOWNTOWN			<u>23-25</u>	_			Page 2
Pa	rt III Organizations Maintaini							ets (c	ontinue	d)(b
3	Using the organization's accession and oth items (check all that apply)	er records	s, check any of the f	following that are	a significant	use of its colle	ection			
а	Public exhibition		d 🗌 Loan	or exchange pro	grams					
b	Scholarly research		e 🗌 Othe		•					
С	Preservation for future generations			<del></del> -				_		
4	Provide a description of the organization's of Part XIV	collections	and explain how th	ney further the or	ganızatıon's e	xempt purpo	se in			
5	During the year, did the organization solicit assets to be sold to raise funds rather than	or receive	e donations of art, h	istorical treasure ne organization's	s, or other sin	nılar			Yes	☐ No
Pa	rt IV Trust, Escrow and Custo	dial Ar	rangements. C	omplete if or	ganization	answered	"Yes" to	Form	990,	
	Part IV, line 9, or reporte									
1a	Is the organization an agent, trustee, custo					not				
	included on Form 990, Part X?		·						Yes	☐ No
ь	If "Yes," explain the arrangement in Part XI	V and com	nplete the following	table						
	. ,								Amount	
С	Beginning balance						1c			
d	Additions during the year						1d			
e	Distributions during the year						1e			
f	Ending balance						1f			
2a	Did the organization include an amount on	Form 990.	Part X, line 21?						Yes	No
	If "Yes," explain the arrangement in Part XI		,					_		
	rt V Endowment Funds. Com	plete if	organization a	nswered "Ye	s" to Form	990, Part	IV, line 10	0.		
			(a) Current year	(b) Prior yea		years back	(d) Three yea		(e) Four	years back
1a	Beginning of year balance									
b	Contributions						•			
С	Investment earnings or losses									
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses									
q	End of year balance									
2	Provide the estimated percentage of the year	ar end ba	lance held as			<del></del>			-	
а	Board designated or quasi-endowment		%							
b	Permanent endowment	%								
С	Term endowment									
3a	Are there endowment funds not in the poss	ession of	the organization tha	at are held and a	dministered fo	or the			_	
	organization by		•							Yes No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(ii)	
b	If "Yes" to 3a(ii), are the related organization	ns listed a	s required on Sche	dule R?					3b	
4	Describe in Part XIV the intended uses of t	he organiz	zation's endowment	funds						
Pa	rt VI Investments—Land, Bui	ldings,	and Equipmen	t. See Form	990, Part 2	K, line 10.				
	Description of investment		a) Cost or other basis	(b) Cos	t or other		reciation		(d) Book v	value
			(investment)	basis	(other)					
1a	Land									
b	Buildings									
С	Leasehold improvements						_			
d	Equipment		<u> </u>							<del></del>
9	Other			:	119,52 <b>4</b>	<u> </u>	71,3 <u>5</u>	4		18,170
Tota	I. Add lines 1a-1e (Column (d) should equa	l Form 9 <u>9</u> 0	0, Part X, column (8	3), line 10(c))				<u> </u>	4	18 <u>,170</u>

23-2531296

Page 3

Schedule D (Form 990) 2008 PENNSYLVANIA DOWNTOWN CENTER, INC.

	dule D (Form 990) 2008 PENNSYLVANIA DOWNTOWN CENTER,			<u> 296 </u>	Page 4
<u>Pa</u>	rt XI Reconciliation of Change in Net Assets from Form 990 to	Finar	icial Statements		
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1	1,753,013
2	Total expenses (Form 990, Part IX, column (A), line 25)			2	1,691,450
3	Excess or (deficit) for the year Subtract line 2 from line 1			3	61,563
4	Net unrealized gains (losses) on investments			4	
5	Donated services and use of facilities			5	
6	Investment expenses			6	
7	Prior period adjustments			7	
8	Other (Describe in Part XIV)			8	
9	Total adjustments (net) Add lines 4-8			9	
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9		<del></del>	10	61,563
<u>Pa</u>	rt XII Reconciliation of Revenue per Audited Financial Stateme	nts W	ith Revenue per R	<u>eturn</u>	
1	Total revenue, gains, and other support per audited financial statements			1	1,753,013
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
а	Net unrealized gains on investments	2a		_	
b	Donated services and use of facilities	2b		_	
C	Recoveries of prior year grants	2c	<u></u>	_	
d	Other (Describe in Part XIV)	2d			
e	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	1,753,013
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	J			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b	L		
С	Add lines 4a and 4b			4c	
_ 5	Total revenue Add lines 3 and 4c. (This should equal Form 990, Part 1, line 12)			5	1,753,013
<u>Pa</u>	rt XIII Reconciliation of Expenses per Audited Financial Statement	ents V	Vith Expenses per	Return	
1	Total expenses and losses per audited financial statements			1	1,691,450
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
а	Donated services and use of facilities	2a		]	
b	Prior year adjustments	2b			
С	Losses reported on Form 990, Part IX, line 25	2c	<del></del> _		
d	Other (Describe in Part XIV)	2d		<b>→</b>	
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1	1	ſ	3	1,691,450
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b			
С	Add lines 4a and 4b			4c	
_ 5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)		<del>,</del>	. 5	1,691,450
	rt XIV Supplemental Information				
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines	s 1a and	d 4, Part IV, lines 1b		
and 2	b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d an	d 4b			
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Schedule D (Fo	orm 990) 200	8 <b>PE</b>	NNSY	LVANIA	DOWN	ITOWN	CENTE	R, I	NC.	23-	253129	6			Page 5
Schedule D (Fo	Supplen	nental li	nforma	tion (contin	ued)								_	-	
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#### SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

#### Supplemental Information to Form 990

► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008
Open to Public Inspection

Name of the organization

PENNSYLVANIA DOWNTOWN CENTER, INC.

Employer identification number 23–2531296

FORM 990, PART V, LINE 3B - FORM 990-T NOT FILED EXPLANATION

THE CENTER DID NOT PURSUE A MEMBERSHIP DIRECTORY DURING THIS FISCAL YEAR

BECAUSE IT HAS BEEN EXPLORING ALTERNATIVE, COST-EFFECTIVE OPTIONS IN

REGARDS TO PERSONNEL AND BUDGET CUTS. THE CENTER HAS BEEN EXPLORING THE

POSSIBILITY OF POSTING THE DIRECTORY ON-LINE BEGINING IN 2009-2010.

FORM 990, PART VI, LINE 10 - ORGANIZATION'S PROCESS USED TO REVIEW FORM 990 ONCE REBECCA STAUB RECEIVES THE 990 DRAFT FORMS FROM HAMILTON & MUSSER, THE TAX RETURN IS REVIEWED BY THE FINANCE COMMITTEE FOR APPROVAL AND SUGGESTIONS AND THEN IS SENT TO THE BOARD OF DIRECTORS FOR FINAL REVIEW AND APPROVAL. AT THE POINT OF APPROVAL, REBECCA NOTIFIES HAMILTON & MUSSER THAT THE 990 IS READY FOR SIGNATURE AND RELEASE.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY

AS PDC HAS NOT TRADITIONALLY MADE GRANTS, LOANS, OR PAID BOARD MEMBERS, AND

HAS AWARDED VERY FEW CONTRACTS OVER THE YEARS, CONFLICT OF INTEREST HAS NOT

BEEN A SIGNIFICANT ISSUE FOR THIS ORGANIZATION. MOST POTENTIAL CONFLICTS

HAVE INVOLVED THE ORGANIZATION ESTABLISHING BANK ACCOUNTS AT A FINANCIAL

INSTITUTION WITH A MEMBER OF THE BOARD. THE EXECUTIVE DIRECTOR HAS HAD THE

JOB OF INDICATING SITUATIONS TO THE BOARD WHERE A CONFLICT OF INTEREST

COULD BE AN ISSUE. IN THOSE SITUATIONS WHERE A CONFLICT MAY BE APPARENT,

THE INVOLVED MEMBER MUST DISCLOSE THE CONFLICT, REMOVE HIMSELF/HERSELF FROM

DEBATE AND RECUSE HIMSELF/HERSELF FROM VOTING ON THE MATTER. PDC IS IN THE

PROCESS OF UPGRADING ITS CONFLICT OF INTEREST POLICY. NEW FORMS HAVE BEEN

DEVELOPED BY LEGAL COUNSEL THAT WILL ALLOW THE ORGANIZATION TO MORE CLOSELY

MONITOR AND ENFORCE COMPLIANCE ON A MORE FORMAL AND ANNUAL BASIS. AS PDC EXPLORES MORE DIRECT SERVICES TO COMMUNITIES IN THE FUTURE, GREATER MONITORING AND ENFORCEMENT WILL BE NEEDED. IT IS ANTICIPATED THAT PDC WILL GRANT OVERSIGHT OF THIS FUNCTION TO EITHER THE EXECUTIVE COMMITTEE OR THE GOVERNANCE COMMITTEE, OR PERHAPS A NON-BOARD ADVISORY COUNCIL, AT ITS FIRST MEETING IN 2010.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL
THE PDC EXECUTIVE COMMITTEE FUNCTIONS AS THE ORGANIZATION'S PERSONNEL
COMMITTEE. THE EXECUTIVE DIRECTOR IS REVIEWED ANNUALY BY THE EXECUTIVE
COMMITTEE IN THEIR ROLE AS THE PERSONNEL COMMITTEE, WHO THEN DETERMINES ANY
COMPENSATION ADJUSTMENT. THE EXECUTIVE DIRECTOR IS NEVER INVOLVED IN THE
ACTUAL DELIBERATIONS ON SALARY ADJUSTMENTS. ANY INCREASE IN SALARY FOR THE
EXECUTIVE DIRECTOR IS IN KEEPING WITH THE COST OF LIVING AND MERIT INCREASE
GOALS SET BY THE EXECUTIVE COMMITTEE. AVAILABLE ON-LINE SALARY SURVEY
TOOLS, SUCH AS PAY-SCALE, ARE USED TO DETERMINE RELATIVE SALARY
COMPARABILITY FOR SIMILAR NON-PROFIT POSITIONS.

FORM 990, PART VI, LINE 15B - COMPENSATION PROCESS FOR OFFICERS

ALL OTHER STAFF MEMBERS ARE REVIEWED ANNUALLY BY THE EXECUTIVE DIRECTOR WHO
IS SOLELY RESPONSIBLE FOR SALARY ADJUSTMENTS, SUBJECT ONCE AGAIN TO COST OF
LIVING AND MERIT INCREASE GOALS SET BY THE EXECUTIVE COMMITTEE. COST OF
LIVING ADJUSMENTS, IF SO APPROVED BY THE EXECUTIVE COMMITTEE, ARE AUTOMATIC
ON THE FIRST DAY OF THE NEW FISCAL YEAR. MERIT INCREASES ARE AT THE
DISCRETION OF THE EXECUTIVE DIRECTOR, SUBJECT TO PERFORMANCE, AND ARE
AWARDED ON OR AROUND AN EMPLOYEE'S ANNIVERSARY DATE. AT NO TIME SINCE 2000
HAS THE COMBINED COST OF LIVING AND MERIT INCREASE GOALS EXCEEDED 5%

Name of the organization

PENNSYLVANIA DOWNTOWN CENTER, INC.

Employer Identification number 23-2531296

ANNUALLY.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION
THE CENTER'S DOCUMENTS ARE CURRENTLY MADE AVAILABLE UPON REQUEST. DURING
THE FISCAL YEAR ENDING JUNE 30, 2009, THE CENTER BEGAN AN EXPANSION TO ITS
CURRENT WEBSITE AND UPON COMPLETION OF THE WEBSITE IN THE FISCAL YEAR
ENDING JUNE 30, 2010, THAT INFORMATION WILL ALL BE HOUSED IN A SPECIAL
SECTION OF THE NEW WEBSITE, MOST LIKELY UNDER THE BOARD SECTION, FOR PUBLIC
VIEW.

## Form **4562**

Department of the Treasury Internal Revenue Service (99

#### **Depreciation and Amortization**

(Including Information on Listed Property)

► See separate instructions. ► Attach to your tax return.

OMB No 1545-0172 2008

tachment equence No 67

Name(s) shown on return Identifying number PENNSYLVANIA DOWNTOWN CENTER, 23-2531296 Business or activity to which this form relates INDIRECT DEPRECIATION **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I 250,000 Maximum amount. See the instructions for a higher limit for certain businesses. 2 2 Total cost of section 179 property placed in service (see instructions) 800,000 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-4 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions (a) Description of property (b) Cost (business use only) (c) Elected cost 6 7 Listed property Enter the amount from line 29 8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 9 Tentative deduction Enter the smaller of line 5 or line 8 10 Carryover of disallowed deduction from line 13 of your 2007 Form 4562 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 12 13 13 Carryover of disallowed deduction to 2009 Add lines 9 and 10, less line 12 Note: Do not use Part II or Part III below for listed property. Instead, use Part V Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.) Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) 14 15 Property subject to section 168(f)(1) election 15 19,114 16 Other depreciation (including ACRS) MACRS Depreciation (Do not include listed property.) (See instructions.) Part III Section A 17 17 MACRS deductions for assets placed in service in tax years beginning before 2008 18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B—Assets Placed in Service During 2008 Tax Year Using the General Depreciation System (c) Basis for depreciation (b) Month and (d) Recovery (a) Classification of property (business/investment use (e) Convention (f) Method (a) Depreciation deduction year placed in penod only-see instructions) service 19a 3-year property **b** 5-year property 7-year property d 10-year property 15-year property 20-year property 25-year property 25 yrs S/L ММ S/L 27 5 yrs Residential rental property MM 27 5 yrs S/L Nonresidential real 39 yrs S/L property S/L Section C—Assets Placed in Service During 2008 Tax Year Using the Alternative Depreciation System 20a Class life S/L 12 yrs S/L b 12-year MM S/L 40-year 40 vrs Part IV Summary (See instructions.) 21 Listed property Enter amount from line 28 21 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 19,114 22 Enter here and on the appropriate lines of your return Partnerships and S corporations-see instr. For assets shown above and placed in service during the current year. enter the portion of the basis attributable to section 263A costs

Forms		
990./	990-PF	1

#### Other Notes and Loans Receivable

For calendar year 2008, or tax year beginning 7/01/08, and ending

6/30/09

2008

Totals

Name											Emplo	yer Identi	fication Number
PENNS	SYLVA	NIA D	OWN	TOWN	CEN	TER	, INC.				23-	25312	296
FORM	990,	PART	х,	LINE	7	– AI	DDITION.	AL I	NFORMATION	T		<u> </u>	
				borrower						Relationship to dis	gualified	porcon	
(1) HOU	JSING	ASSI			ROJ	ECT				rveiationship to dis	quaimeu	person	
(2)				-			<del></del>						<del></del>
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(10)								-	<del></del>				
	Organala	mount	$\neg \top$			$\neg$	Moturbi						Internet
	Original a			Date o	f loan		Matunty date		R	epayment terms			Interest rate
(1)													
(2)	<u>-</u>												
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		_					<u>.                                    </u>						
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					<u> </u>		<u> </u>		alance due at	Balance due a		Fair	market value
	Co	nsideration	furnis	hed by le	nd <u>er</u>				eginning of year	end of year			990-PF only)
(1)									937,438	1,144,	229		<del></del>
(2)													
(3)										<del> </del>			
<u>(4)</u>									<u> </u>				<del></del>
<u>(5)</u> <u>(6)</u>									<del></del>	<del> </del>			
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(8)					<del></del>		<del></del>						
(9)													
(10)													
Totals									937,438	1,144,	229		

23-2531296

### Federal Asset Report Form 990, Page 1

Asset		Description	<del></del>	Date I <u>n Service</u>	Cost	Bus %	Sec 179Bonus	Basis for Depr	<u>Per</u>	Conv Meth	Prior	Current
Other	Depreciation:											
5	LCD			5/12/99	4,856			4,856	5	MO S/L	4,856	0
6	Lucent	Sold/Scrapped.	6/30/09	2/26/99	2 170			3,170	7	MO S/L	3,170	0
"	Lucciit	Sold/Scrapped	6/30/09	2120177	3,170			3,170			3,170	U
9	File	••		8/02/00	225			225		MO S/L	225	0
19	Gateway	Sold/Scrapped	6/30/09	2/09/02	2,125			2,125	3	MO S/L	2,125	0
23	Portable PA	оола вепарреа	0/30/07	8/01/02	684			684	7		578	98
24	LCD	Cald/Caronnad	6/20/00	9/04/02	2,475			2,475	3	MO S/L	2,475	0
27	Office	Sold/Scrapped	0/30/09	7/11/03	1,341			1,341	7	MO S/L	958	192
30	File			1/28/04	<b>599</b>			599	7	MO S/L	464	86
31	Office			3/10/03	1,357			1,357	7		1,034	193
32	Binding	Sold/Scrapped	6/30/09	8/16/04	1,961			1,961	5	MO S/L	1,536	392
33	Sony Alt	Solar Scrapped	0/30/07	9/17/04	2,881			2,881	5	MO S/L	2,161	577
40		Sold/Scrapped:	6/30/09						_			
40 41	Sharp Dell Optiplex			5/13/05 5/06/05	2,610 1,838			2,610 1,838		MO S/L MO S/L	2,610 1,838	0
71	Den Optipiex	Sold/Scrapped	6/30/09	3/00/03	1,636			1,030	3	MO 3/L	1,656	U
42	Dell Optiplex	• •		5/06/05	1,838			1,838	3	MO S/L	1,838	0
12	Thus Ties	Sold/Scrapped:	6/30/09	4/11/05	705			705	7	MO SII	260	114
43 44	Three Tier Three Tier			4/11/05 4/11/05	795 795			795 795	7	MO S/L MO S/L	369 369	114 114
45	2 Computer			4/04/05	495			495	7		230	71
47	Eddy's			8/24/05	1,333			1,333	3	MO S/L	1,259	74
48	Camcorder			11/21/06	3,064			3,064	5 7	MO S/L MO S/L	970 594	613
49 51	Book Case PowerEdge			10/26/05 3/02/06	1,558 2,256			1,558 2,256		MO S/L MO S/L	1,053	222 451
53	Projector			3/28/06	1,081			1,081	7		348	154
54	Projector			2/21/07	1,028			1,028		MO S/L	196	147
55 56	Saturn Saturn 2005			11/18/02 5/31/05	14,813			14,813 17,375		MO S/L MO S/L	14,813 10,714	0 3,475
57	Saturn 2007			12/16/06	17,375 20,984			20,984	5		6,645	4,197
58	PDC Logo			3/01/02	2,745			2,745	15	MO S/L	1,164	183
59	Computer	0.11/01	C /2 O /0 O	3/29/02	2,772			2,772	7	MO S/L	2,475	297
60	Conference	Sold/Scrapped:	6/30/09	3/01/04	850			850	7	MO S/L	759	91
61	Goldmine			5/02/01	1,060			1,060	5	MO S/L	1,060	0
		Sold/Scrapped <sup>1</sup>	6/30/09									
62	Graphic	C-14/C	6/20/00	4/29/02	1,795			1,795	5	MO S/L	1,795	0
63	QuickBooks	Sold/Scrapped.	0/30/09	9/17/04	2,263			2,263	3	MO S/L	2,263	0
	-	Sold/Scrapped	6/30/09						,			
	Office 2003	• •		9/03/04	2,240			2,240	3		2,240	0
65 66	Arcview 9 0 Software			9/03/04 12/21/05	1,270 2,437			1,270 2,437	3	MO S/L MO S/L	1,270 2,031	0 406
	Toshiba Lapto	n - Rebecca		9/10/07	1,202			1,202	3		334	400
68	Kyocera Copie			10/01/07	11,766			11,766		MO S/L	1,765	2,353
	Projector			3/21/08	848			848	5		42	170
70 71	NEC Phone Sy Toshiba Lapto			6/04/08 6/06/08	7,015 1,889			7,015 1,889	5	MO S/L MO S/L	117 52	1,403 630
	ACT Software			4/21/08	3,691			3,691		MO S/L MO S/L	205	1,230
73	Intern Office in			2/06/08	1,650			1,650	7	MO S/L	98	236
	2 PHONES	DCD&CL17		7/11/08	634			634		MO S/L	0	127
	COMPUTERS SOFTWARE	- KED&ELIZ		12/31/08 12/22/08	3,361 432			3,361 432		MO S/L MO S/L	0	336 43
77	FILE CABINE	T FOR BILLS OFF	ICE	1/22/09	646			646	7	MO S/L	0	38
	PLOTTER PR			6/30/09	4,457		-	<u>4,457</u>		MO S/L	0	0
	Tot	al Other Depreciat	ion	_	148,560		-	148,560			81,098	19,114
	Tot	tal ACRS and Othe	r Deprec	iation =	148,560		=	148,560			<u>81,098</u>	19,114

23-2531296

# Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus Sec Bas % 179Bonus for D		Prior	Current
	Grand Totals Less: Dispositions Less: Start-up/Org Expense	_	148,560 29,034 0		3,560 9,034 0	81,098 27,592 0	19,114 1,266 0
	Net Grand Totals	_	119,526	119	<u>9,526</u>	53,506	17,848

# Form **8868**(Rev April 2009)

Department of the Treasury

## Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

OMB No 1545-1709

Internal Revenu	e Service		
<ul><li>If you are</li></ul>	filing for an Automatic 3-Month Extension, complete only Part I and check this box		► X
<ul><li>If you are</li></ul>	filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form)	)	
Do not comp	lete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form	n 8868	
Part I	Automatic 3-Month Extension of Time. Only submit original (no copies needed).		
A corporation Part I only	required to file Form 990-T and requesting an automatic 6-month extension—check this box and complete		▶ 🗆
	orations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extensione tax returns	sion of	
one of the reti electronically	ling (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time urns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 886 if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part	8 group	m
8868 For mo	re details on the electronic filing of this form, visit www irs gov/efile and click on e-file for Chanties & Nonprofit	s	
Type or print	Name of Exempt Organization	Employ	er identification number
File by the	PENNSYLVANIA DOWNTOWN CENTER, INC.	23-2	531296
due date for filing your	Number, street, and room or suite no If a P O box, see instructions		
return See	130 LOCUST STREET 101		
instructions	City, town or post office, state, and ZIP code For a foreign address, see instructions  HARRISBURG  PA 17101		
Form 99 Form 99 Form 99	90-BL Form 990-T (sec. 401(a) or 408(a) trust) 90-EZ Form 990-T (trust other than above)		Form 4720 Form 5227 Form 6069 Form 8870
Telephon  If the orga  If this is for the whole	e No  717-233-4675  FAX No  anization does not have an office or place of business in the United States, check this box or a Group Return, enter the organization's four digit Group Exemption Number (GEN) group, check this box  If it is for part of the group, check this box  and a and EINs of all members the extension will cover	If this is	▶ □
until	ast an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time $2/15/10$ , to file the exempt organization return for the organization named above. The extension is organization's return for. calendar year or tax year beginning $7/01/08$ , and ending $6/30/09$		
2 If this to	ax year is for less than 12 months, check reason.	n account	ing period
	pplication is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax,		
	y nonrefundable credits. See instructions.	3a	\$
	pplication is for Form 990-PF or 990-T, enter any refundable credits and estimated tax	3ь	\$
	nts made Include any pnor year overpayment allowed as a credit  Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required,	30	
	with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment		
	) See instructions	3с	\$
Caution. If yo	ou are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-Enstructions	0	