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Return of Organization Exempt From Income Tax

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

AI	or th	e 2009	9 cale		year, or ta						, 2009, aı	nd e	nding			, 2	0				
B	check it ap	pplicable	Please	C Na	me of organiza	ation PHILAD	ELPHIA I	NDUSTRI	AL DEVE	LOPME	NT CORP			D Emplo	yer identifi	cation nur	nber				
Γ	Addre	955 10	use IRS label or	1 120	ing Business A	S								23-	605085	8					
	7	change	print or		mber and stre	et (or PO bo	x if mail is	not delive	red to stre	et add	ress)	1	Room/suite	E Telept	none numbe	r					
X	Initial	return	type. See	260	00 CENTF	RE SOUA	RE WES	ST						(215)	496-8	3122	122				
+		inated	Specific	Cit	y or town, stat									- `							
-	Amen		instruc- tions.	1	ILADELPH	•								G Gross	receipts \$	13	752	,175.			
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L	pend	ing [RKET ST									affilia	tes?	⊢	4	 -			
-								$\overline{}$		Г				1 ''	all affiliates inc	L	Yes	No			
Ļ.		empt sta			501(c) (4)		no)	4947(a)(1) or]!	527			†	o," attach a lis		ctions)				
<u></u>					C-PA.ORG		- 		т:						p exemption r						
		<u>-</u> _			Corporation	Trust	Associa	ition	Other	<u> </u>		LY	ear of forma	tion 195	/ M State	of legal de	omicile	PA.			
Pa	art I	Sur	nmary	У												-					
	1	Briefly	descr	ibe th	e organizatio	n's mission	or most s	significar	nt activitie	es				_~							
PIDC PLANS AND IMPLEMENTS ECONOMIC DEVELOPMENT INITIATIVES WHICH																					
ENHANCE THE COMPETITIVE ENVIRONMENT, GENERATE JOBS AND PRODUCE HIC													HIGHER	?							
ű	1	TAX	RAT	ABLE	ES THROU	GHOUT I	HE CI	TY OF	F PHI	LADE	ELPHIA.	•									
Š	2	Check	this bo	ох 🕨	If the c	rganization	discontin	nued its	operatio	ns or	disposed o	of mor	e than 25%	6 of its net	assets						
8	3	Numb	er of v	oting i	members of	the governir	ng body (F	art VI, I	ne 1a)						3			30			
es	4	Numb	er of in	ndepei	ndent voting	members o	f the gov	ernina bo	odv (Part	VI. Jır	ne 1b)				4			30			
Activities	5				mployees (Pa													78			
Ċ.	6				olunteers (est										• • • •			0			
٠,					ted business			 Il columi	n (C) line	 12					7a			0.			
	.u	Notur	rolato	d huei	ness taxable	income from	n Form 9	00-T line	- 34	٠,٢					7 b			0 .			
—	-	Met ut	ii ciatei	u busi	iriess taxable	modifie noi	ii i Oiiii 3.	30-1, 11116	5 54		• • • • •	· · ·	· · · · · ·	Prior Y			rent Y				
	8	Contri	hution	c and	aranta (Part)	/III line 1h\									0.		Tent in	0.			
E	0	Danasa		s and	grants (Part	/!!! !!== 0=\							• • • •	12,30		13	700	,837.			
Revenue	9	Progra	ım ser	vice re	evenue (Part \	viii, iine 2g)							• • •								
æ		Invest	ment II	ncome	e (Part VIII, c	olumn (A), li	nes 3, 4,	and /d)							3,421.		42	, 338.			
	11				art VIII, colum									10 (5:	0.		750	175			
	12				d lines 8 thre									12,65		13		,175.			
	13				r amounts pai									5/	7,915.		152	, 304.			
	14				for members			•							0.	<u>-</u> -		0.			
es	15				mpensation,									10,43		8	8,809,342				
Expense	16a	Profes	sional	fundr	aising fees (F	art IX, colur	nn (A), lın	ne 11e) .							0.			0.			
Ž	b	Total f	undrai	ısıng e	expenses, Par	t IX, column	(D), line	25) 🕨 _			0.										
ш	117	Other	expens	ses (F	art IX, colum	n (A), lines	11a-11d.	111-241)	1						3,305.	9	, 056	,769.			
	18	Total 6	expens	es A	dd lines 13-1	7 (must equ	al Part I	860g		2 5)	l			14,683				,415.			
_	19	Reven	ue les	s expe	enses. Subtra	act line 18 fro	om li ne 1 2	2 			ပ္တု		🗀	-2,032	2,030.	- 4	, 266	,240.			
5									7 201	10	8			Beginning	of Year	En	d of Ye	ar			
Net Assets or Fund Balances	20	Total a	assets ((Part)	X, line 16)		143	טבנ ₩	18 <u>4</u> Ul	IU	\ <u>\</u>			43,693	3,214.	38	084	,193.			
ASS	21				rt X, line 26)	• • • • •					룺			32,01				,889.			
ž š	22			-	balances S	ubtract line	a1 from(h	160	J.ME					11,676				,304.			
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Ma	y the I	RS dis	cuss th	nıs ret	turn with the	preparer sho	wn above	e? (see ir	nstruction	ns) .						XΥ	'es	No			
Foi	Priva	cy Act	and P	aperv	vork Reduct	on Act Noti	ce, see th	ne separ	ate instri	uction	s.*					Fo	rm 990	(2009)			

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.* JSA 9E1010 3 000

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Pa	art III Statement of Program Service Accomplishments
	Briefly describe the organization's mission PIDC PLANS AND IMPLEMENTS ECONOMIC DEVELOPMENT INITIATIVES WHICH
	ENHANCE THE COMPETITIVE ENVIRONMENT, GENERATE JOBS AND PRODUCE HIGHER
	TAX RATABLES THROUGHOUT THE CITY OF PHILADELPHIA.
	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
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 \$4,180,586 including grants of \$0) (Revenue \$4,630,157) BELOW MARKET RATE LENDING- PROVIDE SUPPORT TO RELATED/COMBINED
	ENTITIES THAT ISSUE SUBORDINATED DEBT FINANCING WITH BELOW MARKET
	INTEREST RATES FOR CAPITAL PROJECTS FOR THE PURPOSE OF RETENTION
	AND GROWTH OF EMPLOYMENT IN THE CITY OF PHILADELPHIA.
4b	(Code.) (Expenses \$ 1,803,983 including grants of \$ 0) (Revenue \$ 3,464,281) PROPERTY MANAGMENT- PROVIDE SERVICES TO THE CITY OF PHILADELPHIA TO SELL OR LEASE CONVEYED PROPERTY. PIDC HAS EXPERTISE IN REAL
	ESTATE USAGE AND NEGOTIATIONS INVOLVING COMMERCIAL AND INDUSTRIAL
	DEVELOPMENT WHICH BENEFITS THE CITY OF PHILADELPHIA AND GREATER
	METROPOLITAN AREA. THE SERVICES PROVIDED INCLUDE MAINTENANCE OF
	GROUNDS, OBTAINING INSURANCE ON PROPERTIES, DEFENDING AGAINST LAW
	SUITS INVOLVING PROPERTY, ETC.
4 c	(Code) (Expenses \$6,298,671 including grants of \$152,304_) (Revenue \$5,236,733_) GRANT/ CONTRACT MANAGEMENT- MANAGE FUNDING/DISTRIBUTION OF GRANTS AND CONTRACTS TO BE USED FOR CAPITAL/COMMERCIAL PROJECTS USED TO
	FACILITATE JOBS CREATION AND ECONOMIC DEVELOPMENT WITHIN THE CITY
	OF PHILADELPHIA.
4.	Other program services (Describe in Schedule O) ATTACHMENT 2
70	(Expenses \$ 247,465 including grants of \$ 0) (Revenue \$ 378,666)
4 e	e Total program service expenses ► 12,530,705.
_	

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)? If "Yes,"			
	complete Schedule A	1		Х
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	'	Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete			
	Schedule C, Part II	4		
5	Sections 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		X
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? If "Yes,"			
	complete Schedule D, Part I	6		Х
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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	<u> </u>		
•	complete Schedule D, Part III	8		Х
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	Х	
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or	9		
	quasi-endowments? If" Yes," complete Schedule D, Part V	10		Х
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI,	10		
• •	VII, VIII, IX, or X as applicable	11	Х	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete		- '	
	Schedule D, Part VI.			
	Did the organization report an amount for investments—other-securities in Part X, line 12 that is 5% or more			
_	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII			
	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16° If "Yes," complete Schedule D, Part VIII.			
_	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
Ū	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX		- 1	
	Did the organization report an amount for other liabilities in Part X, line 25° If "Yes," complete Schedule D, Part X		J	1
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	'	· İ	1
•	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? If "Yes," complete Schedule D, Part X			- [
12	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes,"</i>		1	1
12	complete Cahadida D. Barta VI. VII. and VIII.	40		
124	· ·	12		
124				1
12	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	10		
13		13		$-\frac{\Lambda}{X}$
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		
D	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			v
4.5	business, and program service activities outside the United States? 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		:	v
4.0	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		.]	v
4-	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		_X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services	l :		V
4.0	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		_X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			17
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			• •
	If "Yes," complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X

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	ļ		[
	in the United States on Part IX, column (A), line 17 If "Yes," complete Schedule I, Parts I and II	21	Х	
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? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			1
	employees? If "Yes," complete Schedule J	23	Х	
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines			•
	24b through 24d and complete Schedule K. If "No," go to question 25	24a		Х
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	- 1 -	_	
·	to defease any tax-exempt bonds?	24c		
ч	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction		_	
u	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
h	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			ļ
	990-EZ? If "Yes," complete Schedule L, Part I	25b		Х
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		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?		l	•
	If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):	İ		
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
~	Schedule L. Part V	28b		Х
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a			
_	family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L	,		
	Part IV	28c	Х	
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			
	conservation contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
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	Χ	
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		Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
	organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and			
	19? Note. All Form 990 filers are required to complete Schedule O	38	Х	
			990	(2009)

Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
1 a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S. Information Returns. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c	X	
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 78			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see			
	instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by			
	this return?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		Х
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 Bank			
	and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
C	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding			
	Prohibited Tax Shelter Transaction?	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?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	ا ۔. ا		
_	gifts were not tax deductible?	6b		_
	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
h	and services provided to the payor?	7a 7b		-
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	76		
·	required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			
•	benefit contract?	7e	- ~-	_
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as			
	required?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. 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	Sponsoring organizations maintaining donor advised funds.		İ	-
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
a	Initiation fees and capital contributions included on Part VIII, line 12			
. b	, , , , , , , , , , , , , , , , , , , ,			
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
D	Gross income from other sources (Do not net amounts due or paid to other sources against			
100	amounts due or received from them)	122		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	12a		L
	1. 100, Other the amount of tax exempt interest received of accreed during the year 120	L		

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.

Sect	ion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body			
b	Enter the number of voting members that are independent			
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		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?	_3		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		Χ
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		Х
ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	Х	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following.			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
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	9a		Х
Sect	ion B. Policies (This Section B requests information about policies not required by the Internal			
	enue Code.)			
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		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?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the			
• •	form?	11		Χ
11Δ	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a		12a	Χ	
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
_	rise to conflicts?	12b		Χ
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
•	describe in Schedule O how this is done	12¢	Х	
13	Does the organization have a written whistleblower policy?	13		X
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?	ļ		
а	The organization's CEO, Executive Director, or top management official	15a	Х	•
b	Other officers or key employees of the organization	15b		X
_	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			!
	with a taxable entity during the year?	16a		Χ
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?	16h		
Sect	ion C. Disclosure			
17	Lest the states with which a sequent the Form 200 is required to be filed PA.			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3):			
10	available for public inspection. Indicate how you make these available. Check all that apply	s only	ı	
	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 inter-	rest		
	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 ANTHONY SIMONETTA 2600 CENTRE SQUARE WEST, 1500 MARKET ST PHILAI 215-496-8122	ne DELP	HIA,	PA

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 Report compensation for the calendar year ending with or within the organization's tax year. 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 Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if the organization did not compensate any current officer, director, or trustee.										
(A) Name and Title	(B) Average			(C	, k all t	hat app		(D) Reportable	(E) Reportable	(F) Estimated
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
M. WALTER D'ALESSIO										
CHARIMAN	1.00	X		Х				0.	0	0.
ROBERT C. WONDERLING				1						
VICE CHAIRMAN	1.00	Х		Х			ļ	0.	0.	0.
EDWARD H. MORRIS, JR.		}								
TREASURER	1.00	Х	-	Х			<u> </u>	0.	0	0.
DAVID E. BEAVERS									. 1	
SECRETARY	1.00	Х		Х		_		0.	0.	0.
ANDREA ALLON								_		
DIRECTOR	1.00	X						0.	0.	0.
HELEN BAIK								_	_	
DIRECTOR	1.00	X	 					0.	0.	0.
JANNIE. L. BLACKWELL										
DIRECTOR	1.00	Х						0.	0.	0.
AUDREY BRONSON								_		
DIRECTOR	1.00	X						0.	0.	0.
CRAIG CARNAROLI										
DIRECTOR	1.00	X						0.	0	0.
RICHARD NEGRIN										
DIRECTOR	1.00	Х					<u> </u>	0.	0.	0.
FRED COSENZA										
DIRECTOR	1.00	X						0.	0.	<u> </u>
ROB DUBOW]									
DIRECTOR	1.00	X						0.	0.	0.
PATRICIA KOPACZ FOLEY										
DIRECTOR	1.00	Х						0.	0.	0.
ALAN GREENBERGER]	1								
DIRECTOR	1.00	X						0.	0.	0.
FRANK JIRUSKA, JR]									
DIRECTOR	1.00	Х						0.	0	0.
ALAN KESSLER]			I						
DIRECTOR	1.00	Х					L	0.	0	0.

Form 990 (2009)

Column C	Form 990 (2009)			_					23-6050858					Page 8
Name and telle	Part VII Section A. Officers, Directors, Tru	ustees, Ke	y En	plo	ye	es,	and I	Hig	hest Compensat	ed Emplo	yees (co	ntınue	d)_	
Name and telle	(A)	(B)			(0	C)			(D)	(E)			(F)	
Name	` Name and title	hours per	$\overline{}$	_					compensation from the	compens from rel organiza	ation ated tions	am c comp	ount o ther ensati	of
DIRECTOR			trustee	al trustee		уее	ompensated			(W-2/1099	-WISC)	orga and	nızatıd relate	on ed
JAMES MCMANUS	WILLIAM MARRAZZO													
DIRECTOR	DIRECTOR	1.00	Х			ļ			0.		0 1			0.
MICHAEL NUTTER														
DIRECTOR	DIRECTOR	1.00	Х		i		ļ		0.		0.			0.
SALVATORE PARTT 1.00 X 0.00 0 0	MICHAEL NUTTER											_		
NAME	DIRECTOR	1.00	Х						0.		0.			0.
NOTECTOR	SALVATORE PATTI													
DIRECTOR	DIRECTOR	1.00	X			}	i		0.		0.			0.
SULAIMAN RAHMAN	ANGELO PERRYMAN													
DIRECTOR 1.00 X 0.00	DIRECTOR	1.00	Х						0.		0.			0.
MICHAEL RASHID DIRECTOR 1.00 X 0.0.0.0.0.0 WILLIAM SAUTER DIRECTOR 1.00 X 0.0.0.0.0.0 WILLIAM SAUTER DIRECTOR 1.00 X 0.0.0.0.0 WILLIAM SAUTER DIRECTOR 1.00 X 0.0.0.0 WILLIAM SAUT	SULAIMAN RAHMAN													
DIRECTOR GUILLERMO SALAS DIRECTOR 1.00 X 0.0 0 0 MILLIAM SAUTTER DIRECTOR 1.00 X 0.0 0 0 MILLIAM SAUTTER DIRECTOR 1.00 X 0.0 0 0 MILLIAM SAUTTER DIRECTOR 1.00 X 0.0 0 0 MILLIAM SAUTTER DIRECTOR 1.00 X 0.0 0 0 MOSEPH SYRNICK DIRECTOR 1.00 X 0.0 0 0 MOSEPH WEISS DIRECTOR 1.00 X 0.0 0 MARBARA WILSON DIRECTOR MARBARA WILSON DIRECTO	DIRECTOR	1.00	Х				1		0.		0.			0.
DIRECTOR	MICHAEL RASHID													
DIRECTOR 1.00 X 0.00	DIRECTOR	1.00	X						0.	}	0.			0.
### DIRECTOR	GUILLERMO SALAS													
DIRECTOR 1.00 X 0.0 0.0 0 SHELLEY SMITH 1.00 X 0.0 0.0 0 JOSEPH SYRNICK 0.0 0.0 0.0 0 JOSEPH SYRNICK 0.0 0.0 0.0 0 JOSEPH WEISS 0.0 0.0 0.0 0 JOSEPH WEISS 0.0 0.0 0.0 0 BARBARA WILSON 0.0 0.0 0.0 0 BARBARA WILSON 0.0 0.0 0.0 0 Ib Total CONTINUED AT SCHEDULE J-2 2.0 2,267,419 0.245,803. Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization 1 ist any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000 If "Yes," complete Schedule J for such individual I is received or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person 5 X Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization (R) (A) Name and business address Description of services Compensation	DIRECTOR	1.00	X						0.		0.			0.
SHELLEY SMITH DIRECTOR 1.00 X 0.0 0.0 JOSEPH SYRNICK DIRECTOR 1.00 X 0.0 0.0 JOSEPH WEISS DIRECTOR 1.00 X 0.0 0.0 BARBARA WILSON DIRECTOR 1.00 X 0.0 0.0 BARBARA WILSON DIRECTOR 1.00 X 0.0 0.0 BARBARA WILSON DIRECTOR 1.00 X 0.0 0.0 BARBARA WILSON DIRECTOR 1.00 X 0.0 0.0 DIRECTOR 1.00 X 0.0 0.0 AND AND AND AND AND AND AND AND AND AND														
DIRECTOR 1.00 X 0.0.0 0.0 JOSEPH SYRNICK 1.00 X 0.0.0 0.0 JOSEPH WEISS 0.0.0 0.0 0.0 BARBARA WILSON 0.0 0.0 0.0 ID TOTAL CONTINUED AT SCHEDULE J-2 2.267,419 0.245,803.2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization ▶ 18 3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	DIRECTOR	1.00	X		ļ				0.		0.			0.
JOSEPH SYRNICK														
DIRECTOR JOSEPH WEISS DIRECTOR 1.00 X 0.0.0.0 BARBARA WILSON DIRECTOR 1.00 X 0.0.0 BARBARA WILSON DIRECTOR 1.00 X 0.0.0 0.00 DIRECTOR 1.00 X 0.00 DIRECTOR 1.00 X 0.00 DIRECTOR 1.00 X 0.00 DIRECTOR 1.00 X 0.00 DIRECTOR 1.00 X 0.00 DIRECTOR 1.00 X 0.00 DIRECTOR 1.00 X 0.00 DIRECTOR 1.00 X 0.00 DIRECTOR 1.00 X 0.00 DIRECTOR 1.00 X 0.00 DIRECTOR 1.00 X 0.00 DIRECTOR DIRECTOR D.000 D.00 D.000 D.0		1.00	X						0.		0.			0 .
DIRECTOR DIRECTOR 1.00 X 0.0.0 BARBARA WILSON DIRECTOR 1.00 X 0.0.0 1b Total CONTINUED AT SCHEDULE J-2. 2,267,419 2,267,419 0.0,245,803. Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization 18 Yes No Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		_												
DIRECTOR 1.00 X 0.0 BARBARA WILSON DIRECTOR 1.00 X 0.0 0.0 0.0 1b Total CONTINUED AT SCHEDULE J-2.		1.00	X	<u> </u>					0.		0.			0 .
DIRECTOR 1.00 X 0.0 1b Total CONTINUED AT SCHEDULE J-2 1 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization ► 18 Yes No 1 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual														
DIRECTOR 1.00 X 2,267,419 0. 0. 245,803. Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization ► 18 Yes No Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		1.00	X						0.		0.			0.
1b Total CONTINUED AT SCHEDULE J-2.														
Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization ▶ 18 Yes No			X		L	<u> </u>	<u> </u>							0.
Teportable compensation from the organization ► 18 Yes No		_ · <u>_ · · · ·</u>	<u></u>		٠.	٠.	· · · <u>·</u>	▶				2	45,	<u>803.</u>
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual					d a	bov —	e) wh	o re	ceived more than	\$100,000 ı	n ———			
employee on line 1a? If "Yes," complete Schedule J for such individual													Yes	No
the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	3 Did the organization list any former office employee on line 1a? If "Yes," complete Sched	cer, directo Jule J for su	or or ch ind	trı <i>lıvıd</i>	uste lual	e, 	key e	emp	oloyee, or highes	t compens	ated	3		X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person. Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization (A) (B) (C) Compensation	the organization and related organizations	greater th	nan \$	150	0,00)0ა	If "Y						x	
Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization (A) (B) (C) Name and business address Description of services Compensation	5 Did any person listed on line 1a receiv	e or accr	ue c	omp	ens	satio	on fro	om	any unrelated o	rganization	for			
1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization (A) (B) (C) Name and business address Description of services Compensation		complete .	scned	uie	J TO	r su	icn pe	rsor	1		· · · ·	5		
compensation from the organization (A) (B) (C) Name and business address Description of services Compensation		00000000		ماء		de =			toro that are are		- A101	2.000	<u></u>	
Name and business address Description of services Compensation			iea ir	ueț	eno	Jen:	. com	ırac	tors that received	u more th	an \$100		01	
ATTACHMENT 3		lress								rvices	Co		ation	
	ATTACHMENT 3							Ì						

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ▶ 5

Form **990** (2009)

Par	t VII	Statement of Revenue			23-6050858		
		,		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a b	Federated campaigns 1a Membership dues					
ifts Ir al	C						
s, g nila	d	The state of the s					į
sin	е	Government grants (contributions) 1e					
but	f	All other contributions, gifts, grants,]				!!!
اعتا		and similar amounts not included above . 11				1	į į
Col	g	Noncash contributions included in lines 1a-1f \$			•		
	h	Total. Add lines 1a-1f	Business Code				
ent		REAL ESTATE FEES	900099	2,671,332	2 671 222		
Program Service Revenue	2 a	LOAN FEES	900099	1,836,286	2,671,332		
9	b	SOFTWARE DEVELOPMENT	900099	378,666	378,666		
6	C	CONSULTING AND SERVICE FEES	900099	542,244	542,244		
S	d		900099				
ırar	e	BELOW MARKET RATE LENDING		4,630,157	4,630,157.		
20.	f g	All other program service revenue Total. Add lines 2a-2f	900099	3,651,152	3,651,152		
	3 4 5	Investment income (including dividends, interest other similar amounts)	▶	42,338.			42,338
	١	(i) Real	(II) Personal				
	6a	Gross Rents					}
	'.	Less rental expenses					
:	b	Rental income or (loss)					}
	d	Net rental income or (loss)	· .	0			1
		(i) Securities	(II) Other				
	7a	Gross amount from sales of assets other than inventory					
	ь	Less cost or other basis					
	~	and sales expenses					
	С	Gain or (loss)					i
	ď	Net gain or (loss)		0			
Q)	8a	Gross income from fundraising					
Other Revenue		events (not including \$					İ
š	ļ	of contributions reported on line 1c)	[
æ		See Part IV, line 18 a					
ĕ	ь	Less direct expenses b					
ŧ	c	Net income or (loss) from fundraising events .		0			
	9a	Gross income from gaming activities. See Part IV, line 19 a	1 - 3				
	b	Less direct expenses b					
	C	Net income or (loss) from gaming activities	<u> , , . ▶</u>	0			
	10a	Gross sales of inventory, less returns and allowances a				Ì	
	ь	Less cost of goods sold b		_			
	<u>- د</u>	Net income or (loss) from sales of inventory. Miscellaneous Revenue	Business Code	0			 -
			Duaniesa Code			-	
	11a				 	<u> </u>	
	b				 		
	C					<u> </u>	
	ď	All other revenue				-	
	e	Total. Add lines 11a-11d		0.	12 700 077		10.000
	12	Total Revenue. See instructions	<u> ▶</u>	13,752,175	13,709,837	0	42,338

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 comple	te column (A) but are	not required to comp	olete 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	152,304.	152,304.		
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	0.			
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	US See Part IV, lines 15 and 16	0.			
4	Benefits paid to or for members	0.			
5	Compensation of current officers, directors,				
	trustees, and key employees	1,356,043.		1,356,043.	
6	Compensation not included above, to disqualified				<u> </u>
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	0.			
7	Other salaries and wages	4,176,956.	3,108,444.	1,068,512.	
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)	1,530,991.	832,438.	698,553.	
9	Other employee benefits	1,358,110.	591,004.	767,106.	
10	Payroll taxes	387,242.	223,393.	163,849.	
11	Fees for services (non-employees)				
	Management	0.			
	Legal	343,058.	225,434.	117,624.	0.
	Accounting	410,171.	81,357.	328,814.	
	Lobbying	0.			-
	Professional fundraising services See Part IV, line 17	0.			
	Investment management fees	0.			· · · · · · · · · · · · · · · · · · ·
g		255,339.	126,220.	129,119.	
12	Advertising and promotion	0.		-	
13	Office expenses	0.			
14	Information technology	0.			
15	Royalties	0.			
16	Occupancy	560,662.	287,481.	273,181.	
17	Travel	0.			
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	0.			
19	Conferences, conventions, and meetings	0.			
20	Interest	10,746.	10,746.		• • • • • • • • • • • • • • • • • • • •
21	Payments to affiliates	0.			
22	Depreciation, depletion, and amortization	226,306.		226,306.	
23	Insurance	801,327.	728,920.	72,407.	
24	Other expenses Itemize expenses not			"	
	covered above (Expenses grouped together				
	and labeled miscellaneous may not exceed				
	5% of total expenses shown on line 25 below)				
a	DIRECT CONTRACT EXPENSES	5,886,704.	5,886,704.		
b	MISCELLANEOUS	562,456.	276,260.	286,196.	
С					1-1
d					
е					
f	All other expenses				
	Total functional expenses. Add lines 1 through 24f	18,018,415.	12,530,705.	5,487,710.	0.
	Joint Costs. Check here ▶ ☐ If following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
JSA					Form 990 (2009)

Pa	rt X	Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	25,282,185.	1	17,301,497.
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	5,668,453.	4	7,200,266.
	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)) and persons described in section 4958(c)(3)(B). Complete			
10		Part II of Schedule L		6	
Assets	7	Notes and loans receivable, net [56,160.	7	1,074,418.
488	8	Inventories for sale or use		8	
•	9	Prepaid expenses and deferred charges	157,373.	9	117,509.
	10a	Land, buildings, and equipment. cost or 10a 1,888,518.			. 15
		other basis Complete Part VI of Schedule D			
	b	Less accumulated depreciation	368,924.	10c	194,406.
	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	12,160,119.		12,196,097.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	43,693,214.		38,084,193.
	17	Accounts payable and accrued expenses	1,957,983.	17	3,117,730.
	18	Grants payable		18	
	19	Deferred revenue	5,137,254.	19	5,329,622.
	20	Tax-exempt bond liabilities		20	
es	21	Escrow or custodial account liability Complete Part IV of Schedule D	253,623.	21	253,623.
Liabilities	22	Payables to current and former officers, directors, trustees, key			
jab		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	04.660.017	24	01 010 011
	25	Other liabilities Complete Part X of Schedule D	24,668,217.	25	21,342,914.
	26	Total liabilities. Add lines 17 through 25	32,017,077.	26	30,043,889.
S		Organizations that follow SFAS 117, check here ▶ X and complete lines 27 through 29, and lines 33 and 34.			
ű	27	Unrestricted net assets	11,676,137.	27	8,040,304.
<u>a</u>	28	Temporarily restricted net assets		28	.,,
В В	29	Permanently restricted net assets		29	
or Fund Balances		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.			
s o	30	Capital stock or trust principal, or current funds		30	
Assets	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
As	32	Retained earnings, endowment, accumulated income, or other funds		32	
Net	33	Total net assets or fund balances	11,676,137.	33	8,040,304.
Z	34	Total liabilities and net assets/fund balances	43,693,214.	34	38,084,193.
	154	Total nabilities and het assets/fulla balances	10,000,214.	134	50,004,199.

Form **990** (2009)

Pa	rt XI Financial Statements and Reporting			
	<u> </u>		Yes	No
1 '	Accounting method used to prepare the Form 990. Cash X Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			1
	Schedule O			l
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Х
b	Were the organization's financial statements audited by an independent accountant?	2b	Х	
С	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?	2c	х	l
	If the organization changed either its oversight process or selection process during the tax year, explain in			
	Schedule O			l
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were			ļ
	issued on a consolidated basis, separate basis, or both			ļ
	Separate basis X Consolidated basis Both consolidated and separate basis		! !	1
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			1
	the Single Audit Act and OMB Circular A-133?	3a	Х	ļ
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.	3ь	Х	
			990	(2009)

SCHEDULE D (Form 990)

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service
Name of the organization

Employer identification number

PHI	LADELPHIA INDUSTRIAL DEVELOPMENT (CORP	23-6050858
Pai	Organizations Maintaining Donor Advi the organization answered "Yes" to For		Accounts. Complete if
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor ac	ducare in writing that the access hold in der	or odygod
•	funds are the organization's property, subject to the		
6	Did the organization inform all grantees, donors, ai		
Ū	used only for charitable purposes and not for the b		
	purpose conferring impermissible private benefit?		
Pai	Conservation Easements. Complete if	the organization answered "Ves" to For	rm 990 Part IV line 7
1	Purpose(s) of conservation easements held by the		111 930, Fait IV, fille 7.
•	Preservation of land for public use (e.g., recre		on brokeningth, managers to a to a con-
	Protection of natural habitat	· ' '	an historically important land area a certified historic structure
	Preservation of open space	Preservation of	a certified historic structure
2	Complete lines 2a through 2d if the organization he	old a qualified concernation contribution in t	be form of a companyation
_	easement on the last day of the tax year	eld a qualified conservation contribution in t	ne form of a conservation
	casement on the last day of the tax year	۲	Held at the End of the Year
а	Total number of conservation easements		2a
a b	Total acreage restricted by conservation easements	F ²	2b
C	Number of conservation easements on a certified it		2c
d	Number of conservation easements included in (c)		2d
3	Number of conservation easements modified, trans		
J	the tax year >	sterred, released, extinguished, or terminat	ed by the organization during
4	Number of states where property subject to conse	ryation assement is located •	
5	Does the organization have a written policy regards		dling of
•	violations, and enforcement of the conservation ea		
6	Staff and volunteer hours devoted to monitoring, in		
Ü	▶	specting, and emorcing conservation ease	ments during the year
7	Amount of expenses incurred in monitoring, inspec	ting, and enforcing conservation easemont	s during the year
•	►\$	ting, and emorcing conservation easement	s during the year
8	Does each conservation easement reported on line	2(d) above satisfy the requirements of soot	on.
Ü	170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?		
9	In Part XIV, describe how the organization reports		
•	balance sheet, and include, if applicable, the text of		
	the organization's accounting for conservation ease		statements that describes
Pai	Organizations Maintaining Collections		Similar Assets
	Complete if the organization answered	"Yes" to Form 990, Part IV, line 8.	
1a	If the organization elected, as permitted under Si		tement and halance shoot works of
	art, historical treasures, or other similar assets hel	d for public exhibition, education, or resea	arch in furtherance of public service.
=.	provide, in Part XIV, the text of the footnote to its fir	nancial statements that describes these iten	าร
b	If the organization elected, as permitted under Si	FAS 116, to report in its revenue statement	ent and balance sheet works of art,
	historical treasures, or other similar assets held provide the following amounts relating to these item	for public exhibition, education, or resear	ch in furtherance of public service,
	(i) Revenues included in Form 990, Part VIII, line 1		L ¢
	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of ar		
_			ssets for financial gain, provide the
_	following amounts required to be reported under Si Revenues included in Form 990, Part VIII, line 1	_	~ ¢
a			
b	Assets included in Form 990, Part X	· · · · · · · · · · · · · · · · · · ·	• • • — — — — — — — — — — — — — —

Par	t III Organizations Maintaini	ng Collections of	of Art, Historic	cal Treasure:	s, or Ot	her Similar As	sets (c	<u>continue</u>	<u>d)</u>	
٥.	Have the consequent of a consequent		- 4					.		
3.	Using the organization's acquisition		other records, c	check any or tr	ie ioliow	ing that are a si	gnilican	i use of i	IS	
	collection items (check all that app	iy)	. —		-1					
a	Public exhibition		d	Loan or ex	cnange	programs				
b	Scholarly research		e	Other						
С	Preservation for future ge									
4	Provide a description of the organi	zation's collections	s and explain ho	w they further	the org	anızatıon's exen	npt purp	ose in		
	Part XIV.									
5	During the year, did the organization						_			
	assets to be sold to raise funds rat							Yes		No
Par	t IV Escrow and Custodial A IV, line 9, or reported ar				answe	red "Yes" to Fe	orm 99 	0, Part		
1a	Is the organization an agent, truste	e. custodian or oth	her intermediar	v for contributi	ons or o	ther assets not				
	included on Form 990, Part X?						Г	Yes	Х	No
h	If "Yes," explain the arrangement in									,
•	ii roo, explain the arrangement ii	Trait Air and con	inplote the follot	ing table.		Am	ount			
С	Beginning balance				10		- Cuint			
	Additions during the year				-					
e	Distributions during the year							·		
f	Ending balance									
2a	Did the organization include an am							X Yes		No
	If "Yes," explain the arrangement in), I alt X, IIIC 2 I				L	1 163	L	110
Par			ation answers	d "Ves" to Fo	rm 990) Part IV line	10			
Гаг	Endownient runds. Con	(a) Current Year	(b) Prior year	(c) Two ye		(d) Three years		(e) Four	veare t	nack
1 a	Beginning of year balance	(a) contain roas	(b) i noi your	(6) 1113 ye	uio buok	(a) Three years	, back	(0) 1 001	years	- C
b	Contributions		 	-						
-	Net investment earnings, gains,		 			-				
·	and losses									
d	Grants or scholarships		 		.					
	Other expenditures for facilities .		 		,					
е										
	and programs		-							
	Administrative expenses					- 				
g	End of year balance		<u> </u>			<u> </u>				
2	Provide the estimated percentage	•								
a	Board designated or quasi-endowr		%							
b	Permanent endowment >									
	Term endowment ▶	_%	•							
зa	Are there endowment funds not in	the possession of	the organization	on that are hel	d and a	dministered for th	ıe	_	. T	
	organization by								/es	No
	(i) unrelated organizations							3a(i)		
	(ii) related organizations							3a(ii)		
D	If "Yes" to 3a(II), are the related org	-	•					3b		
4	Describe in Part XIV the intended in									
Pai	t VI Investments - Land, Bui	idings, and Equi	ipment. See F	orm 990, Pa	rt X, lin	e 10.				
	Description of investment		t or other basis vestment)	(b) Cost or othe basis (other)	r (c) Accumulated depreciation	(c	I) Book valu	ue ———	
1a	Land									
b	Buildings									
С	Leasehold improvements			621,3		621,387.				
d	Equipment			447,7		384,067.			3,6	
_ е	Other			819,4		688,658.			0,7	
Tota	I. Add lines 1a through 1e (Columi	າ (d) must equal Fo	orm 990, Part X,	column (B), lir	ne 10(c)) ▶		19	4,4	06.

Part VII	Investments - Other Securities. See	Form 990, Part X, line	12.	
,	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year marke	
Financial d	lerivatives			
Closely-he	ld equity interests			
Other				
		_		
				<u>-</u>
		-		
		-		
				- 1.2.
Total. (Colum	nn (b) must equal Form 990, Part X, col (B) line 12)	>		
Part VIII	Investments - Program Related. See	Form 990, Part X, line	: 13.	
	(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year marke	on· t value
			 	
			-	· · · · · · · · · · · · · · · · · ·
		_		
		lung 15		
Part IX	Other Assets. See Form 990, Part X	, lifte 15. (a) Description		(h) Book value
DUE FRO	M RELATED PARTY	(a) Description		(b) Book value 12, 196, 097
		 		
		T		
				
				10 106 000
	nn (b) must equal Form 990, Part X, col (B) line 15).		<u></u>	12,196,097
Part X	Other Liabilities. See Form 990, Par	- 		
Todayal in	(a) Description of liability	(b) Amount		
	come taxes RELATED PARTIES	15,307,047.		
	OTHER AGENCIES	375,403.		
	POST RETIREMENT BENEFITS	5,660,464.		
		1,111,111		
				
	· · · · · · · · · · · · · · · · · · ·			
	· · · · · · · · · · · · · · · · · · ·			
Total. (Colum	nn (b) must equal Form 990, Part X, col (B) line 25)	▶ 21,342,914.		
- FILL 40	5 · · · · 5 · · · · · · · · · · · · · ·			

2. FiN 48 Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48

SEE PAGE 5

SCHEDULE D, PART XIII, LINE 2D PENSION BENEFIT- 630,407

FIN 48 STATEMENT

PART X LINE 2

ON JANUARY 1, 2009, THE CORPORATION ADOPTED THE PROVISIONS OF THE FASB AUTHORITATIVE GUIDANCE FOR ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES, WHICH REQUIRES THAT A TAX POSITION BE RECOGNIZED OR DERECOGNIZED BASED ON A "MORE LIKELY THAN NOT" THRESHOLD. FOR TAX POSITIONS MEETING THE MORE LIKELY THAN NOT THRESHOLD, THE AMOUNT RECOGNIZED IN THE FINANCIAL STATEMENTS IS THE LARGEST BENEFIT THAT HAS A GREATER THAN 50 PERCENT LIKELIHOOD OF BEING REALIZED UPON ULTIMATE SETTLEMENT WITH THE RELEVANT TAXING AUTHORITY. THIS APPLIES TO POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN. THE IMPLEMENTATION OF THIS PRONOUNCEMENT HAD NO IMPACT ON THE CORPORATION'S COMBINED STATEMENT OF FINANCIAL POSITION OR STATEMENT OF ACTIVITIES.

THE NEW AUTHORITATIVE GUIDANCE REQUIRES A CORPORATION TO RECOGNIZE AND COMPUTE INTEREST EXPENSE BY APPLYING THE APPLICABLE STATUTORY RATE OF INTEREST TO THE DIFFERENCE BETWEEN THE AMOUNTS OF THE TAX POSITION RECOGNIZED ITS FINANCIAL STATEMENTS AND THE POSITION TAKEN ON ITS TAX RETURNS. INTEREST IS CALCULATED FROM THE ORIGINAL DUE DATE OF THE FEDERAL OR STATE RETURN TO THE END OF ITS CURRENT FISCAL YEAR. MANAGEMENT DOES NOT BELIEVE THAT SUCH A LIABILITY EXISTS AND, CONSEQUENTLY, NO SUCH PROVISION HAS BEEN RECORDED.

Schedule D (Form 990) 2009

THE CORPORATION MAY BE SUBJECT TO TAX IN CONNECTION WITH INCOME DETERMINED TO BE UNRELATED TO ITS TAX-EXEMPT PURPOSE. THE CORPORATION IS NOT CURRENTLY UNDER EXAMINATION BY ANY TAXING AUTHORITIES. MANAGEMENT BELIEVES IT WOULD NOT BE SUBJECT TO U.S. FEDERAL, STATE, AND LOCAL INCOME TAX ASSESSMENTS FOR ANY YEARS THAT MAY BE OPEN UNDER RELEVANT STATUTES OF LIMITATIONS. CONSEQUENTLY, NO SUCH PROVISION HAS BEEN RECORDED.

SCHEDULE D PART IV LINE 2B

ESCROW ACCOUNT REPRESENTS INTEREST EARNED THAT IS PAYABLE TO THE DELAWARE RIVER PORT AUTHORITY ON LOANS MANAGED BY PIDC.

SCHEDULEI (Form 990)

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

OMB No 1545-0047 2009

Open to Public

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Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use **Employer identification number** Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to 23-6050858 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. (d) Amount of cash grant (e) Amount of non-cash assistance Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States ► Attach to Form 990. 128,000 7,000 Part IV and Schedule I-1 (Form 990) if additional space is needed. (c) IRC section if applicable the selection criteria used to award the grants or assistance? General Information on Grants and Assistance PHILADELPHIA INDUSTRIAL DEVELOPMENT CORP 23-2253829 23-2237287 (p) EIN 8004 A GREENTREE COMMONS MARLTON, NJ 08053 (a) Name and address of organization or government PHILADELPHIA NAVY YARD QUARTERS A NAVY YARD (KEY INNOVATION ZONE) SJA CONSTRUCTION Department of the Treasury Name of the organization Internal Revenue Service Part II Part I

DISBURSEMENT OF DEPA

DISBURSEMENT OF

(h) Purpose of grant or assistance

9E1288 2 000 6662 AW 700P 11/29/2010 8:01:50 AM

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

Enter total number of section 501(c)(3) and government organizations

Enter total number of other organizations

Schedule I (Form 990) 2009

Schedule 1 (Schedule I (Form 990) 2009						Page 2
Part III	Grants and Other Assistance to Individuals in the United States. Co Use Part IV and Schedule I-1 (Form 990) if additional space is needed.	idividuals in th 990) if additior	in the United States. ditional space is need	. Complete if the	e organization answered	Complete if the organization answered "Yes" on Form 990, Part IV, line 22. ed.	•
	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance	
Part IV	Supplemental Information. Complete this par	te this part to	provide the info	ormation required	In Part I, line 2, and any	rt to provide the information required in Part I, line 2, and any other additional information.	
SCHEDULE	LE I, PART I, LINE 2						
PIDC HA	HAS CONTROLS IN PLACE TO ENSURE	GRANT	PROCEEDS ARE	USED AND			
DISTRI	DISTRIBUTED IN ACCORDANCE WITH THE	THE TERMS OF	THE GRANT A	AGREEMENT.			
					1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
) 	 	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
			1 1 1 1 1 1 1 1	1 	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		! ! !
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 					; ; ; ; ; ; ; ; ; ; ; ; ; ; ;		! ! !
						Schedule I (Form 990) 2009	0) 2009

SCHEDULE J (Form 990)

Department of the Treasury Internal Revenue Service

Compensation Information
For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees**

Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047 Open to Public

Inspection

Name of the organization

PHILADELPHIA INDUSTRIAL DEVELOPMENT CORP

Employer identification number 23-6050858

Part	Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items			
				ĺ
	Travel for companions Payments for business use of personal residence Health or social club dues or initiation fees	'		l
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to	4.		
2	explain	1b		
2	officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	,		ĺ
	officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a	2		
3	Indicate which, if any, of the following the organization uses to establish the compensation of the			
•	organization's CEO/Executive Director. Check all that apply.			İ
	Compensation committee Written employment contract			1
	Independent compensation consultant X Compensation survey or study		l	1
	Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization.			
а	Receive a severance payment or change-of-control payment?	4a	Х	1
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	X	
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.]
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the revenues of			
а	The organization?	5 a		X
b	Any related organization?	5 b		Х
	If "Yes" to line 5a or 5b, describe in Part III.			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the net earnings of:			
а	The organization?	6a		X
b	Any related organization?	6b		Х
	If "Yes" to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed			,
	payments not described in lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was			
	subject to the initial contract exception described in Regs. section 53 4958-4(a)(3)? If "Yes," describe			
_	ın Part III	8_		X
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			Ī
	Regulations section 53 4958-6(c)?	9_		

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

Schedule J (Form 990) 2009

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(III) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

	(B) Breakdown of W-2 and		/or 1099-MISC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name	(ı) Base compensation	(ii) Bonus & incentive compensation	(III) Other reportable compensation	other deferred compensation	benefits	(D)-(I)(B)	reported in prior Form 990 or Form 990-EZ
	189,396.	0	9,460	0	21,835.	220,691.	0
PETER LONGSTRETH (m)	 	0		0	0		.0
3	179,68	35,000.	4,551.	0	27,339.	246,574.	0
JOHN GRADY	 	 	l l	0.			0.
(3)	134,48	0	9,424.	0	17,453.	161,366.	0.
PAUL DEEGAN (II)	i I L	0	 	0	0	 	.0
(i)	134,48	00'6	8,152.	0	9, 633.	161,268.	0
TERRY DEMUSIS (ii)	0	0	l I	0	0	1 1 1	.0
9	172,33	10,000.	8,485.	0	14,930.	205,752.	0.
SAMUEL RHOADS (ii)	! !		 	0	0	i	• 0
(0)	111,92		153,849.	0.	23,018.	288,792.	0
N. JAMES FLUCK		1	 	0	i		.0
(3)	124,52	6,250.	219.	0.	21,734.	152,724.	0
JOE MEE	 			0	0.	1	0
0	62,33	2,800.	103,391.	0.	22,878.	194,425.	.0
ELLEN BROWN (ii)				0.			0.
(0)	65,326.	6,500.	83,588	0.	.636,6	165,373.	0
LESLIE KNOTT				0	0.] 	.0
(0)							
(ii)		f 					
(9)							
(ii)							
3		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		1			
(11)							
9	 	 	 		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	#
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(ii)						Sche	Schedule J (Form 990) 2009

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Schedule J (Form 990) 2009

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

PARTICIPATION IN SUPPLEMENTAL NONQUALIFIED RETIREMENT PLAN

LINE 4B

PETER LONGSTRETH AND TERRY DEMUSIS PARTICIPATE IN A SELF FUNDED DEFERRED

A 457(B) NONQUALIFIED COMPENSATION RETIREMENT PLAN, ALSO REFERRED TO AS

THEY CONTRIBUTED \$16,500 AND \$800, RESPECTIVELY RETIREMENT PLAN.

SEVERANCE PAYMENTS

LINE 4A

SEVERANCE IS RELATED TO THE 2009 PIDC VOLUNTARY EARLY RETIREMENT PROGRAM

FOR THESE ELIGIBLE TO PARTICIPATE AND HAVING A RETIREMENT DATE OF JULY

31, 2009

\$109,200 HAVING COMPLETED 24 YEARS N. JAMES FLUCK RECEIVED SEVERANCE OF

OF SERVICE.

OF ELLEN BROWN RECEIVED SEVERANCE OF \$60,345 HAVING COMPLETED 24 YEARS

SERVICE.

LESLIE KNOTT RECEIVED SEVERANCE OF \$47,055 HAVING COMPLETED 13 YEARS OF

SERVICE

Schedule J (Form 990) 2009

160693

Schedule J (Form 990) 2009

SCHEDULE J-2 (Form 990)

Continuation Sheet for Form 990

OMB No. 1545-0047

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service ▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

➤ See the Instructions for Form 990.

Name of the Organization

PHILADELPHIA INDUSTRIAL DEVELOPMENT CORP

Employer identification number 23-6050858

Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

<u>Employees</u>										
(A) Name and title	(B) Average hours	Posit	ion (c	(C chec		that app	ply)	(D) Reportable	(E) Reportable	(F) Estimated
	per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MSC)	amount of other compensation from the organization and related organizations
AHMEENAH YOUNG DIRECTOR	1.00	Х						0.	0.	0.
PETER LONGSTRETH PRESIDENT	37.50			Х				198,856.	0.	21,835.
JOHN GRADY EXECUTIVE VICE PRESIDENT	37.50			Х				219,235.	0.	27,339.
PAUL DEEGAN SENIOR VICE PRESIDENT TERRY DEMUSIS	37.50		-	Х	_		_	143,913.	0.	17,453.
SENIOR VICE PRESIDENT SAMUEL RHOADS	37.50			Х	_	_	_	151,635.	0.	9,633.
SENIOR VICE PRESIDENT ANTHONY SIMONETTA	37.50			Х	_			190,822.	0.	14,930.
SENIOR VICE PRESIDENT N. JAMES FLUCK	37.50			Χ	-		_	64,724.	0.	216.
EXECUTIVE VICE PRESIDENT JOE MEE	37.50			Х	-		_	265,774.	0.	23,018.
ASSISTANT SECRETARY ELLEN BROWN	37.50			X	_			130,990.	0.	21,734.
ASSISTANT SECRETARY ANTHONY LEONARD	37.50			Χ	-		ļ 	171,547.	0.	22,878.
ASSISTANT SECRETARY LESLIE KNOTT	37.50			X	-		-	118,766.	0.	18,204.
VICE PRESIDENT MARLA HAMILTON	37.50				_	X		155,414.	0.	9,959.
VICE PRESIDENT TOM DALFO	37.50				-	X		117,613.	0.	9,539.
VICE PRESIDENT AV KANTOR VICE PRESIDENT	37.50	-				X	_	116,295.	0.	27,080.
CAROLE BENNIS VICE PRESIDENT	37.50				-	X	-	108,138.	0.	21,565. 420.
VIOL INSUISANT	31100							100,130.	0.	
										-

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

Schedule J-2 (Form 990) 2009

SCHEDULE L (Form 990 or 990-EZ)

Transactions With Interested Persons

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

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

OMB No 1545-0047 Open To Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

PHILADELPHIA INDUSTRIAL DEVE	LOPME	ENT CO	DRP				23-	-605	0858	3		
Part 1 Excess Benefit Transacations Complete if the organization answ	(section ered "Y	n 501(c) 'es" on)(3) and sect Form 990, P	ion 501(c) art IV, line	(4) organiz 25a or 25b	ations only) , or Form 9	90-EZ	, Part	V, line	40b.		
1 (a) Name of disqualified person				(b) Description	of transaction	on				(c) Cor Yes	rrected?
											165	NO
			<u> </u>									
		-										
												
2 Enter the amount of tax imposed on under section 4958									\$ _			
3 Enter the amount of tax, if any, on lin	e 2, ab	ove, rei	mbursed by t	ne organiz	ation ,		• • •)	►\$_ 			
Part II Loans to and/or From Intere Complete if the organization ans				Part IV, lir	ne 26, or For	m 990-EZ,	Part V	', line	38a			
(a) Name of interested person and purpose		to or from anization?	(c) Orig principal a		(d) Bala	nce due	(e) In c	tefault?		ard or	(g) W agreer	ritten ment?
	То	From					Yes	No	Yes	No	Yes	No
		-	,			 						
Total	<u> </u>		<u> </u>	▶\$	<u></u> _		 				اـــــا	<u> </u>
Part III Grants or Assistance Benefit Complete if the organization ans	itting li	nterest	ed Persons		e 27.							
(a) Name of interested person	(b) Re	elationsh	ıp between ınt organizat		son and the	(c) A	lmount	and t	ype of	assist	ance	
·												
						 						
			10									
Part IV Business Transactions Invol Complete if the organization and	ving ir wered	Tereste "Yes" o	n Form 990,	Part IV, lır	ne 28a, 28b,	or 28c						
(a) Name of interested person			nip between rson and the ration		nount of saction	(d) Desc	cription	of tra	ınsactı	on	(e) Sha organiz reven	zation's
EDWARD MORRIS	DIRECT	TOR			855 805	UPALTH TAIC	יווסאוכי				Yes	No
DUMINO FIORNIA	DIRECT				855,885	HEALTH INS	URANCI					X
			-			 						
												

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

Schedule L (Form 990 or 990-EZ) 2009

SCHEDULE O (Form 990)

Supplemental Information to Form 990

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

▶ Attach to Form 990.

OMB No 1545-0047

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

PHILADELPHIA INDUSTRIAL DEVELOPMENT CORP

Employer identification number

23-6050858

ATTACHMENT 1

FORM 990, PART VI, LINE 6

THE MEMBERS OF THE CORPORATION ARE THE PERSONS WHO ARE THE DIRECTORS OF THE CORPORATION. THE BUSINESS AFFAIRS OF THE CORPORATION ARE MANAGED BY THE DIRECTORS.

THE ORGANIZATION HAS THREE CLASSES OF DIRECTORS-

7 CITY DIRECTORS CONSISTING OF THE SEVEN OFFICERS OF THE CITY OF
PHILADELPHIA INCLUDING THE MAYOR OF THE CITY OF PHILADELPHIA, THE
DIRECTOR OF COMMERCE, THE PRESIDENT OF THE COUNCIL, THE CHAIRMAN OF THE
CITY PLANNING COMMISSION, THE CITY SOLICITOR, THE MANAGING DIRECTOR AND
THE DIRECTOR OF FINANCE;

8 CHAMBER DIRECTORS AS NOMINATED BY THE PRESIDENT OF THE GREATER PHILADELPHIA CHAMBER OF COMMERCE; AND

15 PUBLIC DIRECTORS AS NOMINATED BY THE PRESIDENT OF THE GREATER

PHILADELPHIA CHAMBER OF COMMERCE AND THE DIRECTOR OF COMMERCE OF THE CITY

OF PHILADELPHIA.

FORM 990, PART VI, LINE 7B

THE BOARD OF DIRECTORS IS AUTHORIZED TO APPROVE BY APPROPRIATE RESOLUTION

THE PURCHASE, SALE, LEASE, MORTGAGE PLEDGE, OR OTHER DISPOSAL OF REAL

ESTATE AND THE BORROWING OF MONEY FOR THAT PURPOSE. THE DECISIONS OF THE

Employer identification number 23-6050858

ATTACHMENT 1 (CONT'D)

BOARD REGARDING CERTAIN LOAN PROGRAMS ARE SUBJECT TO APPROVAL BY EXTERNAL PARTIES (I.E. DIRECTOR OF COMMERCE- CDBG LOANS). IN ADDITION, BETWEEN THE TIMES OF THE BOARD OF DIRECTORS MEETINGS, THE EXECUTIVE COMMITTEE HAS THE RIGHT TO EXERCISE THE AUTHORITY OF THE BOARD OF DIRECTORS. THE EXECUTIVE COMMITTEE CONSISTS OF 15 DIRECTORS INCLUDING THE 7 CITY DIRECTORS AND 8 CHAMBER DIRECTORS WHO ARE NAMED TO THE BOARD OF DIRECTORS. THE CHAIRMAN OF THE BOARD OF DIRECTORS IS ALSO THE CHAIRMAN OF THE EXECUTIVE COMMITTEE.

FORM 990, PART VI, LINE 8

WRITTEN MINUTES ARE MAINTAINED OF ALL MEETINGS, AND OF ALL ACTIONS TAKEN BY THE BOARD AND ITS COMMITTEES.

FORM 990, PART VI, LINE 11

THE CORPORATION'S FORM 990 WILL BE REVIEWED BY THE AUDIT COMMITTEE OF THE BOARD PRIOR TO FILING WITH THE INTERNAL REVENUE SERVICE. THE FORM 990 WILL BE MADE AVAILABLE TO ALL BOARD MEMBERS UPON REQUEST.

FORM 990, PART VI, LINE 12

ALL DIRECTORS OF THE ORGANIZATION MUST DISCLOSE IN WRITING THE NATURE AND EXTENT OF ANY INTERESTS, DIRECT OR INDIRECT, CONTACT, AND/OR ACTIVITY RELATED TO SUCH PROJECTS PROMOTED BY THE ORGANIZATION. NO DIRECTOR WHO HAS SUCH AN INTEREST CAN VOTE ON ANY MATTER RELATING TO IT. THE DISCLOSURE IS WRITTEN AND RETAINED IN THE MINUTE BOOK OF THE ORGANIZATION. THE CORPORATION HAS INCLUDED A CONFLICT OF INTEREST POLICY WITHIN THE PERSONNEL POLICY MANUAL, AND IS APPLICABLE TO ALL EMPLOYEES OF THE CORPORATION. FURTHER, ON A PERIODIC BASIS, THE CORPORATION REQUIRES

Name of the organization

PHILADELPHIA INDUSTRIAL DEVELOPMENT CORP

Employer identification number 23-6050858

ATTACHMENT 1 (CONT'D)

THE OFFICERS OF THE CORPORATION TO DISCLOSE ANY CONFLICTED INTERESTS.

FORM 990, PART VI, LINE 15

THE COMPENSATION FOR THE CEO IS APPROVED BY THE COMPENSATION COMMITTEE, WHICH INCLUDES THE CHAIRMAN OF THE BOARD OF DIRECTORS AND A DESIGNATED BOARD MEMBER APPOINTED BY THE CHAIRMAN OF THE BOARD OF DIRECTORS.

THE CORPORATION HAS ESTABLISHED A COMPENSATION PROGRAM TO ENSURE THE SALARIES AND BENEFITS PAID TO OFFICERS AND EMPLOYEES IS FAIR. COMPETITIVE, AND REFLECTIVE OF EMPLOYEE'S ACTUAL PERFORMANCE. THE CORPORATION PERIODICALLY PERFORMS PAY-RANGE SURVEYS OF OTHER COMPARABLE EMPLOYERS AND MONITORS CURRENT TRENDS IN COMPENSATION. IN ADDITION, THE COMPENSATION STRUCTURE EMBEDS A RISK BASED COMPONENT WHICH CONSIDERS ACHIEVEMENT OF PERFORMANCE GOALS.

FORM 990, PART VI, LINE 19

THE CORPORATION MAKES ITS FORM 990 AVAILABLE TO THE PUBLIC BY RETAINING A COPY AT ITS PLACE OF BUSINESS. THE FORM 990 IS LIKEWISE PUBLISHED ON THE INTERNET AT WWW.GUIDESTAR.COM. THE CORPORATION'S FINANCIAL STATEMENTS AND GOVERNING DOCUMENTS (INCLUDING CONFLICT OF INTEREST POLICY) ARE NOT ORDINARILY MADE AVAILABLE TO THE PUBLIC, BUT, IF REQUESTED, WILL BE PROVIDED AT MANAGEMENT'S DISCRETION.

FORM 990, PART III, OTHER PROGRAM SERVICE

OTHER PROGRAM SERVICE (SOFTWARE DEVELOPMENT & MAINTENANCE FOR MANAGING ECONOMIC DEVELOPMENT LOAN ACTIVITY)

PIDC CREATED A SOFTWARE PROGRAM THAT IS SPECIFICALLY DESIGNED TO

Employer identification number 23-6050858

ATTACHMENT 1 (CONT'D)

ASSIMILATE, TRACK AND REPORT THE INFORMATION REQUIRED BY LOCAL, STATE AND FEDERAL REGULATORS AND AUTHORITIES. PIDC HAS LICENSED THE SOFTWARE TO SIMILARLY SITUATED TAX EXEMPT ORGANIZATIONS FOR THE MANAGEMENT OF THEIR PORTFOLIOS AND REPORTING REQUIREMENTS.

FORM 990, PART VI, LINE 14

THE CORPORATION INTENDS TO IMPLEMENT A DOCUMENT RETENTION AND DESTRUCTION POLICY BY DECEMBER 31, 2010.

SUPPORTED ORGANIZATION UNDER 509(A)(3)

PHILADELPHIA INDUSTRIAL DEVELOPMENT CORPORATION (PIDC) IS SUPPORTED BY THE OPERATIONS OF PIDC REGIONAL DEVELOPMENT CORPORATION (EIN: 23-2889102), A 501(C)(3) ORGANIZATION. PIDC'S MISSION IS TO DEVELOP AND SUPPORT ECONOMIC GROWTH IN THE CITY OF PHILADELPHIA AND PROVIDE SERVICES THAT THE CITY OF PHILADELPHIA CANNOT PERFORM. PIDC MEETS THE PUBLIC SUPPORT TEST PURSUANT TO IRC SECTION 509(A)(2) AS MORE THAN 95% OF ITS INCOME IS DERIVED FROM PROGRAM SERVICE REVENUE. FURTHERMORE, PIDC MEETS THE ORGANIZAITONAL, OPERATIONAL, RELATIONSHIP AND CONTROL TEST REQUIREMENT OF 509(A)(3).

FORM 990, PART III, LINE 4D - OTHER 1	PROGRAM SERVICES	ATTACH	MENT 2
DESCRIPTION	GRANTS	EXPENSES	REVENUE
SOFTWARE DEV. AND MAINTENANCE	0.	247,465.	378,666.
TOTALS	0.	247,465.	378,666.

Name of the organization PHILADELPHIA INDUSTRIAL DEVELOPMENT CORP		Employer identification number 23-6050858
,	=	ATTACHMENT 3 (CONT'D)
990, PART VII- COMPENSATION OF THE FIVE HIGHEST	PAID IND. CONTRAC	CTORS
NAME AND ADDRESS	DESCRIPTION OF SE	ERVICES COMPENSATION
GRANT THORNTON 2001 MARKET STREET, SUITE 3100 PHILADLEPHIA, PA 19103	AUDIT/TAX	429,524.
GEOGRAPHIX INC. 201 FULTON STREET RIVERTON, NJ 08077	IT	236,923.
JOSEPH GARDNER 11126 HENDRIX STREET PHILADELPHIA, PA 19116	ACCOUNTING	103,956.
JOE ALYMER 550 GATES STREET PHILADELPHIA, PA 19128	MARKET DEVELOP	MENT 123,574.
LIPSKY AND BRANDT 1101 MARKET STREET PHILADELPHIA, PA 19107	LEGAL	175,069.
TOTAL COMPENSATION		1,069,046.

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

PHILADELPHIA INDUSTRIAL DEVELOPMENT CORP

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

Related Organizations and Unrelated Partnerships

See separate instructions.

200**9**

OMB No 1545-0047

Employer identification number Inspection

▶ Attach to Form 990.

23-6050858

Part I Identification of Disregarded Entities (Complete		if the organization answered "Yes" on Form 990, Part IV, line 33.)	n Form 990, Par	t IV, line 33.)		
(a) Name, address, and EIN of disregarded entity		(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)	ations (Complete of the	the organization and	swered "Yes" on	Form 990, Part I	V, line 34 becaus	e it
(a) Name, address, and EIN of related organization		(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity
PIDC- REGIONAL DEVELOPMENT CORP 1500 MARKET STREET	23-2889102 A, PA 19102	ECONOMIC DEV	PA	501(C)(3)	11A-I	M/N
MENT CORPORAT	1.7	1	PA	501(C)(4)		N/A
PIDC- DEVELOPMENT MANAGEMENT CORP 1500 MARKET STREET PHIA,	23-2176818 A, PA 19102	ECONOMIC DEV	PA	501(C)(4)		N/A
PIDC- FINANCING CORPORATION 1500 MARKET STREET PHILADELPHIA,	las i	ECONOMIC DEV	PA	501(C)(4)		N/A
PIDC- PENN VENTURE FUND 1500 MARKET STREET PHILADELPHIA,	21-1585341 A, PA 19102	ECONOMIC DEV	PA	501(C)(4)		N/A
FOOD DISTRIBUTION CENTER 1500 MARKET STREET PHILADELPHIA,	23-1475639 A, PA 19102	ECONOMIC DEV	PA	115		N/A

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

Schedule R (Form 990) 2009

JSA

23-6050858

Page 2

Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.) Schedule R (Form 990) 2009

Part III

(j) General or managing partner?	Yes No						(h) Percentage ownership							9002 (066
(1) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)						rm 990, Part	(g) Share of Fend-of-year assets					:		Schedule B (Form 990) 2006
(h) Dispioporanie allocators?	Yes No					on Fo	Φ Ε			-			-	"
(g) Share of end-of-year assets	<u> </u>					answered "Yes (year.)	(f) Share of total income	1						
						rganization	(e) Type of entity (C corp, S corp, or trust)							
(f) Share of total income						mplete if the o ation or trust c	(d) Direct controlling entity (
Predominant income (related, unrelated, excluded from tax under excluded from excluder exclud	512-514)	•				tion or Trust (Co	(c) Legal domicile (state or foreign country)							
(d) Direct controlling entity						ible as a Corpora d organizations tr	(b) Primary activity							
(c) Legal domicile (state or foreign	couliny)					ons Taxe					 			
(b) Primary activity						elated Organization It had one or mo	f related organization							
(a) Name, address, and EIN of related organization						Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)	(a) Name, address, and EIN of related organization							

2	Night Complete two 1 if any antity is listed in Darts II III or IV of this schooling			2	
2 ,				_	
-	Duling the ray year, our the organization engage in any or the following transactions with one or more related or instead in a language in a contract of the c		ç	×	
æ	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity			; :	
٩	Grift grant, or capital contribution to other organization(s)		<u>ء</u> ۔	×	
c			10	× —	
7			10	×	
3	Loans of loan gualantees to of tol other organization(s)		· ,	 >	
Φ	Loans or loan quarantees by other organization(s)		а _	<	
					-
•	(a) and the state of the state		<u>+</u>	×	-
-	Sale of assets to other organization(s)			>	
5	Purchase of assets from other organization(s)		5	; :	
_	Exchange of assets		<u>۔</u> ۔	×	
		•	=	× —	
•		•			. —
			· 😲	_ 	_
-	Lease of facilities, equipment, or other assets from other organization(s)		=	: ; -	
¥	Performance of services or membership or fundraising solicitations for other organization(s)		¥ -	<u> </u>	
_			=	× —	
. E			£	×	
•		•	-	×	
_	Sharing of paid employees				
				_ <u>-</u> -	
0	Reimbursement paid to other organization for expenses		우 -	$\frac{ }{\times}$	
2			d L	×	
2		· · · · · · · · · · · · · · · · · · ·			
1			-	`×	٠.
σ:			? ?	: >	
-	Other transfer of cash of property from other organization(s).			١	
7	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships	and transaction thresholds.	resholds.		
			(c)		
	Name of other organization Transaction type (a-r)		Amount involved		
티) PIDC REGIONAL DEVELOPMENT CORPORATION		50,0	.000	
(2)	PIDC REGIONAL DEVELOPMENT CORPORATION		4,3	345.	
<u>ල</u>					
4					
		_			
2					
9					
		Schedu	Schedule R (Form 990) 2009	90) 2009	

23-6050858

Page 4

4, 5, 7, 30

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

Schedule R (Form 990) 2009

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

(h) General or managing partner? Yes No Schedule R (Form 990) 2009 (g)
Code V-UBI
amount in box 20
of Schedule K-1
(Form 1065) (f) Disproportionate ů allocations? Yes (e)
Share of
end-of-year
assets (d)
Are all partners section 501(c)(3) organizations?
Yes No (c)
Legal domicile
(state or foreign
country) (b) Primary activity 1 (a) Name, address, and EIN of entity