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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)

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

The organization may have to use a copy of this return to satisfy state reporting requirements For the 2012 calendar year, or tax year beginning 7/1/2012 6/30/2013 and ending C Name of organization Employer identification number Check if applicable Greater Philadelphia Alliance for Capital & Technologies Address change Doing Business As 23-3036397 Number and street (or PO box if mail is not delivered to street address) Name change Room/suite E Telephone number Initial return 600 (215) 790-3646 200 South Broad Street City, town or post office, state, and ZIP code Terminated Philadelphia PA 19102-3896 G Gross receipts \$ Amended return 1.820.869 F Name and address of principal officer Application pending H(a) Is this a group return for affiliates? Yes X No Dean Miller 200 South Broad Street, Philadelphia, PA 19102 H(b) Are all affiliates included? If "No," attach a list (see instructions) 501(c)(3) X 501(c) (Tax-exempt status) < (insert no) 4947(a)(1) or 527 Website: ▶ www philadelphiapact com H(c) Group exemption number ▶ K Form of organization X Corporation Trust Other > Association L Year of formation 2000 M State of legal domicile PA Part I Summary 1 Briefly describe the organization's mission or most significant activities Greater Philadelphia Alliance for Capital and Technologies (PACT)'s mission is to create a strategic Hub for the region's emerging growth companies in the information technology, clean technology, and life sciences industries, manifesting in a competitive edge for the Greater Philadelphia region 2 Check this box ▶ If the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) 4 23 5 Total number of individuals employed in calendar year 2012 (Part V, line 2a) 5 7 6 Total number of volunteers (estimate if necessary) 87 6 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0 Net unrelated business taxable income from Form 990-T, line 34 7b 0 RECEIVED Prior Year **Current Year** 8 Contributions and grants (Part VIII, line 1h) 19,420 0 Ś 9 Program service revenue (Part VIII, line 2g) 1,698,382 1,818,832 Investment income (Part VIII, column (A), lines 3, 4, and 7d? 0 2014 10 270 443 Other revenue (Part VIII, column (A), lines 5, \$d, 8c, 9c, 10c, and 11e) 11 12,193 1,594 Total revenue—add lines 8 through 11 (must equal Part /) - column (A), in 12 1,730,265 1,820,869 13 Grants and similar amounts paid (Part IX, column (A), lines 1=3) 0 5,000 14 Benefits paid to or for members (Part IX, column (A), line 4) 0 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 392.009 639,748 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) ▶ 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 1,218,281 1,059,755 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 1,610,290 1,704,503 19 Revenue less expenses Subtract line 18 from line 12 119,975 116,366 End of Year Beginning of Current Year Assets 20 Total assets (Part X, line 16) 315,875 468,980 21 Total liabilities (Part X, line 26) 167,949 204,688 22 Net assets or fund balances Subtract line 21 from line 20 264,292 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration, of preparer (other than-officer) is based on all information of which preparer has any knowledge 1/23/2014 Sign Signature of officer Here Dean Miller President and CEO Type or print name and title Print/Type preparer's name Date Preparer's signature PTIN Check Paid self-employed Preparer Firm's name Firm's EIN **Use Only** Firm's address ▶ Phone no May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

Form **990** (2012)

0

Total program service expenses

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 (see instructions)?	2		Х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III	5	Х	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? 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		X
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, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt		1	
	negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Χ
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable	_]		
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete			
	Schedule D, Part VI	11a		Χ
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more	l		
		11c		Х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	· · · · · · · · · · · · · · · · · · ·	11d		X
		11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		.	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			v
_		12a		_X
þ	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes,"	401		
40	and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	_X	~
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		×
14a		14a		X
D	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate			
	•	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	170		_^_
10	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services			<u> </u>
	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
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
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	l	
			^^^	

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Part IV	Checklist of	Required	Schedules	(continued)
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			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		х
22	Did the organization report more than \$5,000 of grants 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		x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the	22		
23	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	25		
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines			
	24b through 24d and complete Schedule K If "No," go to line 25	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	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		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a			
	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or			
	990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or			
22	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, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,	<u></u> -		
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	İ	X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		<u> </u>
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	X	
29 20	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29		<u> </u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> "Yes," <i>complete Schedule M</i>	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N,</i>	30		
•	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		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		_X_
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II,			
0F-	III, or IV, and Part V, line 1	34	Х	
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
U	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related	330		
	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		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? Note. All Form 990 filers are required to complete Schedule O	38	Х	
	11	Form	990 ((2012)
	11			

Form 9 Par		36397	P.	age 5
	Check if Schedule O contains a response to any question in this Part V		Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 13	· -	168	NO
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b	7 .		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	1		
-	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 7	,		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		X
b	If "Yes," enter the name of the foreign country			
	See instructions for 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	<u> </u>	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	<u> </u>	-
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	_		U
_	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
Ь	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6ь		
7	Organizations that may receive deductible contributions under section 170(c).	100		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			1
_	and services provided to the payor?	7a	ļ '	İ
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
е	Did the organization 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		<u> </u>
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		<u> </u>
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		Ь—
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. Did the organization make any taxable distributions under section 4966?	0-		1
a b	Did the organization make a distribution to a donor, donor advisor, or related person?	9a 9b		╁
10	Section 501(c)(7) organizations. Enter	30		\vdash
a	Initiation fees and capital contributions included on Part VIII, line 12			1
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	1		1
11	Section 501(c)(12) organizations. Enter	1		i
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources	1		
	against amounts due or received from them)			l
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	ļ	<u> </u>
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	1	1	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	<u></u>	<u> </u>	Щ
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	<u> </u>	 - -
	Note. See the instructions for additional information the organization must report on Schedule O			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
_	the organization is tensed to issue qualified health plans Enter the amount of reserves on hand 13b	\dashv		
с 14а	Did the organization receive any payments for indoor tanning services during the tax year?	14a	\vdash	x
	and the diganization receive any payments for masor tanning our floor daining the tax your.			

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

14b

Part VI

Greater Philadelphia Alliance for Capital and Technologies 23-3036397 Page 6

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

Sect	ion A. Governing Body and Management								
				Yes	No				
1a	Enter the number of voting members of the governing body at the end of the tax year	1a 2	5						
	If there are material differences in voting rights among members of the governing body, or	.			!				
	if the governing body delegated broad authority to an executive committee or similar								
	committee, explain in Schedule O				1				
b	b Enter the number of voting members included in line 1a, above, who are independent 1b 23								
2	Did any officer, director, trustee, or key employee have a family relationship or a business relations	hip 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 othe		3		Х				
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was		4		X				
5	Did the organization become aware during the year of a significant diversion of the organization's a		5		X				
6	Did the organization have members or stockholders?		6		X				
7a	Did the organization have members, stockholders, or other persons who had the power to elect or	appoint							
	one or more members of the governing body?	• •	7a		Х				
b	Are any governance decisions of the organization reserved to (or subject to approval by) members	•							
	stockholders, or persons other than the governing body?		7b		Х				
8	Did the organization contemporaneously document the meetings held or written actions undertaken	n during							
	the year by the following	· ·			١,				
а	The governing body?		8a	X	. ´				
b	Each committee with authority to act on behalf of the governing body?		8b	Х					
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re	eached							
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		X				
Sect	ion B. Policies (This Section B requests information about policies not required by the	Internal Revenue	Code	.)					
				Yes	No				
10a	Did the organization have local chapters, branches, or affiliates?		10a		X				
b	If "Yes," did the organization have written policies and procedures governing the activities of such of	•							
	affiliates, and branches to ensure their operations are consistent with the organization's exempt pu		10b	_					
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before	re filing the form?	11a	X					
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990								
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a	ļ	X				
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could go		12b	-	<u> </u>				
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If	'Yes,"	1.0						
	describe in Schedule O how this was done		12c	1 —	<u> </u>				
13	Did the organization have a written whistleblower policy?		13	 X	-				
14	Did 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 appro								
_	independent persons, comparability data, and contemporaneous substantiation of the deliberation.	and decision?	45-						
a b	The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization		15a 15b		Х				
U	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)		130	 	 ^				
16a		ement		1					
ıud	with a taxable entity during the year?	CHICH	16a	1	X				
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	ate its	100	 	 ^				
	participation in joint venture arrangements under applicable federal tax law, and take steps to safe			1					
	the organization's exempt status with respect to such arrangements?	guaru	16b	1	1				
Sect	ion C. Disclosure		,	1					
<u> 17</u>	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 Forms 1023 (or 1024 if applicable), 990, and 99	0-T (Section 501(c)	3)s on	y)					
	available for public inspection. Indicate how you made these available. Check all that apply	, (-)	•						
		plaın ın Schedule C)						
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents,	•	11						
	policy, and financial statements available to the public during the tax year		1.						
20	State the name, physical address, and telephone number of the person who possesses the books								
	organization David Hepburn	215-790-3	544						
	200 South Broad St , Suite 700, Philadelphia, PA 19102-3896								

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					ae

Form	222	(2012)	

Greater Philadelphia Alliance for Capital and Technologies

FUIII 990 (2012)	Greater Filladelphia Alliance for Capital and Technologies	23-3030331	raye
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Comp	ensated	
	Employees, and Independent Contractors		
	Check if Schedule O contains a response to any question in this Part VII.		. 🔲

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

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

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

Check this box if neither the organization	nor any related organiz	ation	con	npe	nsa	ted a	ny c	urrent officer, dir	ector, or trustee	
(C)										
(A) Name and Title	(B) Average hours per	Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Dean Miller	40 00					Ī				
Director and CEO	0 00	I .		x		1		170,105	0	17,955
(2) Andrea Allon	1 00		İ							
Director	40 00	x					1	l o	294,200	57,381
(3) Saul Behar	1 00									
Director	0 00	X				•		o	0	0
(4) Jonathan Brassington	1 00									
Director	0 00	X	ļ					0	0	0
(5) Andrew Cherry	1 00									
Director	0 00	Х		l			<u> </u>	0	0	0
(6) Jon Congleton	1 00							1		
Director	0 00	X						0	0	0
(7) Guy Fardone	1 00				ļ	1				
Director	0 00				L	<u> </u>	L	0	0	0
(8) Michael Forman	1 00									
Director	0 00		L		<u>L</u>		_	0	0	0
(9) Andrew Hamilton	1 00		١							
Director	0 00		<u> </u>		<u>L</u>			0	0	0
(10) Michael Harrington		•				1				
Director	0 00				L	<u> </u>	ļ	0	0	0
(11) Frank Hermance	1 00									
Director	0 00					ļ	<u> </u>	0	0	0
(12) Michael Heller	1 00	!								
Director	0 00				丄	1		0	0	0
(13) Immanuel John	1 00							1		
Director	0 00		$oxed{oxed}$			L		0	0	0
(14) Andrew Jordan	1 00	- 1				11,			1	
Director	0 00	X						0	0	0

more than \$100,000 of compensation from the organization

(C) Position (A) (B) (do not check more than one (D)												
(A) Name and title	(B) Average	,				than one is both		(D) Reportable	(E) Reportable	Es	(F) timated	j
	hours per week (list any		1	$\overline{}$	$\overline{}$	or/trust		compensation from	compensation from related		nount of other	f
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	comp fro orga and	pensation the anization direlated	on d
(15) Marc Lederman	1 00								-			
Director	0 00	X			L			0	0			0
(16) Brian Lobley	1 00											
Director	0 00	X	<u> </u>				<u> </u>	0	0			0
(17) Christopher Miller	1 00											
Director	0 00	X	L.	_				0	0			0
(18) Bob Moul	1 00		l									
Director	0 00	+	<u> </u>				<u></u>	0	0			0
(19) Phlip Moyer	1 00	1										
Director	0 00	X	<u> </u>		L		L.	0	0			0
(20) Charles Robins	1 00											
Director	0 00	X						0	0	ļ <u> </u>		0
(21) RoseAnn Rosenthal	1 00			ļ								
Director	0 00	_		<u> </u>	L.			0	0			0
(22) John Royer, Jr	1 00	1										
Director	0 00	-	<u> </u>		_	<u> </u>		0	0			0
(23) Kathleen Shay	1 00		Ì									
Director	0 00	_	$oxed{oxed}$		L	ļ		0_	0	<u> </u>		0
(24) Joe Sheehan	1 00	1				1						
Director	0 00		<u> </u>		╙	Ļ	_	0	0			0
(25) Harry Vitelli	1 00			ŀ		l						
Director	0 00	X	<u> </u>		L			0	0			0
1b Sub-total								170,105	294,200			<u>,336</u>
c Total from continuation sheets to Part VII, S	ection A							111,575				<u>,418</u>
d Total (add lines 1b and 1c)							<u> </u>	281,680	 	<u> </u>	90	<u>,754</u>
2 Total number of individuals (including but not li		sted a	abov		vho	recei	ved	more than \$100),000 of			
reportable compensation from the organization	•			3								
											Yes	<u>No</u>
3 Did the organization list any former officer, dire				loye	e, c	or higi	hesi	t compensated			ļ	
employee on line 1a? If "Yes," complete Sched	lule J for such ın	dıvıdı	ual							3	\longrightarrow	<u> </u>
4 For any individual listed on line 1a, is the sum	of reportable cor	npen	satio	on a	ind	other	cor	mpensation from			:	
the organization and related organizations great	ater than \$150,0	00? <i>I</i> .	f "Ye	es, "	con	nplete	e Sa	hedule J for suc	h			
ındıvıdual										4	Х	
5 Did any person listed on line 1a receive or acc	rue compensatio	n fro	m a	ny ι	ınre	lated	org	anization or indi-	vidual		.	
for services rendered to the organization? If "Y										5	. [Χ
Section B. Independent Contractors						<u> </u>						
Complete this table for your five highest compe	ensated indepen	dent	con	trac	tors	that	rece	eived more than	\$100,000 of			
compensation from the organization Report of	ompensation for	the c	aler	ıdar	yea	ar end	ding	with or within th	e organization's	tax		
year												
(A)								(B)		(C))	
Name and business address Description of services				vices	Compen	sation						
NONE							1					0
							<u></u>					0
							$oxed{\Box}$					0
							$oxed{\Box}$					0
												0
2 Total number of independent contractors (inclu	ding but not limi	ted to	the	se	liste	d abo	ove)	who received	ļ			

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

		Check if Schedule O contains	a response to a	any question in th	nis Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
90 eq	1a	Federated campaigns	1a	0				
rant	b	Membership dues	1 <u>b</u>					
G G	С	Fundraising events	<u>1c</u>	0				
Sifts	d	Related organizations	1d	0				
in, (е	Government grants (contributions	s) <u>1e</u>	0				
er S	f	All other contributions, gifts, gran	its, and					
ig ig		similar amounts not included abo	ve <u>If</u>	0				
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contributions included in l	ines 1a-1f ⁻ \$	0				
- 0 6	h	Total. Add lines 1a-1f		<u> </u>	0			
9				Business Code				
Ven	2a	Programs and Events	••••	561499	1,552,448	1,552,448		
8	b	Membership Dues		561499	266,384	266,384		
vice	С				0			
Ser	d				0			
'am	е				0			_
Program Service Revenue	f	All other program service revenu	е	L	0			
_	<u>g</u>	Total. Add lines 2a–2f		<u>.</u>	1,818,832			
	3	Investment income (including div	idenas, interest	, and	440	ļ		442
		other similar amounts)	.compt bond area	ooodo b	443			443
	4	Income from investment of tax-ex	kempi bona pro	ceeus -	0			
	5	Royalties	(ı) Real	(II) Personal	<u> </u>			-
	6a	Gross rents	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(ii) / Grosman	1			İ
	b	Less rental expenses		+				
	C	Rental income or (loss)		0	i			
	d	Net rental income or (loss)		<u>, </u>	o	Ì		†
	7a	Gross amount from sales of	(ı) Secunties	(II) Other				
		assets other than inventory	(0				}
	b	Less cost or other basis	· · · - · · -		1			
		and sales expenses	(o lo				
	С	Gain or (loss)		<u> </u>				
	d	Net gain or (loss)		>	0			Ī
<u>o</u>	8a	Gross income from fundraising					-,-	
eu		events (not including \$	0					
é		of contributions reported on line						
Ē		See Part IV, line 18	a	0				
Other Revenue	b	Less direct expenses	b	0	}			1
0	С	Net income or (loss) from fundra	ising events		0	_		
	9a	Gross income from gaming activ	ities					
		See Part IV, line 19	а	0				1
	b	Less direct expenses	b	0]			
	С	Net income or (loss) from gaming	g activities		0			
	10a	Gross sales of inventory, less						
		returns and allowances	а	0				
	b	Less cost of goods sold	b	0	↓			1
	С	Net income or (loss) from sales of	of inventory	<u> </u>	0			
		Miscellaneous Revenue		Business Code]			1
	11a	Miscellaneous		561499	1,594			1,594
	b				0			
	q,				1' 0			
	d	All other revenue		L	0			-
	e	Total sevenue See instructions		•	1,594	1 818 832		0 2.037
	. = -7	LOTAL FOUNDING SOO INCTINCTIONS			ו אם מינים ו	4 040 0771		2127

	90 (2012) Greater Philadelphia Alliance for Capital a	na recnnologies		23-30	36397 Page 10
	t IX Statement of Functional Expenses				
Section	on 501(c)(3) and 501(c)(4) organizations must complete all			omplete column (A)	
	Check if Schedule O contains a response to any o	· · · · · · · ·			
	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 United States See Part IV, line 21	5,000			
2	Grants and other assistance to individuals in the United States See Part IV, line 22	o			
3	Grants and other assistance to governments,	-			
•	organizations, and individuals outside the				
	United States See Part IV, lines 15 and 16	o			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors,				
	trustees, and key employees	317,579			
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and	ا			
_	persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages Pension plan accruals and contributions (include	247,117			
8	section 401(k) and 403(b) employer contributions)	6,644			
9	Other employee benefits	26,408			
10	Payroll taxes	42,000			
11	Fees for services (non-employees)				
а	Management	0			
b	Legal	0			
С	Accounting	13,460			
d	Lobbying	50,068			
е	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	0			
g	Other (If line 11g amount exceeds 10% of line 25, column	60.000			
12	(A) amount, list line 11g expenses on Schedule O) Advertising and promotion	1,857			
13	Office expenses	11,219			
14	Information technology	6,051			
15	Royalties	0			
16	Occupancy	20,412			
17	Travel	9,042			
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	860,743			
20	Interest	0			
21 22	Payments to affiliates Depreciation, depletion, and amortization	0	0	0	0
23	Insurance	0		·	
24	Other expenses Itemize expenses not covered			-	
	above (List miscellaneous expenses in line 24e If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O)				
а	Bad debts expense	550			
b	Bank and credit card fees	22,453			
C	Dues and subscriptions	1,709			
d	All other eveness Musellanesus	0			
e 25	All other expenses Miscellaneous Total functional expenses. Add lines 1 through 24e	2,191 1,704,503	0	0	0
25 26	Joint costs. Complete this line only if the	1,704,503			<u> </u>
20	organization reported in column (B) joint costs]	
	from a combined educational campaign and				
	fundraising solicitation Check here]
	following SOP 98-2 (ASC 958-720)				

Part X

		Check if Schedule O contains a response to	any que	estion in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing			167,047	1	294,044
	2	Savings and temporary cash investments	22,386	2	22,448		
	3	Pledges and grants receivable, net			0	3	0
	4	Accounts receivable, net			72,293	4	104,534
	5	Loans and other receivables from current and for					
		trustees, key employees, and highest compensa			-		
	1	Complete Part II of Schedule L			0	5	0
	6	Loans and other receivables from other disqualified person	•				
		4958(f)(1)), persons described in section 4958(c)(3)(B), a		- ' '			
(A		sponsoring organizations of section 501(c)(9) voluntary e		beneficiary		_	
Assets	_	organizations (see instructions) Complete Part II of Sche	edule L		0	6	0
Ass	7	Notes and loans receivable, net		-	0	7	0
-	8	Inventories for sale or use		-	0	8	0
	9 10a	Prepaid expenses and deferred charges	1 1	}	54,149	9	47,954
	IUa	Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D.	10a	o			
	Ь	Less accumulated depreciation	10b	0	0	10c	0
	11	Investments—publicly traded securities	TOD	<u> </u>	0	11	0
	12	Investments—other securities See Part IV, line	11	ŀ	0	12	0
	13	Investments—program-related See Part IV, line		ļ l	0	13	0
	14	Intangible assets	0	14	0		
	15	Other assets See Part IV, line 11	0	15	0		
	16	Total assets. Add lines 1 through 15 (must equal	al line 34	4)	315,875	16	468,980
	17	Accounts payable and accrued expenses	70,549	17	114,538		
	18	Grants payable	0	18	0		
	19	Deferred revenue	97,400	19	90,150		
	20	Tax-exempt bond liabilities		0	20	0	
	21	Escrow or custodial account liability Complete F			0	21	0
es	22	Loans and other payables to current and former					
Liabilities		trustees, key employees, highest compensated		ees, and			
iab		disqualified persons Complete Part II of Schedu			0	22	0
_	23	Secured mortgages and notes payable to unrela		· ·	0	23	0
	24	Unsecured notes and loans payable to unrelate			0	24	0
	25	Other liabilities (including federal income tax, pa	•				
		parties, and other liabilities not included on lines Part X of Schedule D	5 17-24)	Complete		05	
	26	Total liabilities. Add lines 17 through 25		}	0 167,949	25 26	204,688
	20				107,949	20	204,000
ces		Organizations that follow SFAS 117 (ASC 958 complete lines 27 through 29, and lines 33 ar		k here ► X and			
lar	27	Unrestricted net assets			147,926	27	264,292
ä	28	Temporarily restricted net assets			0	28	0
밀	29	Permanently restricted net assets			0	29	0
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC958), complete lines 30 through 34.	check he	ere 🕨 🗌 and			
ets	30	Capital stock or trust principal, or current funds			o	30	0
\SS	31	Paid-in or capital surplus, or land, building, or ed	quipmen	t fund	0	31	0
et /	32	Retained earnings, endowment, accumulated in		<u> </u>	0	32	0
Ž	33	Total net assets or fund balances			147,926	33	264,292
	34	Total liabilities and net assets/fund balances			315,875	34	468,980

Form :	990 (2012) Greater Philadelphia Alliance for Capital and Technologies	2	23-3036397	Pag	ge 12
Par	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		1,820	0,869
2	Total expenses (must equal Part IX, column (A), line 25)	2		1,704	4,503
3	Revenue less expenses Subtract line 2 from line 1	3		116	3,366
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		147	7,926
5	Net unrealized gains (losses) on investments	5			0
6	Donated services and use of facilities	6			0
7	Investment expenses	7			0
8	Prior period adjustments	8			0
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10		264	4,292
Part					
	Check if Schedule O contains a response to any question in this Part XII	•			
				Yes	No
1	Accounting method used to prepare the Form 990		_		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				,
	Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				'
	reviewed on a separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Χ	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both				١,
	Separate basis X Consolidated basis Both consolidated and separate basis				'
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight	of			
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	1
	If the organization changed either its oversight process or selection process during the tax year, explain in				
	Schedule O				1
3a	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
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		
				222	

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

20**12**

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.

▶ See separate instructions.

Open to Public Inspection

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then

• 5	Section 501(c)(4), (5), or (6) or	rganizations Complete Part III			
	ne of organization	·		Employe	er identification number
Grea	ater Philadelphia Alliance fo	or Capital and Technologies			23-3036397
Рa	rt I-A Complete if t	he organization is exempt und	ler section 501(c) or is a section 527	organization.
1	Provide a description of the	he organization's direct and indirect p	olitical campaign a	activities in Part IV	
2	Political expenditures			▶ \$	
3	Volunteer hours				
Dо	rt I-B Complete if t	he organization is exempt and	lor costion E01	/o\/2\	
Га 1		he organization is exempt und excise tax incurred by the organization			
2		excise tax incurred by the organization m			
3	·	ed a section 4955 tax, did it file Form	_	_	☐ Yes ☐ No
4a		a d decilon 4000 tax, aid it life i offin	4720 for this year.		Yes No
	If "Yes," describe in Part I	·V			
		he organization is exempt und	ler section 5016	c), except section 501	(c)(3).
1		expended by the filing organization f		···	(C)(C)
	activities			▶ \$	
2	Enter the amount of the fi	iling organization's funds contributed	to other organizati	ons	
	for section 527 exempt fu		•	▶ \$	
3	Total exempt function exp	penditures Add lines 1 and 2 Enter h	ere and on Form 1	1120-POL,	
	line 17b			▶ \$	0
4	Did the filing organization	file Form 1120-POL for this year?			Yes No
5		ses and employer identification numb			
		ents For each organization listed, en			
		ntributions received that were prompt I fund or a political action committee			
	as a separate segregated		(1 AC) 11 BUUILIONA	space is ficeded, provide	T T T T T T T T T T T T T T T T T T T
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's	(e) Amount of political contributions received and
				funds If none, enter -0-	promptly and directly
					delivered to a separate political organization. If
					none, enter -0-
					1
(1)					
(2)					
(2)					
(3)					
(4)					
	· · · · · · · · · · · · · · · · · · ·		-	<u>-</u>	
(5)					
(6)					
ν,	11	l	ľ	l 11	I

Sch	edule C (Form 990 or 990-EZ) 2012				20 0000001	Page 2
Pa	art II-A Complete if the organizate under section 501(h)).	tion is exempt	under section 5	01(c)(3) and filed	l Form 5768 (ele	
A B	Check ▶ if the filing organization name, address, EIN, excheck ▶ if the filing organization	kpenses, and sh	are of excess lob	bying expenditur	es).	up member's
		obbying Expendit	tures		(a) Filing organization's totals	(b) Affiliated group totals
1a b c	Total lobbying expenditures to influence protein lobbying expenditures to influence a Total lobbying expenditures (add lines 1a)	0	0 0			
d e	Other exempt purpose expenditures Total exempt purpose expenditures (add	lines 1c and 1d)			0	0
f [Lobbying nontaxable amount Enter the a columns If the amount on line 1e, column (a) or (b)		ollowing table in bot ng nontaxable amou		0	0
	Not over \$500,000 Over \$500,000 but not over \$1,000,000	20% of the a \$100,000 plu	mount on line 1e us 15% of the excess	over \$500,000		
-	Over \$1,000,000 but not over \$1,500,000 Over \$1,500,000 but not over \$17,000,000 Over \$17,000,000		us 10% of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the excess of the ex			
g h	Grassroots nontaxable amount (enter 25 Subtract line 1g from line 1a If zero or le	% of line 1f)		1	0	0 0
i j	Subtract line 1f from line 1c If zero or les If there is an amount other than zero on e section 4911 tax for this year?	•	e 1ı, did the organiz	zation file Form 472	0 reporting	Yes No
	(Some organizations tha	it made a section				
	Lobb	ying Expenditure	es During 4-Year A	veraging Period		
	Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) Total
2a	Lobbying nontaxable amount	0	0	0	0	0

	Lo	bbying Expenditure	es During 4-Year A	veraging Period		
	Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) Total
2a	Lobbying nontaxable amount	0	0	0	0	0
b	Lobbying ceiling amount (150% of line 2a, column(e))					0
c	Total lobbying expenditures	0	0	0	0	0
d	Grassroots nontaxable amount	0	0	0	0	0
_e	Grassroots ceiling amount (150% of line 2d, column (e))					0
f	Grassroots lobbying expenditures	0	0	0	0	0

Schedule C (Form 990 or 990-EZ) 2012

	orm 990 or 990-EZ) 2012					Page 3
Part II-B	Complete if the organization is exempt under section 501(c)(3) and has NOT (election under section 501(h)).	filed	1 For	n 576	8	
or each	"Yes," response to lines 1a through 1i below, provide in Part IV a detailed description	(;	a)		(b)	
	bying activity	Yes	No	A	moun	t
legis refer	ng the year, did the filing organization attempt to influence foreign, national, state or local lation, including any attempt to influence public opinion on a legislative matter or endum, through the use of inteers?		_			
b Paid	staff or management (include compensation in expenses reported on lines 1c through 1i)? a advertisements?			-		
	ngs to members, legislators, or the public?					
	ications, or published or broadcast statements?	-				
	ats to other organizations for lobbying purposes?					
	ct contact with legislators, their staffs, government officials, or a legislative body?	-				
h Rallı	es, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
	Add lines 1c through 1i					
-	he activities in line 1 cause the organization to be not described in section 501(c)(3)?					
	es," enter the amount of any tax incurred under section 4912					
	es," enter the amount of any tax incurred by organization managers under section 4912					
	filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Part III-A		c)(5)	, or s	ection	1	
					Yes	No
1 Were	e substantially all (90% or more) dues received nondeductible by members?			1		Х
2 Did t	he organization make only in-house lobbying expenditures of \$2,000 or less?			2		Х
3 Did t	he organization agree to carry over lobbying and political expenditures from the prior year?			3	Х	<u> </u>
Part III-B	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes."				, line	
	s, assessments and similar amounts from members		1		26	6,38
	ion 162(e) nondeductible lobbying and political expenditures (do not include amounts of					
-	ical expenses for which the section 527(f) tax was paid).				_	
	ent year		2a		5	0,06
	yover from last year		2b			(
c Tota			2c			0,068
4 If no	regate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues tices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the iss does the organization agree to carryover to the reasonable estimate of nondeductible		3		. 6	66 <u>,596</u>
lobb	ying and political expenditure next year?		4			(
5 Taxa	ble amount of lobbying and political expenditures (see instructions)		5	·	-1	6,52
Part IV	Supplemental Information					
•	his part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part I-A, line 2, and Part II-B, line 1. Also, complete this part for any additional information	t II-A	(affiliat	ed gro		

Grea	iter Philadelphia Alliance for Capital and Technolog	
Part IV	orm 990 or 990-EZ) 2012 Supplemental Information (continued)	Page 4
Fartiv	Supplemental information (continued)	
_		

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	······································	
	<u>L</u> '	<u> </u>

SCHEDULE D (Form 990)

Supplemental Financial Statements

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

 OMB No 1545-0047 2012

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

Grea	ter Philadelphia Alliance for Capital and Techn		23-3036397	
Par			ar Funds or Accounts. Complete if	
	the organization answered "Yes" t	o 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)			
3	Aggregate grants from (during year)			_
4	Aggregate value at end of year			
5	Did the organization inform all donors and do			
_	funds are the organization's property, subject)
6	Did the organization inform all grantees, done			
	used only for charitable purposes and not for purpose conferring impermissible private ben		·	
	· · · · · · · · · · · · · · · · · · ·			<u>,</u>
Par		olete if the organization answered "		_
1	Purpose(s) of conservation easements held to			
	Preservation of land for public use (e.g., recr	eation or education) Preserva	ation of an historically important land area	
	Protection of natural habitat	Preserva	ation of a certified historic structure	
	Preservation of open space			
2	Complete lines 2a through 2d if the organizat	ion held a qualified conservation contrib	oution in the form of a conservation	
	easement on the last day of the tax year			
			Held at the End of the Tax Yea	r
а	Total number of conservation easements		2a	
b	Total acreage restricted by conservation ease		2b	
C	Number of conservation easements on a cert		2c	
d	Number of conservation easements included			
_	historic structure listed in the National Registr			_
3	Number of conservation easements modified during the tax year	, transferred, released, extinguished, or	terminated by the organization	
4	Number of states where property subject to o	onservation easement is located	_	
5	Does the organization have a written policy re		ction, handling of	
	violations, and enforcement of the conservati		Yes No)
6	Staff and volunteer hours devoted to monitor			
	>	3. , 3	3 7	
7	Amount of expenses incurred in monitoring, i	nspecting, and enforcing conservation ϵ	easements during the year	
	▶ \$			
8	Does each conservation easement reported	on line 2(d) above satisfy the requireme	ents of section	
	170(h)(4)(B)(ı) and section 170(h)(4)(B)(ıı)?		Yes No)
9	In Part XIII, describe how the organization re			
	balance sheet, and include, if applicable, the	-	s financial statements that describes	
Par	the organization's accounting for conservation	n easements ns of Art, Historical Treasures, or Oth	nor Cimilar Appara	_
ı aı	Complete if the organization answered		ier Sillillar Assets.	
		<u> </u>		_
1a	If the organization elected, as permitted under			
	works of art, historical treasures, or other sim	· · · · · · · · · · · · · · · · · · ·		
b	of public service, provide, in Part XIII, the tex If the organization elected, as permitted under			
J	works of art, historical treasures, or other sim	• • • • • • • • • • • • • • • • • • • •		
	of public service, provide the following amour		acation, or research in fulfilleratioe	
	(i) Revenues included in Form 990, Part VIII.	•	▶ \$	
	(ii) Assets included in Form 990, Part X		▶ \$ ▶ \$	- -
2	If the organization received or held works of	art, historical treasures, or other similar		
	following amounts required to be reported un			
а	Revenues included in Form 990, Part VIII, lin		▶ \$	
b	Assets included in Form 990, Part X	•	▶ \$	

Leasehold improvements

Equipment

Other

С

d

0

0

0

0

0

0

0

1 2. FIN 48 (ASC 740) Footnote In Part XIII, provide the text of the footnote to the pranization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

Sched	ule D (Form 990) 2012 Greater Philadelphia Alliance for Capital and Technologies		23-3036397	Page 4
Par	Reconciliation of Revenue per Audited Financial Stateme	nts With Revenue	per Return	
1	Total revenue, gains, and other support per audited financial statements	•	1	
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		
С	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII)	2d		
е	Add lines 2a through 2d		2e	0
3	Subtract line 2e from line 1	1 1	3	0
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	_	
b	Other (Describe in Part XIII)	4b		
С	Add lines 4a and 4b		4c	0
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	<u> </u>	5	0
	Reconciliation of Expenses per Audited Financial Statement	ents With Expense		
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	1 - 1		
a	Donated services and use of facilities	2a	→	
b	Prior year adjustments	2b	<u> </u>	
C	Other losses	2c	_	
d	Other (Describe in Part XIII)	2d	\rightarrow \sim 1	^
e	Add lines 2a through 2d		2e	0
3	Subtract line 2e from line 1	1 1	3	0
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	40		
a b	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII)	4a 4b		
	Add lines 4a and 4b	40	-	0
с 5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		4c 5	0
	t XIII Supplemental Information			
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Par	t III lines 1a and 4. Pa	art IV lines 1h and	2h
	V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Alsi			20,
	ional information	o complete this part to	provide arry	
⊃art	X Line 2 GPCC, Regional Foundation, PVLA, Select and PACT (collectively know	n as "The	· 	
Char	nber") qualify as tax-exempt organizations under the existing provisions of the		·	
nter	nal Revenue Code and their income is not subject to state or federal income taxes	s		
The	Chamber files Federal Form 990 and, when necessary, Form 990T The Chamber	believe it	·	
s no	longer subject to U.S. federal, state or local income tax examinations by tax			
resol	ution of any particular tax position Based on the Chamber's assessment of many			
	rs, including past experience and judgments about future events, the Chamber do			
<u> </u>	o, molecular past experience and paginerie about fatale events, the original de	300 1100	Schedule D (F	orm 990) 2012

Schedule D (Form	1 990) 20 <u>12</u>	Greater Ph	uladelphia Alliance foi	Capital and Ted	chnologies	 23-3036397	Page 5
Part XIII	Supple	emental Inf	formation (continu	ed)			
currently antic	ripate signi	ficant change	es in its tax positions	over the next 12	months	 	
				••		 	
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SCHEDULE J (Form 990)

Department of the Treasury

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

23-3036397

Internal Revenue Service Name of the organization

Greater Philadelphia Alliance for Capital and Technologies

Employer identification number

Par	Questions Regarding Compensation		_		
				Yes	No
1a		ovided any of the following to or for a person listed in Form provide any relevant information regarding these items			,
	First-class or charter travel	Housing allowance or residence for personal use	-		· '
	Travel for companions	Payments for business use of personal residence			
	Tax indemnification and gross-up payments	Health or social club dues or initiation fees			;
	Discretionary spending account				
	Discretionary spending account	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the correimbursement or provision of all of the expenses explain	organization follow a written policy regarding payment is described above? If "No," complete Part III to	1b		_ ,
2	Did the organization require substantiation prior to r officers, directors, trustees, and the CEO/Executive		2		
3	Indicate which, if any, of the following the filing orga organization's CEO/Executive Director Check all th related organization to establish compensation of the	at apply Do not check any boxes for methods used by a			
	Compensation committee	Written employment contract			ļ
	Independent compensation consultant	Compensation survey or study			,
	Form 990 of other organizations	X Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, organization or a related organization	Part VII, Section A, line 1a, with respect to the filing			
а	Receive a severance payment or change-of-control		4a		Χ_
b	Participate in, or receive payment from, a supplement		4b		X
С	Participate in, or receive payment from, an equity-b		4c		Х
	If "Yes" to any of lines 4a—c, list the persons and pro	ovide the applicable amounts for each item in Part III			
	Only section 501(c)(3) and 501(c)(4) organization	se must complete lines 5_9			. '
5	For persons listed in Form 990, Part VII, Section A,				
_	compensation contingent on the revenues of	and the digamental pay of decide any			
а	The organization?		5a		·
b	Any related organization?		5b		
	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				
a b	The organization? Any related organization?		6a 6b		
	If "Yes" to line 6a or 6b, describe in Part III		90	_	
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," d		7		
8	Were any amounts reported in Form 990, Part VII, p	paid or accrued pursuant to a contract that was		-	
		Regulations section 53 4958-4(a)(3)? If "Yes," describe			
	ın Part III		8		
9	If "Yes" to line 8, did the organization also follow the	e rebuttable presumption procedure described in			
	Regulations section 53 4958-6(c)?		9		

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

Schedule J (Form 990) 2012

23-3036397

Schedule J (Form 990) 2012 Greater Philadelphia Alliance for Capital and Technologies

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed For each individual whose compensation must be reported 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 Part II

Note. The sum of columns (B)(I)—(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(F) Compensation reported as deferred in prior Form 990 52,535 Schedule J (Form 990) 2012 188,060 352,836 (E) Total of columns (B)(I)–(D) 14,955 255 (D) Nontaxable benefits 57,381 (C) Retirement and other deferred compensation 5 987 (B) Breakdown of W-2 and/or 1099-MISC compensation (iiii) Other reportable compensation 57 20,000 45,650 (ii) Bonus & incentive compensation 150,000 190,563 (I) Base compensation Ξ \equiv \in \in Ξ Ξ \in \in $\mathbf{\Xi}$ \in \in Ξ Ξ (A) Name and Title Director and CEO Andrea Allon Dean Miller 2 Director က S 9 ∞ တ 9 12 5 4 5 16 Ŧ

SCHEDULE L (Form 990 or 990-EZ)

Transactions With Interested Persons

20**12**

Open To Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Part I

► 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.

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only)

Employer identification number

Greater Philadelphia	Alliance f	for Capital and	d Technologies

23-3036397

			(b) F	Relationship	between d	squalified person	(a) Dan					(d) Con	rected?
1	(a) Name of disc	qualified person		ai	nd organiza	tion	(c) Desi	cription o	or transat			Yes	No
(1)													
(2)													
(3)					_	_							
(4)													
(5)													
(6)													
2	Enter the amount of under section 4958	tax incurred by	the organiza	ition man	agers or	disqualified pers	sons during the	year		>	\$		
3	Enter the amount of	tax, if any, on lir	ne 2, above,	reimburs	sed by th	e organization				>	\$		
Part	Complete if th organization r	lor From Intereste organization a eported an amou	nswered "Ye unt on Form	es" on Fo				ı		26, or 1	if the	1	
(a) N	lame of interested person	(b) Relationship with organization	(c) Purpose of loan		to or from nization?	(e) Original principal amount	(f) Balance due	(g) In (default?	by bo	proved pard or nittee?		ntten ment?
				То	From			Yes	No	Yes	No	Yes	No
(1)									ļ			↓	
(2)		<u> </u>		ļ			ļ	ļ			<u> </u>	—	
(3)											ļ		<u> </u>
(4)									ļ	-	ļ	 	
(5)	· · ·				<u> </u>				ļ			\vdash	<u> </u>
(6)				ļ	_		_	 	<u> </u>			\vdash	
(7)				 	<u> </u>			-	<u> </u>	-	 	\vdash	
(8)				<u> </u>	<u> </u>	-		-	 -	<u> </u>		 	
(9)				 	-	-		 	-	 	₩	+-	-
(10)					L	L	<u> </u>	\$ -2, \$. A	[9 - 27 - 84	e por	~*,	. *	<u> </u>
Total		5 -				▶ \$	0	<u> </u>	, 8 - 9 - 4 ;	₹4		<u> </u>	
Part		sistance Benefi ne organization a	_			Part IV line 27							

(c) Amount of assistance

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

(a) Name of interested person

(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)

Schedule L (Form 990 or 990-EZ) 2012

(e) Purpose of assistance

(b) Relationship between interested person and the organization

(d) Type of assistance

	a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sha organiz rever	anng c ration' lues?
					Yes	No
	el Heller	Director	54,404	Director of Vendor		Х
2)						
3)						
4)					_	
5) S)						
<u>''</u> ')		· · · · · · · · · · · · · · · · · · ·			+	
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art V	Supplemental Information	n de additional information for resp				
						
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11

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

2012

Open to Public Inspection

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

Name of the organization	Employer identification number
Greater Philadelphia Alliance for Capital and Technologies	23-3036397
Form 990 Part III Line 1 (continued from Form 990, page 2) corporations to network, develop	
Point 330 Part III Line 1 (Continued IIIOIII 7 01111 330, page 2) Colporations to Hetwork, develop	
relationships, pursue business opportunities, and market and promote their businesses to	••••
foster growth and innovation	
5 - COO B-tVI O-t Ali O lth Bt I M-t I l-IIl	
Form 990 Part VI Section A Line 2 Jonathan Brassington and Michael Heller have a business	
relationship	
Form 990 Part VI Section A Line 2 Jonathan Brassington and Marc Lederman have a business	
relationship	
Form 990 Part VI Section A Line 2 Michael Harrington and Guy Fardone have a business	
relationship	
Form 990 Part VI Section A Line 2 Michael Harrington and Marc Lederman have a business	
relationship	
Form 990 Part VI Section A Line 2 Michael Heller and Michael Forman have a business	
relationship	
Form 990 Part VI Section A Line 2 Michael Heller and RoseAnn Rosenthal have a business	
relationship	
Farm 200 Bort VI Section A Line 2 Bright Labley and Mara Laderman have a historical relationship	
Form 990 Part VI Section A Line 2 Brian Lobley and Marc Lederman have a business relationship	
Form 990 Part VI Section A Line 2 Dean Miller and Jonathan Brassington have a business	
relationship	
Form 990 Part VI Section B Line 11 The organization's form 990 is prepared and reviewed by the	
staff of the Greater Philadelphia Chamber of Commerce. In addition it is also reviewed by	
PACT's CEO and provided to the Board of Directors prior to filing	
Form 990 Part VI Section B Line 15 The compensation of the CEO is determined by the Executive	
Committee of the Board of Directors	•
Form 990 Part VI Section B Line 19 No documents are made available to the public	•••••
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SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Greater Philadelphia Alliance for Capital and Technologies

Partl

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

Open to Public Inspection

▶ See separate instructions.

Related Organizations and Unrelated Partnerships

Employer identification number

23-3036397

(g) Section 512(b)(13) controlled Ŷ × × × (f) Direct controlling × entity? Identification of Related Tax-Exempt Organizations (Complete If the organization answered "Yes" to Form 990, Part IV, line 34 because it had Yes × GPCC Reg Found (f) Direct controlling End-of-year assets ۲ ۲ ٨ ۷Ž ◉ Public charity status (if section 501(c)(3)) Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33) • 11, Type 1 Total income (d) Exempt Code section Legal domicile (state or foreign country) 501 (c)(6) 501 (c)(6) 501 (c)(6) 501 (c)(3) 501 (c)(3) Legal domicile (state or foreign country) Primary activity Æ Promote trade & comme PA Marketing Phila region PA Education, Cultural Dev PA Æ Legal referral services one or more related tax-exempt organizations during the tax year) Primary activity **Business League** (a)Name, address, and EIN (if applicable) of disregarded entity Greater Philadelphia Chamber of Commerce 23-0969030 (5) Philadelphia Volunteer Lawyers for the Arts 23-2066564 200 South Broad Street, Suite 700 Philadelphia, PA 19102 200 South Broad Street, Suite 700 Philadelphia, PA 19102 200 South Broad Street, Suite 700 Philadelphia, PA 19102 200 South Broad Street, Suite 700 Philadelphia, PA 19102 200 South Broad Street, Suite 700 Philadelphia, PA 19102 (3) Business Leadership Marketing Corp 83-0361015 Name, address, and EIN of related organization (4) GPCC Regional Foundation 23-2653189 (2) GPCC Resources, Inc. 23-3097773 Part II 9 Ξ 2 ල € 3

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

Schedule R (Form 990) 2012

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23-3036397

Schedule R (Form 990) 2012 Part III

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

(k) Percentage ownership									ב	(i) Section 512(b)(13) controlled entity?	Yes No								Schedule R (Form 990) 2012
(j) General or managing partner?	Yes No								990, Pa	(h) Percentage Seconnership	۲								ile R (Forn
(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)									e as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part anizations treated as a corporation or trust during the tax year.)	Share of Percend-of-year assets own									Schedu
(h) Disproportonate allocatons?	Yes No								answere rear.)	_									
(g) Share of end-of- year assets									janization g the tax)	y Share trust) no									
Share of total Sha			 	-		· · · =			ete if the org r trust during	(e) Type of entity (C corp, S corp, or trust)									
									ist (Comple rporation o	(d) Direct controlling entity									
(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)									ion or Tru ed as a co	ncie Diri									
(d) Direct controlling entity	-		, ,			-			a Corporat	(c) Legal domicile (state or foreign country)			:						
(c) Legal domicile (state or foreign country)									Taxable as ated organiz	(b) Primary activity									
(b) Primary activity									Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization ansv IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)	organization									
(a) Name, address, and EIN of related organization		(1)	(2)	(3)	(4)	(5)	(9)	(2)	Part IV Identification of Re IV, line 34 because	(a) Name, address, and EIN of related organization		(1)	(2)	(6)	(4)	(5)	(9)	(i)	

Page 3

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thia Alliance for Capital and Technologies	Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35b, or 36)
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					(4)	-1
					(3)	.1
					(2)	I
					(1)	1
guiui Pa	thod of determini amount involved	Method of determining amount involved	volved	Transaction type (a-s)	Name of other organization	l
	Spio	thresh	ationships and transaction	including covered re	2 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 the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds the property of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds the property of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds the property of the above is "Yes," see the instructions for information on who must complete this line, including the above is "Yes," see the instructions for information on the above is "Yes," see the instruction of the above is "Yes," see the instruction of the above is "Yes," see the instruction of the above is "Yes," see the instruction of the above is "Yes," see the instruction of the above is "Yes," see the instruction of the above is "Yes," see the instruction of the above is "Yes," see the instruction of the above is "Yes," see the instruction of the above is "Yes," see the instruction of the above is "Yes," see the above is "Yes," see the above is "Yes," see the above is "Yes," see the above is "Yes," see the above is "Yes," see the above is "Yes," see the above is "Yes," see the above is "Yes," see the above is "Yes," see the above is "Yes," see the above is "Yes," see the above is "Yes," see the above is "Yes," see the above is "Yes," see the above is "Yes," see the above is "Yes," see the above is "Yes," see the above is "Yes," see the above is "Yes," see the above is "Yes," see the above is "Yes," see the above is "Yes," see the above is "Yes," see the above is "Yes," see the above is "Yes," see the above is "Yes," see the above is "Yes," see the above is "Yes," see the above is "Yes," see the above is "Yes," see the above is "Yes," see the above is "Yes," see	ı
×		13			s	ı
×	!	1+			r Other transfer of cash or property to related organization(s)	
×		19			q Reimbursement paid by related organization(s) for expenses.	
1	×	<u> </u>			p Reimbursement paid to related organization(s) for expenses	
$ \times $		19				
<	×	Ę Ę			m. Performance of services of membership of fundralship solicitations by related organization(s). p. Sharing of facilities, equipment, mailing lists, or other assets with related organization(s).	
×		₹,				
×		1			k Lease of facilities, equipment, or other assets from related organization(s)	
×		1			j Lease of facilities, equipment, or other assets to related organization(s)	
×		=			i Fulchase of assets from related organization(s) i Exchange of assets with related organization(s)	
×		19				
×		#			f Dividends from related organization(s)	
×		9			e Loans or loan guarantees by related organization(s)	
×		₽			d Loans or loan guarantees to or for related organization(s)	
×		10			c Gift, grant, or capital contribution from related organization(s)	
×		1b			b -Gift, grant, or capital contribution to related organization(s)	
×		1a		1	a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity	
	3		Parts II–IV?	l organizations listed ir	Note: Complete mile in any entity is listed in raits in, mily of this soliced is 1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II–IV?	
No	Yes				Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule	

23-3036397

Page 4

Unrelated Organizations Taxable as a Partnership (Complete of the organization answered "Yes" to Form 990, Part IV, line 37)

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

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(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile	(a) Predominant	Are	artners	Share of	(g) Share of	Disproportionate		E C	Genera		Percentage
		(state or foreign country)	income (related, unrelated, excluded from tax under section 512-514)	section 501(c)(3) organizations?	tion c)(3) ations?	total income	end-of-year assets		of Schedule K-1 (Form 1065)	box 20 lle K-1 065)	managing partner?		ownership
				Yes	S S			Yes	No		Yes	٩	
(1)													
(2)									_				
(3)													
(4)													
(5)													
(9)													
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(16)							i						
										Sched	ule R (F	orm 99	Schedule R (Form 990) 2012

Continuation Sheet for Form 990

Page 1 of

Name of the Organization

Employer identification number

Greater Philadelphia Alliance for Capital and Technologies

23-3036397

Part VII Section A	Continuation of Off Compensated Emp	icers, Directo	rs, 1	rus	ste	es,			nployees, and	Highest	
(A)	(B) Average			chec		that ap		(D) Reportable	(E) Reportable	(F) Estimated
		hours per week (list any hours for related organizations below dotted line)	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
(26) Dianne Strunk Vice President, Business D	Novelenment	40 00 0 00	I		x				444 575		45 445
(27)					Î		-		111,575	0	15,418
(28)											
(29)	<u> </u>										
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(44)											
(45)					_	ļ					
(46)							-	ļ			
		<u> </u>	<u> </u>	L.	L		1			L	li .

Form 8868

(Rev January 2013)

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

• If you a	are filing for an Automatic 3-Month Extension are filing for an Additional (Not Automatic) complete Part II unless you have already because the complete Part II unless you have already because the complete Part II unless	3-Month Ex	xtension, complete only Part II (on	= -	► X						
a corporat 8868 to re Return for instruction	c filing (e-file). You can electronically file Fortion required to file Form 990-T), or an addition quest an extension of time to file any of the formsfers Associated With Certain Personal s) For more details on the electronic filing of	onal (not au orms listed Benefit Co	tomatic) 3-month extension of time I in Part I or Part II with the exception intracts, which must be sent to the IR	You can electronically file of Form 8870, Informatio S in paper format (see	Form n						
Part I	Automatic 3-Month Extension of	Time. On	ly submit original (no copies nee	eded)							
A corporat Part I only	ion required to file Form 990-T and requesting	ig an auton	natic 6-month extension—check this	box and complete	▶ 🔲						
All other co	orporations (including 1120-C filers), partners	ships, REM	IICs, and trusts must use Form 7004	to request an extension o	f						
time to file	ıncome tax returns										
				identifying number, see i							
Type or	Name of exempt organization or other filer, se			Employer identification number	r (EIN) or						
print	Greater Philadelphia Alliance for Capital a			23-3036397							
File by the due date for	.										
filing your	ng your 200 South Bload Steet, North 600										
return See	return See City, town or post office, state, and ZIP code. For a foreign address, see instructions										
	Philadelphia			PA 19102-308							
Enter the F	Return code for the return that this application	ıs for (file	a separate application for each return	m)	01						
Application Return Application Return											
ls For											
Form 990	or Form 990-EZ	01	Form 990-T (corporation)		07						
Form 990-		02	Form 1041-A		08						
	0 (individual)	03	Form 4720		09						
	Form 990-PF 04 Form 5227 10										
Form 990-	-T (sec 401(a) or 408(a) trust)	05	Form 6069		11						
Form 990-	-T (trust other than above)	06	Form 8870		12						
Telepho If the or If this is for the who list with the I req until	e names and EINs of all members the extens quest an automatic 3-month (6 months for a c	four digit (If it is for p ion is for corporation exempt org	Group Exemption Number (GEN) part of the group, check this box required to file Form 990-T) extension ganization return for the organization	lf t ▶ an on of time	his is d attach a						
2 If the	e tax year entered in line 1 is for less than 12										
	Change in accounting period		magnitum								
	s application is for Form 990-BL, 990-PF, 990	D-T. 4720 (or 6069, enter the tentative tax less	anv							
	efundable credits. See instructions	- ,,		3a \$	0						
_	s application is for Form 990-PF, 990-T, 4720), or 6069.	enter any refundable credits and								
	nated tax payments made Include any pnor			3b \$	0						
	ince due. Subtract line 3b from line 3a Inclu			ising							
	PS (Electronic Federal Tax Payment System		•	3c \$	0						
	you are going to make an electronic fund withdra										
For Privacy	Act and Paperwork Reduction Act Notice, se	ee instructi	ons.	Form 8868	(Rev 1-2013)						