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Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter Social Security numbers on this form as it may be made public By law, the IRS generally cannot redact the information on the form

OMB No 1545-0047

Open to Public

A Fo	r the 2	2013 cale	Information about Form 990	01-01-2013 , 2013, and ending 12-3	•			
		pplicable	C Name of organization	01 01 2015 , 2015, and charing 12 5.	1 2015	D Emplo	yer iden	tification number
	ress ch		FUND FOR PHILADELPHIA			23-21	74863	.
┌ Nar	ne char	nge	Doing Business As THE MAYOR'S FUND FOR PHILA INC				, , , , , ,	
┌ Inıtı	al retur	m	Number and street (or P O box if ma	ııl ıs not delivered to street address) Room/sui	ıte	E Telepho	no numb	nor.
Г Теп	mınated	d	CITY HALL NO 708					
┌ Am	ended r	return	City or town, state or province, count	ry, and ZIP or foreign postal code		(215)	686-0	321
Г Арр	lication	n pending	PHILADELPHIA, PA 19107			G Gross re	eceipts \$	6,811,118
			F Name and address of princ	cipal officer	H(a) I	s this a group	return	for
			MAARI PORTER CITY HALL NO 708			subordinates?		┌ Yes 🗸 No
			PHILADELPHIA, PA 19107		H(b) /	Are all subordi	nates	┌ Yes ┌ No
					ı	ncluded?		
I Tax	k-exem	npt status	✓ 501(c)(3) 501(c)() ◀ (in	sert no) 4947(a)(1) or 527	I	f "No," attach	a list	(see instructions)
J W	ebsite	e:► WW	W MAYORSFUNDPHILA ORG		H(c)	Group exempt	ion nun	nber 🟲
K Forn	n of org	ganızatıon	Corporation Trust Association	Other 🕨	L Year	of formation 19	81 M	State of legal domicile PA
Pa	rt I	Sum	mary					
			scribe the organization's mission	n or most significant activities				
a	51	SEE SCF	EDULE O					
Governance	_							
Ĭ.	-					250/ 61		
) (0,7%	2 (Check th	is box 🔰 if the organization dis-	continued its operations or disposed o	r more tr	ian 25% of its	net as:	sets
	3 1	Number	of voting members of the governing	ng body (Part VI, line 1a)			з	g
Activities &	4 N	Number	of independent voting members of	f the governing body (Part VI, line 1b)			4	ğ
III.	5 1	Total nur	nber of individuals employed in c	alendar year 2013 (Part V, line 2a)			5	3
Act	6 T	Total nur	nber of volunteers (estimate if ne	cessary)			6	g
-				rt VIII, column (C), line 12			7a	C
	ЬΓ	Net unre	ated business taxable income fro	om Form 990-T, line 34	<u> </u>		7b	С
		_			-	Prior Year		Current Year
<u>a</u>	8			e 1 h)		2,910,7		2,952,505
Ĭ.	9	Progra	m service revenue (Part VIII, lin		3,270,2		3,808,584	
A.	10	Invact	montuncomo (Part VIII, column	(A) lines 2 4 and 7d)		1 () 6		· ·
Revenue	10 11			(A), lines 3, 4, and 7d)		10,6		50.029
Reve	11	Other	revenue (Part VIII, column (A), l	(A), lines 3, 4, and 7d) ines 5, 6d, 8c, 9c, 10c, and 11e) (must equal Part VIII, column (A), line		20,0		50,029
Reve	11 12	Other Total r 12) .	revenue (Part VIII, column (A), l evenue—add lines 8 through 11 (ines 5, 6d, 8c, 9c, 10c, and 11e) must equal Part VIII, column (A), line		20,0 6,211,6	544	6,811,118
Reve	11 12 13	Other Total r 12) . Grants	revenue (Part VIII, column (A), l evenue—add lines 8 through 11 (ines 5, 6d, 8c, 9c, 10c, and 11e) (must equal Part VIII, column (A), line		20,0	012 544 959	6,811,118 512,618
Reye	11 12 13 14	Other Total r 12) . Grants Benefit	revenue (Part VIII, column (A), levenue—add lines 8 through 11 (ines 5, 6d, 8c, 9c, 10c, and 11e) (must equal Part VIII, column (A), line		20,0 6,211,6	544	6,811,118 512,618
	11 12 13	Other Total r 12) . Grants Benefit	revenue (Part VIII, column (A), levenue—add lines 8 through 11 (ines 5, 6d, 8c, 9c, 10c, and 11e) (must equal Part VIII, column (A), line		20,0 6,211,6	012	6,811,118 512,618 0
	11 12 13 14	Other Total r 12) . Grants Benefit Salarie 5-10)	revenue (Part VIII, column (A), levenue—add lines 8 through 11 (ines 5, 6d, 8c, 9c, 10c, and 11e) (must equal Part VIII, column (A), line		20,0 6,211,6 623,9	012	6,811,118 512,618 0 191,354
	11 12 13 14 15	Other Total r 12) . Grants Benefit Salarie 5-10) Profes	revenue (Part VIII, column (A), levenue—add lines 8 through 11 (ines 5, 6d, 8c, 9c, 10c, and 11e) (must equal Part VIII, column (A), line X, column (A), lines 1-3) X, column (A), line 4) be benefits (Part IX, column (A), lines column (A), line 11e)		20,0 6,211,6 623,9	012	6,811,118 512,618 0 191,354
Expenses Rave	11 12 13 14 15	Other Total r 12) . Grants Benefit Salarie 5-10) Profes: Total fur	revenue (Part VIII, column (A), levenue—add lines 8 through 11 (ines 5, 6d, 8c, 9c, 10c, and 11e) (must equal Part VIII, column (A), line X, column (A), lines 1-3) X, column (A), line 4) be benefits (Part IX, column (A), lines column (A), line 11e)		20,0 6,211,6 623,9	012	6,811,118 512,618 0 191,354
	11 12 13 14 15 16a b 17 18	Other Total r 12) . Grants Benefit Salarie 5-10) Profes: Total fut Other	revenue (Part VIII, column (A), levenue—add lines 8 through 11 (Innes 5, 6d, 8c, 9c, 10c, and 11e) (must equal Part VIII, column (A), lines X, column (A), lines 1-3) (c, column (A), line 4) be benefits (Part IX, column (A), lines column (A), line 11e) line 25) nes 11a-11d, 11f-24e) t equal Part IX, column (A), line 25)		20,0 6,211,6 623,9 211,0 4,661,3 5,496,3	012 544 959 0 0 025 0	6,811,118 512,618 0 191,354 0 5,307,156 6,011,128
Expenses	11 12 13 14 15 16a b	Other Total r 12) . Grants Benefit Salarie 5-10) Profes: Total fut Other	revenue (Part VIII, column (A), levenue—add lines 8 through 11 (Ines 5, 6d, 8c, 9c, 10c, and 11e) (must equal Part VIII, column (A), line (X, column (A), lines 1-3) (x, column (A), line 4) (be benefits (Part IX, column (A), lines (column (A), line 11e) (line 25) (must equal Part IX, column (A), lines (column (A), line 11e)		20,0 6,211,6 623,9 211,0 4,661,3 5,496,3 715,2	012 544 959 0 0 025 0 372 356	6,811,118 512,618 0 191,354 0 5,307,156 6,011,128
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Expenses	11 12 13 14 15 16a b 17 18	Other Total r 12) . Grants Benefit Salarie 5-10) Profes: Total fut Other Total e	revenue (Part VIII, column (A), levenue—add lines 8 through 11 (Ines 5, 6d, 8c, 9c, 10c, and 11e) (must equal Part VIII, column (A), lines X, column (A), lines 1-3) (c, column (A), line 4) e benefits (Part IX, column (A), lines column (A), line 11e) line 25) ▶0 nes 11a-11d, 11f-24e) t equal Part IX, column (A), line 25) 8 from line 12		20,0 6,211,6 623,9 211,0 4,661,3 5,496,3 715,2 nning of Currel	012 544 959 0 0 025 0 372 856 288	6,811,118 512,618 0 191,354 0 5,307,156 6,011,128 799,990 End of Year
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Expenses	11 12 13 14 15 16a b 17 18 19	Other Total r 12) . Grants Benefit Salarie 5-10) Profes: Total fur Other Total e Revenu	revenue (Part VIII, column (A), levenue—add lines 8 through 11 (Ines 5, 6d, 8c, 9c, 10c, and 11e) (must equal Part VIII, column (A), lines X, column (A), lines 1-3) (c, column (A), line 4) (e benefits (Part IX, column (A), lines column (A), line 11e) line 25) ▶0 nes 11a-11d, 11f-24e) t equal Part IX, column (A), line 25) 8 from line 12		20,0 6,211,6 623,5 211,0 4,661,3 5,496,3 715,2 nning of Curren Year 8,453,5	012 544 959 0 0 025 0 372 356 288 nt	6,811,118 512,618 0 191,354 0 5,307,156 6,011,128 799,990 End of Year 9,904,801 4,398,081
Net Assets or Expenses Expenses	11 12 13 14 15 16a b 17 18 19	Other Total r 12) . Grants Benefit Salarie 5-10) Profes: Total fut Other Total e Revent Total a Total I Net as	revenue (Part VIII, column (A), levenue—add lines 8 through 11 (Ines 5, 6d, 8c, 9c, 10c, and 11e) (must equal Part VIII, column (A), lines X, column (A), lines 1-3) (c, column (A), line 4) (e benefits (Part IX, column (A), lines column (A), line 11e) line 25) ▶0 nes 11a-11d, 11f-24e) t equal Part IX, column (A), line 25) 8 from line 12		20,0 6,211,6 623,5 211,0 4,661,3 5,496,3 715,2 nning of Currer Year 8,453,5 3,746,7	012 544 959 0 0 025 0 372 356 288 nt	6,811,118 512,618 0 191,354 0 5,307,156 6,011,128 799,990 End of Year 9,904,801 4,398,081
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Firm's name FMCGLADREY LLP

Firm's address ► 751 ARBOR WAY SUITE 200

May the IRS discuss this return with the preparer shown above? (see instructions)

Preparer

Use Only

Firm's EIN 🕨 42-0714325

Phone no (215) 641-8600

✓ Yes ☐ No

Form	990 (2013)						Page 2
Par	Statement of Pro						
_	Check if Schedule O	•	nse or note to a	any line in this P	art III		
1	Briefly describe the organiz	ation's mission					
SEE	SCHEDULE O						
2	Did the organization underta the prior Form 990 or 990-E					ed on	✓ Yes ☐ No
	If "Yes," describe these new	services on Sch	nedule O				
3	Did the organization cease of services?				t conducts, any program		┌ Yes ┌ No
	If "Yes," describe these cha	nges on Schedul	e O				
4	Describe the organization's expenses Section 501(c)(3 the total expenses, and reve) and 501(c)(4)	organizations a	ire required to re			
 4a	(Code) (Expenses \$	2.848.793	including grants of \$	424,950) (Re	venue \$	3,731,220)
	THE PHILADELPHIA MARATHON IS WEEKEND OF EVENTS TO CELEBER RUNNERS WHO REGISTERED FOI PARTICIPANTS REPRESENTED 43 LEADERS IN SUSTAINABILITY, WI	THE LAST MARATHORATE THE RUNNERS R THESE THREE RAC COUNTRIES AND EV	ON IN THE UNITED IN THE 8K, 12 1 A ES THE MAJORITY PERY CONTINENT I	STATES THAT IS WIND 26 2 MILE RACE Y OF THE RUNNERS EXCEPT ANTARCTIC	HOLLY RUN AND OWNED BY A S DURING THE 2013 RACE, WERE FROM THE UNITED ST A IN ADDITION THE PHILADE	A CITY EVERY YEAR THE MARATHON HO ATES AND MORE TH	THE CITY PRODUCES A STED OVER 30,000 HAN 1,000 OF THE
4b	(Code) (Expenses \$	261,752	ncluding grants of \$) (Rev	renue \$)
	"ALL PHILADELPHIA CHILDREN AN THAT PROMOTE THEIR EDUCATION NEIGHBORHOODS AND COMMUN. HAS BEEN LINKED TO SIGNIFICAL STANDARDIZED MATH TEST SCOLOWALLACE FOUNDATION'S NEXT GOESEY THE CITY OF PHILADELPH TO CONTINUOUSLY ENHANCE PROUT-OF-SCHOOL TIME PROGRAM THERE ARE MANY OTHER PROGROF-SCHOOL TIME ACTIVITIES AN	ON, SAFETY, DEVELO ITIES" PHILADELPHIA NTLY BETTER OUTCO RES, AND REDUCTIO ENERATION OST INI HIA BEGAN A THREE OGRAM QUALITY ANI IS MANAGED BY THE LAMS AND OPPORTUI	PMENT AND SUCC A OST VISION STAT MES IN ACADEMIC INS IN USE OF DRI TIATIVE, THE WILL YEAR PROJECT TO D YOUTH PARTICII DEPARTMENTS OI NITIES MANAGED E	ESSFUL TRANSITION EMENT 2009INDEEL CS AND SOCIAL SKIL JGS AND ALCOHOL IAM PENN FOUNDAT DBUILD A COORDIN PATION EVERY YEAR HUMAN SERVICES BY COMMUNITY BAS	I INTO ADULTHOOD, AND AS DO REGULAR ATTENDANCE IN L DEVELOPMENT AS IT RELAT AND TEACHER-REPORTED MISSION, AND THE UNITED WAY CONTROLOW OF OST PROGRAMS, ALL YEAR, 350 PROGRAMS RECREATION AND THE FREED ORGANIZATIONS LARGE AT	A RESULT, ENRICH HIGH-QUALITY AFTI ED TO THEIR PEERS CONDUCT WITH TOF GREATER PHILATES SERVE OVER 13,00 ELIBRARY OF PHILAND SMALL, WHICH FOR THE PERSON ELIBRARY OF PHILAND SMALL, WHICH FOR THE PARTY OF	FAMILIES, ERSCHOOL PROGRAMS S, GAINS IN THE SUPPORT OF THE DELPHIA & SOUTH NEW S RELIABLE INFORMATION O ON ANY GIVEN DAY IN DELPHIA IN ADDITION, PROVIDE OTHER OUT-
	/O. I.	Expenses \$	236,013	ncluding grants of \$) (D	renue \$,
4 c	(Code) (PHILADELPHIA PARKS & RECREA' ACTION PLAN, HAVE IDENTIFIED BARTRAM'S GARDEN THESE PAR KEY GREENING RECOMMENDATI EXTENDED FROM BARTRAM'S GA COAST GREENWAY (ECG) PPR IS PROVIDES ACCESS TO COBBS CR DESTINATION WITH MULTIPLE UN RIVER GOALS INCLUDE PHASE 1 VISIBILITY AS A SAFE AND UNIQU COORDINATED EVENT CALENDAR CORPORATION FINAL DESIGN LE AVENUE SITE VISITATION TO BAR GARDEN INCREASED BY 30%	TION (PPR) ALONG V PARCELS OF LAND A CELS WILL PROVIDE ONS MADE IN THE GI RDEN ALONG THE RI S COMMITTED TO MA LEEK RECREATION TO NIQUE PUBLIC SPACE OF BARTRAM'S MILL IE DESTINATION FOR ESTABLISHED BETW EVERAGED FOR LARG	VITH THE PHILADE LONG THE WESTEI OVER A MILE AND REEN2015 ACTION WERFRONT AND A AKING CONNECTIC RAIL AND THE ECC ES, WONDERFUL V. E TRAIL AND PARK R LOCAL AND CITY VEEN PHILADELPHI ER FUNDS TO RE-	LPHIA INDUSTRIAL RN BANK OF THE SC A HALF OF PUBLICA PLAN IN ADDITION CONNECTION WILL DIS FROM THIS SITI G IN ADDITION, THE IEWS/HORTICULTUF OPENED BY 12/31/ WIDE RESIDENTS, A A PARKS AND RECR DESIGN BARTRAM'S	DEVELOPMENT CORPORATION CHUYLKILL RIVER, IMMEDIATE LLY ACCESSIBLE RIVERFRON CONTROL OF THE SCH CONTROL	(PIDC), AS PART (LY ADJACENT TO PI I ACCESS THIS WO UYLKILL RIVER TRA ET GREENWAY POR Y VIA 58TH STREET CE BARTRAM'S MILE ECREATIONAL OPPO PENING, BARTRAM'S UNTS AND INTERCE , AND SCHUYLKILL ITENTIAL REHABILIT	PR'S HISTORIC DULD HELP TO ADVANCE ALL (SRT) WILL BE TION OF THE EAST GREENWAY, WHICH E AS A PREMIER RITUNITIES AND THE S MILE ACHIEVES EPT SURVEYS RIVER DEVELOPMENT FATION OF BOTANIC
	See Additional Data Table						
4d	Other program services (D	escribe in Sched	ule O)				
_	(Expenses \$ 2,	424,955 inclu	ding grants of	\$	87,668) (Revenue \$	77	',364)
4e	Total program service expe	enses 🕨	5,771,513				
	_						

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)? <i>If "Yes," complete Schedule A</i>	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
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		No
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		No
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		No
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? <i>If "Yes," complete Schedule D, Part I</i>	6		No
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 2	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV^{\square}	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		No
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		No
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
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	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	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 foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If</i> "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		No
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		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

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Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or 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	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
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		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		No
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? <i>If "Yes," complete Schedule L, Part III </i>	27		No
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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		1	
		28a		No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
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? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than $$25,000$ in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
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		No
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	Yes	

Par				_
	Check if Schedule O contains a response or note to any line in this Part V	•	Yes	.l No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 248			110
	Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1 c	Yes	
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			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		Νo
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
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		No
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		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			No
		5b		
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		No
	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		Νo
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	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		
	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		
Ь	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
Ь	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14h		

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

36	scholl 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			
		1		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any	1		
	other officer, director, trustee, or key employee?	2		No
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		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No.
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		No
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		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
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	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal F	eveni	ie Cod	e.)
				
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a	Yes	No No
10a	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	
10a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	10b	Yes	
10a b 11a	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing	10b		
10a b 11a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b		
10a b 11a b 12a	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a 12a	Yes	
10a b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b	Yes	
10a b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	10b 11a 12a	Yes Yes Yes	
10a b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a 12a 12b	Yes Yes Yes	
10a b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	10b 11a 12a 12b	Yes Yes Yes	
10a b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy?	10b 11a 12a 12b 12c 13	Yes Yes Yes Yes	
10a b 11a b 12a b c	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by	10b 11a 12a 12b 12c 13	Yes Yes Yes Yes	
10a b 11a b 12a b c	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 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?	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	
10a b 11a b 12a b c	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 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? The organization's CEO, Executive Director, or top management official	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 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? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 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? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 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? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 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? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 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? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	No

18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply

- 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►MAARI PORTER CITY HALL ROOM 708
 PHILADELPHIA,PA 19107 (215)686-0321

Part VIII 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

- 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, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

(A) Name and Title	(B) A verage hours per week (list any hours for related	more pers and	than on is	one bot rect	not box h ar or/tr	chec (, unle n offic	ess er	(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Ke) employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
(1) DESIREE PETERKIN-BELL	1 00	х		Х				0	0	0
CHAIR OF BOARD				Ĺ				, and the second		
(2) RICH NEGRIN TREASURER OF BOARD	1 00	x		х				0	0	0
(3) MAARI PORTER	8 00	Ţ		х				0	0	0
EXECUTIVE DIRECTOR/SECRETARY		Х						0	0	0
(4) ANNA WALLACE ADAMS	1 00	×						0	0	0
BOARD MEMBER								· ·		
(5) COUNCILMAN BOBBY HENON	1 00	x						0	0	0
BOARD MEMBER										
(6) TUMAR ALEXANDER	1 00	х						0	0	0
BOARD MEMBER (7) JAMIRA BURLEY	1 00	-								
BOARD MEMBER		Х						0	0	0
(8) MAMI HARA	1 00	<u> </u>								
BOARD MEMBER		X						0	0	0
(9) ANDREW FRISHKOFF	1 00	х						0	0	0
BOARD MEMBER										
					_					

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

(A) Name and Title		(B) A verage hours per week (list any hours	more t perso	person is both an officer and a director/trustee) o						table isation the tion (W-	(E) Reportable compensation from related organizations (W	/-	(F) Estima imount of compens from t	other ation he
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	2//1099999999999999999999999999999999999			rganizati relate organiza	:d				
1b	Sub-Total				<u> </u>	<u> </u>		 						
c	Total from continuation sheet	s to Part VII, S	ection A	٠.				Þ						
d	Total (add lines 1b and 1c) .							►		0		0		0
2	Total number of individuals (in \$100,000 of reportable compe	_					d abov	e) w	ho receive	d more th	an	•		
													Yes	No
3	Did the organization list any fo	•				key	emplo	yee,	or highes	t compen	sated employee			
	on line 1a? If "Yes," complete S					•		•				3		No
4	For any individual listed on line organization and related organ individual											4		No
5	Did any person listed on line 1	a receive or acc	rue cor	npen	satı	on fr	om an	y unr	elated org	anızatıon	or individual for	-		
	services rendered to the organ	iization? <i>If "Yes,</i>	." compl	ete So	chea	lule J	for su	ch pe	erson .			5		No
Se	ction B. Independent Co	ntractors												
1	Complete this table for your five compensation from the organization												tay vear	
		(A)		4011	101	cire C	arende	ai y C	ar enamy		(B)	10113	(C)	
ENDU	N RAFIT LLC 3706 CRONDALL LANE SUITI	ame and business and business and business and business and business are also and business and business are and business and business are also also also also also also also also		.17							Cription of Services MERCHANDISE	+	Compen	sation 206,583
	CO DATA SYSTEMS 17639 GEORGE WA				4807	5				RUNNER TE				122,726

2 Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 of compensation from the organization -2

			ıle O contaıns a respoi		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
र इ	1a	Federated camp	paigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership du	es 1b					
ا ۾ . اڳار	С	Fundraising eve	ents 1c					
ifts ar /	d	Related organiz	ations 1d					
°, 6 m∷	е	Government grants	(contributions) 1e					
Contributions, Giffs, Grants and Other Similar Amounts	f	All other contributio	ons, gifts, grants, and 1f	2,952,505	ł			
outi hei	_	sımılar amounts no	t ıncluded above		ļ			
ᅙᄅ	g	Noncash contribution 1a-1f \$	ons included in lines					
Cor	h	Total. Add lines	31a-1f	<u>.</u>	2,952,505			
				Business Code				
enu	2a	PHILADELPHIA MAR	ATHON	900099	3,731,220	3,731,220		
₽e∢	b	OTHER		900099	77,364	77,364		
93	С							
žer v	d							
in (е		_					
Program Service Revenue	f	All other progra	m service revenue					
Ğ	g	Total. Add lines	2a-2f		3,808,584			
	3		ome (ıncludıng dıvıden					
	4		ar amounts) tment of tax-exempt bond					
	5			` <u> </u>				
			(ı) Real	(II) Personal				
	6a	Gross rents						
	b	Less rental expenses						
	С	Rental income or (loss)						
	d		me or (loss)					
			(ı) Securities	(II) Other				
	7a	Gross amount from sales of						
		assets other than inventory						
	b	Less cost or other basis and						
	С	sales expenses Gain or (loss)						
	d		s)					
<u>e</u>	8a	Gross income fr	rom fundraising					
Other Revenue		\$of contributions See Part IV, lin	reported on line 1c)					
			а					
ŧ			penses b	L				
_	c 9a		loss) from fundraising rom gaming activities	events 🛌				
	Ja	See Part IV, lin						
			penses b					
		Net income or (Gross sales of i returns and allo		vities 				
	ь	Less cost of go	a					
		=	loss) from sales of inv	entory 🛌				
		Miscellaneous	Revenue	Business Code				
	11a	ADMINISTRAT	IVE FEES	900099	43,532	43,532		
	b	DIRECT FEE IN	NCOME	900099	6,497	6,497		
	c							
	d	All other revenu						
	e		:11a-11d	· · · •	50,029			
	12	Total revenue.	See Instructions .	🖊	6,811,118	3,858,613		0

	Statement of Functional Expenses				
Section	on 501(c)(3) and 501(c)(4) organizations must complete all columns All				
	Check if Schedule O contains a response or note to any line in this	Part IX			<u></u>
	ot include amounts reported on lines 6b, o, 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	453,298	453,298		
2	Grants and other assistance to individuals in the United States See Part IV, line 22	59,320	59,320		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	33,320	33,320		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	155,001	51,597	103,404	_
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	19,171	3,218	15,953	
10	Payroll taxes	17,182	4,915	12,267	
11	Fees for services (non-employees)				
а	Management				
b	Legal	107,519	104,418	3,101	
c	Accounting	40,447	75	40,372	
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	2,876,491	2,875,010	1,481	
12	Advertising and promotion	392,819	392,819	1,101	
13	Office expenses	163,213	134,136	29,077	
14	Information technology	133,233	10.,100		
15	Royalties				
16	Occupancy	46,857	46,857		
17	Travel	111,681	111,681		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	111,001	111,001		
19	Conferences, conventions, and meetings	19,788	19,488	300	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	24,755	16,538	8,217	
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	EQUIPMENT AND SUPPLIES	918,101	918,101		
b	CITY SERVICES	451,142	451,142		
c	DUES, MEMBERSHIPS, SUBS	95,658	94,393	1,265	0
d	TRAINING AND PROFESSION	58,685	54,507	4,178	0
e	All other expenses		-20,000	20,000	
25	Total functional expenses. Add lines 1 through 24e	6,011,128	5,771,513	239,615	0
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Par	't X	Balance Sheet Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing		1	
	2	Savings and temporary cash investments	7,826,383	2	9,199,038
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	331,985	4	165,184
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
ø.	6	Loans and other receivables from other disqualified persons (as defined under section $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and contributing employers and sponsoring organizations of section $501(c)(9)$ voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L			
Assets				6	
	7	Notes and loans receivable, net	237,000	7	177,000
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a			
	Ь	Less accumulated depreciation 10b		10c	
	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	58,155	15	363,579
	16	Total assets. Add lines 1 through 15 (must equal line 34)	8,453,523	16	9,904,801
	17	Accounts payable and accrued expenses	796,502	17	1,231,340
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
ø.	21	Escrow or custodial account liability $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$		21	
Liabilitie	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
æ		persons Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule			
	l	D	2,950,291	25	3,166,741
	26	Total liabilities. Add lines 17 through 25	3,746,793	26	4,398,081
S)		Organizations that follow SFAS 117 (ASC 958), check here ▶ 🔽 and complete lines 27 through 29, and lines 33 and 34.			
ĕ	27	Unrestricted net assets	1,768,223	27	2,839,818
<u>ର</u>	28	Temporarily restricted net assets	2,938,507	28	2,666,902
<u> </u>	29	Permanently restricted net assets	2,000,001	29	2,000,002
Ĭ	25	Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and		23	
or Fund Balance		complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
ě	31	Paid-in or capital surplus, or land, building or equipment fund		31	
Assets	32	Retained earnings, endowment, accumulated income, or other funds		32	
Net	33	Total net assets or fund balances	4,706,730	33	5,506,720
Z	34	Total liabilities and net assets/fund balances	8,453,523	34	9,904,801
		·	1		

Par	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				୮
1	Total revenue (must equal Part VIII, column (A), line 12)	1		6,8	311,118
2	Total expenses (must equal Part IX, column (A), line 25)	2		6,0	011,128
3	Revenue less expenses Subtract line 2 from line 1	3			
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			
5	Net unrealized gains (losses) on investments	5		4,,	706,730
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		5,5	506,720
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. Г
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	wed o	n		
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	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	arate			
	▼ Separate basis				
С	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversig audit, review, or compilation of its financial statements and selection of an independent accountant?	ht of th	1e 2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain is Schedule O	n		_	
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	е	3a		No
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		3b		

Additional Data

Software ID: Software Version:

EIN: 23-2174863

Name: FUND FOR PHILADELPHIA

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

Section 501(c)(3) a		7(a)(1) trusts		ram services by expenses. ount of grants and allocations to	
(Code) (Expenses \$	99,951	ıncludıng grants of \$) (Revenue \$)
2035 IMPLEMENT	ATION / PERFORMANCE MEA	ASURE			
(Code 5TH DISTRICT EV) (Expenses \$ ENTS	9,000	including grants of \$) (Revenue \$)

Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.
Section $501(c)(3)$ and (4) organizations and $4947(a)(1)$ 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.

(Code AMERICAN STREET E) (Expenses \$ EMPOWERMENT ZONE	229,513	including grants of \$) (Revenue \$)
(Code) (Expenses \$	3,151	including grants of \$	2,425) (Revenue \$)

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions) Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and (4) organizations and 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. (Code) (Expenses \$ 20,266 including grants of \$) (Revenue \$ BADGES OF HONOR) (Expenses \$) (Revenue \$ (Code 71,532 including grants of \$)

BROAD ST MINISTRIES

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions) Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and (4) organizations and 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. (Code) (Expenses \$ including grants of \$) (Revenue \$ 913 CEO - FORMERLY MOCS) (Expenses \$) (Revenue \$ (Code 3,583 including grants of \$)

CITIES UNITED

(Code CITY PLANNING) (Expenses \$	223,376	including grants of \$	25,957) (Revenue \$)
(Code CITYWIDE CLEAN UP) (Expenses \$	73,938	ıncludıng grants of \$) (Revenue \$)

DILWORTH AWARDS

Section 501(c)(3)	npt purpose achievements for e and (4) organizations and 494 expenses, and revenue, if any, f	7(a)(1) trusts	are required to report the a	ogram services by expenses. mount of grants and allocations to	
(Code CIVIC ENGAGEM) (Expenses \$ ENT VOLUNTEERS	42,787	ıncludıng grants of \$) (Revenue \$)
(Code) (Expenses \$	22,692	ıncludıng grants of \$	6,945) (Revenue \$)

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions) Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and (4) organizations and 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. (Code) (Expenses \$ 6,358 including grants of \$) (Revenue \$ DOLLARWISE INNOVATION) (Expenses \$) (Revenue \$ (Code 97,094 including grants of \$)

FOREST MANAGEMENT PLAN

(Code GRAD COACHES) (Expenses \$	26,673	ıncludıng grants of \$) (Revenue \$)
(Code) (Expenses \$	18,697	ıncludıng grants of \$) (Revenue \$)

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions) Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and (4) organizations and 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. (Code) (Expenses \$ 4,686 including grants of \$) (Revenue \$ JOE FRAZIER STATUE) (Revenue \$ (Code) (Expenses \$ 15,416 including grants of \$)

LEAD - CONFERENCE & TRAVEL

Section 501(c)(3)		7(a)(1) trusts		am services by expenses. ount of grants and allocations to	
(Code MANUFACTURING) (Expenses \$	25,000	ıncludıng grants of \$) (Revenue \$)
(Code MAYOR STREET'S) (Expenses \$	22,733	including grants of \$) (Revenue \$)

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions) Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and (4) organizations and 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. (Code) (Expenses \$ 6,379 including grants of \$) (Revenue \$ MAYOR'S COMMISSION ON ASIAN AFFAIRS) (Revenue \$) (Expenses \$ 33,898 including grants of \$) (Code

MAYOR'S COMMISSION ON LITERACY

Form 990, Part	III - 4 Program Service	Accompli	shments (See the Instru	ictions)	
Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and (4) organizations and 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.					
(Code) (Expenses \$	10,500	ıncludıng grants of \$) (Revenue \$)
MAYOR'S COMMIS	SSION ON PEOPLE WITH DIS	ABILITIES			
(Code) (Expenses \$	1,785	including grants of \$) (Revenue \$)
MAYOR'S OFFICE	ONAGING				

(Code) (Expenses \$	25,891	ıncludıng grants of \$) (Revenue \$	16,371)
MAYOR'S RECEPT	ION ROOM				
(Code) (Expenses \$	27,000	ıncludıng grants of \$) (Revenue \$)
METROPOLITAN	CAUCUS				

(Code MOBILE APP) (Expenses \$	13,438	including grants of \$) (Revenue \$)
(Code MORTGAGE CRISIS) (Expenses \$	102,230	including grants of \$) (Revenue \$)

(Code NEIGHBORHOOD) (Expenses \$	195,415	including grants of \$) (Revenue \$)
(Code) (Expenses \$	14,845	including grants of \$	14,000) (Revenue \$)
NEW URBAN MECH	HANICS				

Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and (4) organizations and 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. (Code) (Expenses \$ 6,505 including grants of \$) (Revenue \$) NEW WORLD TUTOR TRAINING

668

including grants of \$

) (Revenue \$

)

) (Expenses \$

NORTH CENTRAL EMPOWERMENT ZONE

(Code

Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.
Section 501(c)(3) and (4) organizations and 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.

(Code OACCE CITY HAL) (Expenses \$ L PRESENTS	59,205	including grants of \$) (Revenue \$)
(Code) (Expenses \$	24,275	including grants of \$) (Revenue \$)
OFFICE OF SUSTA	INABILITY				

Form 990, Part	111 - 4 Program Service	Accompil	snments (See the Instru	ictions)				
Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section $501(c)(3)$ and (4) organizations and $4947(a)(1)$ 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.								
(Code OPERATION BROT) (Expenses \$ THERLY LOVE CARNIVAL	80,077	including grants of \$) (Revenue \$)			
(Code OPERATION CEAS) (Expenses \$ SE FIRE	20,000	including grants of \$) (Revenue \$)			

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions) Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and (4) organizations and 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. (Code) (Expenses \$ 64,578 including grants of \$) (Revenue \$ PARKING WARS) (Expenses \$ 6,341) (Revenue \$

43,111 including grants of \$

(Code

PARKS AND RECREATION - GREENWORKS AND YOUTH DEVELOPMENT

(Code PARKWAY CIVIC) (Expenses \$ VISION	7,272	including grants of \$) (Revenue \$)
(Code) (Expenses \$	42,328	including grants of \$) (Revenue \$	45,350)
PHASION PHEST					

Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and (4) organizations and 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.							
PHILADELPHIA F	IRE DEPARTMENT - SMOKE D	ETECTORS					
(Code) (Expenses \$	7,719	including grants of \$) (Revenue \$)		
DHTI ADELDHTA TI	NVESTOR CONFERENCE						

FORM 990, Part	111 - 4 Program Service	Accompile	iplishments (See the Instructions)				
Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and (4) organizations and 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.							
(Code PHILADELPHIA RI) (Expenses \$ EADS	4,384	including grants of \$) (Revenue \$)		
(Code PHILLY CHAMPIO) (Expenses \$ NS FUND		including grants of \$) (Revenue \$	14,049)		

(Code) (Expenses \$	183,576	ıncludıng grants of \$	30,500) (Revenue \$)
PHILLY GOES TO	COLLEGE				
(Code) (Expenses \$	4,300	including grants of \$	1,500) (Revenue \$)
POETRY					

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and (4) organizations and 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.

(Code PRINCE MUSIC THEA) (Expenses \$ ATRE	9,953	including grants of \$) (Revenue \$)
(Code) (Expenses \$	230,594	including grants of \$) (Revenue \$)

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions) Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and (4) organizations and 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. (Code) (Expenses \$ including grants of \$) (Revenue \$ 848) RECORDS DEPARTMENT) (Expenses \$) (Revenue \$ (Code 69,264 including grants of \$)

SMALL BUSINESSES - GOLDMAN SACHS

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and (4) organizations and 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.

(Code) (Expenses \$	1,372	ıncludıng grants of \$) (Revenue \$	746)
STD TRAINING					
(Code) (Expenses \$	327	ıncludıng grants of \$) (Revenue \$)
STOREFRONT CHALL	LENGE				

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions) Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and (4) organizations and 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. (Code) (Expenses \$ 75,000 including grants of \$) (Revenue \$ URBAN WATERS INSTITUTE) (Expenses \$) (Revenue \$ (Code 10,000 including grants of \$)

WEST PHILADELPHIA EMPOWERMENT ZONE

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493230001324

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2013

Open to Public Inspection

Name of the organization FUND FOR PHILADELPHIA

Employer identification number

23-2174863

Pai	rt I	Reas	on for Pu	blic Charity Sta	tus (All ord	anızatıons	must com	olete this p	art.) See ir	structions.	
				e foundation becaus							
1	Г	A chur	ch, conventi	on of churches, or as	ssociation of	churches de	escribed in s e	ection 170(L	o)(1)(A)(i).		
2	Г		•	in section 170(b)(1				·			
3				perative hospital se			· ·	n 170(b)(1)	(A)(iii).		
4	Ė			n organization operat	_					1)(A)(iii). E	nter the
	•			ty, and state							
5	Γ	Anorga	anızatıon op	erated for the benefi	t of a college	or universit	ty owned or o	perated by a	a government	al unit desc	ribed in
		sect ion	170(b)(1)(A)(iv). (Complete P	art II)						
6	Γ	A feder	al, state, or	local government or	government	al unit desc	rıbed ın secti	on 170(b)(1	L)(A)(v).		
7	\sqcap	An organization that normally receives a substantial part of its support from a governmental unit or from the general public									
_	_	described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II)									
8	_		•				•	•			
9	<u>~</u>	An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of									
					•	-			` '		
				oss investment inco						tax) from bu	sinesses
	_	•	-	janization after June	•			•	•		
10	<u> </u>	An organization organized and operated exclusively to test for public safety See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of									
11	ı	one or the box	more publici that descri	ganized and operated ly supported organiz bes the type of supp b Type II c	ations descr orting organ	ibed in secti ization and c	on 509(a)(1) complete line) or section s 11e throu	509(a)(2) So gh 11h	ee section 5	09(a)(3). Check
e	Γ	other tl	nan foundatı	ox, I certify that the on managers and otl	-		•			•	•
f		If the o	1509(a)(2) rganization this box	received a written de	etermination	from the IRS	S that it is a ⁻	Туре І, Тур	e II, or Type	III supportı	ng organization,
g		Since A	ugust 17, 2	2006, has the organi	zation accep	ted any gift	or contribution	on from any	of the		,
			ig persons?								
		. , .		rectly or indirectly o	•		-	persons des	scribed in (ii)		Yes No
		•		governing body of th		_	17			11g	
		` '	•	er of a person descri	` ,					11g(
_				lled entity of a perso		., .,				11g(iii)
h		Provide	the following	ng information about	the supporte	ed organizati					
(i) Name of supported organization		rted	ted organization organization in		on in ted in rning	(v) Did you notify the organization organization in col (i) of your support? (vi) Is col (i) org		on in anized	(vii) A mount of monetary support		
				instructions))	Yes	No	Yes	No	Yes	No	1
Tata						1					

Sch	edule A (Form 990 or 990-EZ) 2013							Page 2
Pa	rt II Support Schedule for (Complete only if you c Part III. If the organiza	hecked the bo	x on line 5, 7,	or 8 of Part I oi	r if the organiza	ition fail	led to q	
S	ection A. Public Support	tion range to qu	amy ander the	tests listed bei	orry predoc com	piete i t		
	endar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2	2013	(f) Total
1	Gifts, grants, contributions, and							
	membership fees received (Do not							
	include any "unusual grants ")							
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
3	The value of services or facilities furnished by a governmental unit to the organization without charge							
4	Total. Add lines 1 through 3							
5	The portion of total contributions by each person (other than a governmental unit or publicly							
	supported organization) included on							
	line 1 that exceeds 2% of the							
	amount shown on line 11, column (f)							
6	Public support. Subtract line 5 from line 4							
S	ection B. Total Support	•	•	•	•	•		•
Cal	endar year (or fiscal year beginning in) 🟲	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2	013	(f) Total
7	A mounts from line 4							
8	Gross income from interest, dividends, payments received on							
	securities loans, rents, royalties and income from similar							
9	sources Net income from unrelated							
,	business activities, whether or not the business is regularly carried							
4.0	on							
10	Other income Do not include gain or loss from the sale of capital							
	assets (Explain in Part IV)							
11	Total support (Add lines 7 through 10)							
12	Gross receipts from related activities	es, etc (see inst	ructions)			12		
13	First five years. If the Form 990 is fithis box and stop here	_	•	•	· ·			· —
S	ection C. Computation of Pub						<u></u>	
14	Public support percentage for 2013			11, column (f))		14		
15	Public support percentage for 2012	Schedule A, Pai	t II, line 14			15		
16a	33 1/3% support test—2013. If the o	rganızatıon dıd ı	not check the box	on line 13, and l	ine 14 is 33 1/3%	or more,	check t	
b	and stop here. The organization qua 33 1/3% support test—2012. If the organization describes the state of the state	organization did	not check a box o	on line 13 or 16a,	and line 15 is 33	1/3% or	more, ch	
17a	box and stop here. The organization 10%-facts-and-circumstances test-				ne 13, 16a, or 16	b, and lin	e 14	▶
	ıs 10% or more, and ıf the organizat	ion meets the "f	acts-and-circum	stances" test, ch	eck this box and s	top here	. Explair	
	in Part IV how the organization mee	ts the "facts-and	d-cırcumstances	" test The organı	zatıon qualıfıes as	a public	ly suppo	
b	organization 10%-facts-and-circumstances test-	-2012. If the ora	anization did not	check a box on lir	ne 13, 16a, 16b, d	or 17a. a	nd line	▶ □
_	15 is 10% or more, and if the organ	ızatıon meets th	e "facts-and-cırc	umstances" test,	check this box ai	nd stop l	iere.	
	Explain in Part IV how the organizat supported organization	ion meets the "f	acts-and-circum	stances" test Th	e organization qua	alıfıes as	a public	:ly ▶厂
18	Private foundation. If the organization	on did not check	c a box on line 13	, 16a, 16b, 17a,	or 17b, check this	s box and	see	F1
	instructions				•			▶ □

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	1,189,374	2,682,824	1,460,192	2,910,730	2,952,505	11,195,625
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	2,362,126	2,741,813	3,253,437	3,774,747	3,808,584	15,940,707
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without	5,113	5,113	15,556	15,556	109,212	150,550
6	charge Total. Add lines 1 through 5	3,556,613	5,429,750	4,729,185	6,701,033	6,870,301	27,286,882
	A mounts included on lines 1, 2, and 3 received from disqualified persons						0
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						0
	amount on line 13 for the year					+	0
8	Add lines 7a and 7b Public support (Subtract line 7c from line 6)						27,286,882
	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9	A mounts from line 6	3,556,613	5,429,750	4,729,185	6,701,033	6,870,301	27,286,882
l0a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	20,171	14,557	6,578	10,667		51,973
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
C	Add lines 10a and 10b	20,171	14,557	6,578	10,667		51,973
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)		23,331	20,671	20,012	50,029	114,043
13	Total support. (Add lines 9, 10c, 11, and 12)	3,576,784	5,467,638	4,756,434	6,731,712	6,920,330	27,452,898
14	First five years. If the Form 990 is f check this box and stop here	or the organization	on's first, second	third, fourth, or fi	fth tax year as a	501(c)(3) organı	zation, ▶┌
Se	ction C. Computation of Publ	ic Support Pe	ercentage				
15	Public support percentage for 2013	(line 8, column (f) dıvıded by lıne	13, column (f))		15	99 400 %
16	Public support percentage from 201	2 Schedule A, Pa	art III, line 15			16	99 220 %
	ction D. Computation of Inve						
17	Investment income percentage for 2		* *		n (f))	17	0 190 %
18	Investment income percentage from					18	0 510 %
19a	33 1/3% support tests—2013. If the	organization did	not check the box	c on line 14, and l	ine 15 is more th	nan 33 1/3% , and l	ıne 17 ıs not

b 33 1/3% support tests—2012. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).								
	Facts And Circumstances Test								
Retu	ırn Reference	Explanation							
		Colo	dula A (Farma 000 ar 000 F7) 2011						

Schedule A (Form 990 or 990-EZ) 2013

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DLN: 93493230001324

OMB No 1545-0047

SCHEDULE D

(Form 990)

Department of the Treasury

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 ► Attach to Form 990. ► See separate instructions. ► Information about Schedule D (Form 990)

Open to Public

nal Revenue Service and its ins	structions is at <u>www.irs.gov/rorini990</u> .			Inspect	ion
ame of the organization JND FOR PHILADELPHIA		Emp	loyer ident if ica	tion numbe	er
		23-	2174863		
	Advised Funds or Other Similar F	unds	or Accounts	. Complet	e if th
organization answered "Yes" to Form	<u> </u>		/b) Fdd.	- L L	
Total number at end of year	(a) Donor advised funds	+	(b) Funds and	otner accou	nts
Aggregate contributions to (during year)					
Aggregate contributions to (during year) Aggregate grants from (during year)					
Aggregate value at end of year					
Did the organization inform all donors and donor a					
funds are the organization's property, subject to t	the organization's exclusive legal control?			☐ Yes	┌ No
Did the organization inform all grantees, donors, a used only for charitable purposes and not for the conferring impermissible private benefit?				┌ Yes	┌ No
rt II Conservation Easements. Comple	ete if the organization answered "Yes"	to Forn	n 990, Part IV	/, line 7.	
Purpose(s) of conservation easements held by th Preservation of land for public use (e g , recre Protection of natural habitat Preservation of open space	ation or education)	certifie	d historic struc	ture	
Complete lines 2a through 2d if the organization leasement on the last day of the tax year	neld a qualified conservation contribution in	the forn	n of a conserva	tion	
			Held at the	End of the	Year
Total number of conservation easements		2a			
Total acreage restricted by conservation easeme		2b			
Number of conservation easements on a certified	, ,	2c			
Number of conservation easements included in (c historic structure listed in the National Register) acquired after 8/17/06, and not on a	2d			
Number of conservation easements modified, trar the tax year ▶	nsferred, released, extinguished, or terminat	ed by th	ne organization	during	
Number of states where property subject to conse	ervation easement is located 🕨				
Does the organization have a written policy regard enforcement of the conservation easements it hol	ding the periodic monitoring, inspection, har		violations, and	┌ Yes	┌ No
Staff and volunteer hours devoted to monitoring, i	nspecting, and enforcing conservation ease	ments o	luring the year		
Amount of expenses incurred in monitoring, inspe	ecting, and enforcing conservation easemen	ts durınç	g the year		
Does each conservation easement reported on lir and section 170(h)(4)(B)(ii)?	ne 2(d) above satisfy the requirements of se	ction 17	70(h)(4)(B)(ı)	┌ Yes	┌ No
In Part XIII, describe how the organization report balance sheet, and include, if applicable, the text the organization's accounting for conservation ea	of the footnote to the organization's financia				
	tions of Art, Historical Treasures,	or Otl	her Similar	Assets.	
If the organization elected, as permitted under SF works of art, historical treasures, or other similar service, provide, in Part XIII, the text of the footr	AS 116 (ASC 958), not to report in its reve assets held for public exhibition, education	, or rese	arch in furthera		
If the organization elected, as permitted under SF works of art, historical treasures, or other similar service, provide the following amounts relating to	AS 116 (ASC 958), to report in its revenue assets held for public exhibition, education	statem	ent and balance		ıc
(i) Revenues included in Form 990, Part VIII, lin	e 1		▶ \$		
(ii) Assets included in Form 990, Part X					
If the organization received or held works of art, he following amounts required to be reported under S					
Revenues included in Form 990, Part VIII, line 1			> \$		
			· +		
Assets included in Form 990, Part X			▶ -\$		

Par	Tit Organizations Maintaining Co	llections of Art,	Histoi	<u>'ical</u>	Treasur	es, or O	<u>ther</u>	Similar	Asse	ts (co	<u>ntınued)</u>
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other records	s, checl	k any c	of the follo	wing that a	re a	sıgnıfıcant	use of	ıts	
а	Public exhibition		d 「	Loa	n or exch	ange progi	ams				
b	Scholarly research		е Г	Oth	ner						
c	Preservation for future generations										
4	Provide a description of the organization's co	ollections and explain	n how th	ey furt	her the or	ganızatıon	's ex	empt purp	ose in		
5	During the year, did the organization solicit							ılar	_		_
	assets to be sold to raise funds rather than t	<u>`</u>						" -		Yes	No
Par	Part IV, line 9, or reported an ar					answere	a "Ye	es" to For	m 990	',	
1a	Is the organization an agent, trustee, custoo included on Form 990, Part X?	lian or other intermed	liary for	contri	butions or	r other ass	ets n	ot	Γ	Yes	┌ No
b	If "Yes," explain the arrangement in Part XI	II and complete the fo	ollowing	table		_					
						-			Amou	ınt	
C	Beginning balance					-	1c				
d	Additions during the year						1d				
е	Distributions during the year						1e				
f	Ending balance					L	1f				
2a	Did the organization include an amount on Fe	orm 990, Part X, line	21?						Γ	Yes	┌ No
b	If "Yes," explain the arrangement in Part XI	II Check here if the 6	explana	tion ha	s been pr	ovided in f	oart >	(III			Γ
Pa	rt V Endowment Funds. Complete										
		(a)Current year	(b) Prio	r year	b (c) Tw	o years back	(d)⊺	hree years b	ack (e)Four ye	ears back
1a	Beginning of year balance						-				
b	Contributions						_				
С	Net investment earnings, gains, and losses										
d	Grants or scholarships										
e	Other expenditures for facilities and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the cur	rent year end balance	e (line 1	g, colu	ımn (a)) h	eld as					
а	Board designated or quasi-endowment 🕨										
b	Permanent endowment -										
С	Temporarily restricted endowment ▶										
	The percentages in lines 2a, 2b, and 2c sho	uld equal 100%									
За	Are there endowment funds not in the posse	ssion of the organizat	tion that	are h	eld and ad	lmınıstere	d for t	:he			
	organization by									Yes	No
	(i) unrelated organizations			•			•		3a(i)		
L	(ii) related organizations								3a(ii)	 	
ь 4	If "Yes" to 3a(II), are the related organization Describe in Part XIII the intended uses of the second of the second of the second or the second of the seco						•		3b		
	t VI Land, Buildings, and Equipme				on answ	ered 'Ves	' to	Form 990	Part	TV lır	16
I GI	11a. See Form 990, Part X, line		ic orga	mzati	On answ	ered res		01111 550	, rait	1 V , III	ic
	Description of property				st or other nvestment)	(b)Cost or basis (ot		(c) Accur deprec		(d) B	ook value
	Land										
b	Buildings		.								
	Leasehold improvements		.								
	Equipment		.							1	
	• •		- ⊢			 		 		+	
е	Other		.								

	(b)Book value	(c) Method of valuation
(a) Description of security or category (including name of security)	(B)Book value	Cost or end-of-year market value
(1)Financial derivatives		
(2)Closely-held equity interests Other		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	<u>*</u>	
Part VIII Investments—Program Related. Co See Form 990, Part X, line 13.	omplete if the organizatioi	n answered 'Yes' to Form 990, Part IV, line 11c.
(a) Description of investment	(b) Book value	(c) Method of valuation
		Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	*	
Part IX Other Assets. Complete if the organization	n answered 'Yes' to Form 990), Part IV, line 11d See Form 990, Part X, line 15
(a) Descr	ription	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1		
Part X Other Liabilities. Complete if the orga		
Part X Other Liabilities. Complete if the organism 990, Part X, line 25. 1 (a) Description of liability Federal income taxes	anızatıon answered 'Yes' t	
Part X Other Liabilities. Complete if the organized Form 990, Part X, line 25. 1 (a) Description of liability	anızatıon answered 'Yes' t	
Part X Other Liabilities. Complete if the organism 990, Part X, line 25. 1 (a) Description of liability Federal income taxes	(b) Book value	
Part X Other Liabilities. Complete if the organism 990, Part X, line 25. 1 (a) Description of liability Federal income taxes	(b) Book value	
Part X Other Liabilities. Complete if the organism 990, Part X, line 25. 1 (a) Description of liability Federal income taxes	(b) Book value	
Part X Other Liabilities. Complete if the organism 990, Part X, line 25. 1 (a) Description of liability Federal income taxes	(b) Book value	
Part X Other Liabilities. Complete if the organism 990, Part X, line 25. 1 (a) Description of liability Federal income taxes	(b) Book value	
Part X Other Liabilities. Complete if the organism 990, Part X, line 25. 1 (a) Description of liability Federal income taxes	(b) Book value	
Part X Other Liabilities. Complete if the organism 990, Part X, line 25. 1 (a) Description of liability Federal income taxes	(b) Book value	
Part X Other Liabilities. Complete if the organism 990, Part X, line 25. 1 (a) Description of liability Federal income taxes	(b) Book value	
Part X Other Liabilities. Complete if the organism 990, Part X, line 25. 1 (a) Description of liability Federal income taxes	(b) Book value	
Part X Other Liabilities. Complete if the organism 990, Part X, line 25. 1 (a) Description of liability Federal income taxes	(b) Book value	
Part X Other Liabilities. Complete if the organism 990, Part X, line 25. 1 (a) Description of liability Federal income taxes	(b) Book value 3,166,741	

Par		Revenue per Audited Financial Stawered 'Yes' to Form 990, Part IV, line		nts With Revenue p	er R	eturn Complete If
1		er support per audited financial statements			1	6,920,330
2		ut not on Form 990, Part VIII, line 12				, ,
а		tments	2a			
b	<u>-</u>	acılıtıes	2b	109,212		
c		S	2c			
d)	2d			
e	Add lines 2a through 2d				2e	109,212
3	J				3	6,811,118
4		0, Part VIII, line 12, but not on line 1				
а		luded on Form 990, Part VIII, line 7b	4a	1		
b	•)	4b			
c					4c	0
5		d 4c. (This must equal Form 990, Part I, line			5	6,811,118
		xpenses per Audited Financial Sta				
		nswered 'Yes' to Form 990, Part IV, line				<u>, </u>
1	Total expenses and losses pe	r audited financial statements			1	6,120,340
2	A mounts included on line 1 bu	it not on Form 990, Part IX, line 25				
а	Donated services and use of f	acılıtıes	2a	109,212		
b	Prior year adjustments		2b			
C	Otherlosses		2c			
d	Other (Describe in Part XIII)		2d			
e	Add lines 2a through 2d				2e	109,212
3	Subtract line ${f 2e}$ from line ${f 1}$.				3	6,011,128
4	Amounts included on Form 99	0, Part IX, line 25, but not on line 1:				
а	Investment expenses not incl	uded on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)		4b			
C	Add lines 4a and 4b				4c	0
5	Total expenses Add lines 3 a	nd 4c. (This must equal Form 990, Part I, lir	ne 18)		5	6,011,128
Part	XIII Supplemental In	formation				
Part	ide the descriptions required foi V , line 4 , Part X, line 2 , Part XI mation	Part II, lines 3, 5, and 9, Part III, lines 1a , lines 2d and 4b, and Part XII, lines 2d and	and 4 , I 4b Al	. Part IV , lines 1b and 2b Iso complete this part to	provi	de any additional
	Return Reference	Explanation				
PART	X, LINE 2	THE FUND IS A NOT-FOR-PROFIT ORG. TAX UNDER SECTION 501(C)(3) OF TH QUALIFIES FOR CHARITABLE CONTRIGAN ORGANIZATION THAT IS NOT A PR RELATED TO EXEMPT PURPOSES, LESS AND STATE CORPORATE INCOME TAX BUSINESS INCOME FOR THE YEARS EN EVALUATED THE FUND'S TAX POSITIO UNCERTAIN TAX POSITIONS THAT RESTATEMENTS THE FUND FILES INCOM GENERALLY, THE FUND IN NO LONGER FOR YEARS BEFORE 2010	E INTE BUTIO RIVATE S APPL ES TH IDED D ONS AN QUIRE IE TAX	RNAL REVENUE CODE N DEDUCTIONS AND HE FOUNDATION INCOMICABLE DEDUCTIONS, E FOUNDATION HAD NOTED THAT NOTED THAT ADJUSTMENT TO THE RETURNS IN THE US	IN A HAS B ME WH , IS SU NO NE ND 20 THE F FINA FEDE	DDITION, THE FUND EEN CLASSIFIED AS HICH IS NOT JBJECT TO FEDERAL ET UNRELATED 12 MANAGEMENT FUND HAD TAKEN NO NCIAL RAL JURISDICTION

	<u> </u>	
Part XIII	Supplemental Info	ormation (continued)
Ret	turn Reference	Explanation

Schedule D (Form 990) 2013

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Schedule I

(Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

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

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22. ► Attach to Form 990

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

DLN: 93493230001324

Open to Public Inspection

Employer identification number

FUND FOR PHILADELPHIA						23-2174863	
Part I General Information	on on Grants and	l Assistance				23-2174803	
 Does the organization maintain the selection criteria used to at Describe in Part IV the organization 	records to substanti ward the grants or as	ate the amount of the sistance?			the grants or assist	ance, and	✓ Yes
Part II Grants and Other A Form 990, Part IV, lin	Assistance to Go ne 21, for any reci	vernments and O pient that received	r ganizations in the more than \$5,000. Pa	United States. Con art II can be duplicate	nplete if the orga d if additional spa	nization answered "Y ace is needed.	es" to
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gra or assistance
See Additional Data Table							
2 Enter total number of section 5	01(c)(3) and govern	nent organizations list	ted in the line 1 table .			▶	15

Enter total number of other organizations listed in the line 1 table

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

(a)Type of grant or assistance	(b) Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) MARATHON PRIZES	42	37,950			
(2) DILWORTH AWARD RECEIPENT	1	6,945			
(3) SCHOLARSHIP AWARDS	7	10,500			
(4) ART AWARD RECIPIENTS	18	2,425			
(5) YOUTH POET AWARDS	2	1,500			

Part IV Supplemental I	nformation. Provide the information required in Part 1, line 2, Part III, column (b), and any other additional information.
Return Reference	Explanation
PART I, LINE 2	THE MAYOR'S FUND RECEIVES A PORTION OF FUNDS RAISED BY THE PHILADELPHIA MARATHON TO DEVOTE TO PHILANTHROPIC CAUSES THE PROJECTS IT SUPPORTS ALIGN WITH THE MAYOR'S GOALS UNSOLICITED GRANTS ARE NOT ACCEPTED, AS ALL PROPOSALS MUST BE SPONSORED BY THE MAYOR OR A DEPUTY MAYOR OR A DEPUTY MAYOR CAN SERVE AS A SPONSOR FOR GRANT APPLICATIONS SUBMITTED BY CITY AGENCIES, LOCAL NON-PROFIT ORGANIZATIONS, OR BY OTHER COMMUNITY-SUSTAINING BUSINESSES OR GROUPS THE FUND DOES NOT ACCEPT APPLICATIONS THAT SEEK MULTI-YEAR FUNDING FOR ONGOING OPERATIONAL COSTS THE NUMBER AND SIZE OF AWARDS GIVEN EACH YEAR WILL VARY DEPENDING ON THE FUNDS RAISED BY THE MARATHON FUNDING REQUESTS ARE ACCEPTED ON A ROLLING BASIS AND DECISIONS ARE MADE AT EACH OF THE BOARD MEETINGS THE GRANT COMMITTEE REVIEWS THE APPLICATIONS AND MAKES RECOMMENDATIONS TO THE FUND'S BOARD FINAL DECISIONS ARE MADE AT EACH BOARD MEETING THERE ARE FOUR BOARD MEETINGS A YEAR GRANTEES ARE REQUIRED TO PREPARE AND SUBMIT BOTH A FINANCIAL AND NARRATIVE REPORT FOR ANY GRANTS THE FUND ISSUES THAT ARE RESTRICTED TO A SPECIFIC PROGRAM REPORTS ARE REVIEWED BY THE EXECUTIVE DIRECTOR AS WELL AS THE DEPUTY DIRECTOR

Software ID: Software Version:

EIN: 23-2174863

Name: FUND FOR PHILADELPHIA

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BLACKHAWKS ATHLETIC CLUB 15000 THERESA DRIVE PHILADELPHIA,PA 19115	23-2835751	501(C)(3)	25,000				GENERAL SUPPORT
BROAD STREET MINISTRIES 315 SOUTH BROAD STREET PHILADELPHIA,PA 19107	20-2760310	501(C)(3)	75,000				GENERAL SUPPORT
BUSTLETON BENGALS CLUB PO BOX 6103 PHILADELPHIA,PA 19115	23-2009069	501(C)(3)	15,000				GENERAL SUPPORT
CITY OF PHILADELPHIA CITY HALL ROOM 204 PHILADELPHIA,PA 19107	23-6003047		6,341				PARKS AND RECREATION DEPARTMENT - TEENS PROGRAM
CITY OF PHILADELPHIA CITY HALL ROOM 204 PHILADELPHIA,PA 19107	23-6003047		25,957				MATCHING FUNDS FOR GRANT
CITY YOUTH ASSOCIATION PO BOX 5235 PHILADELPHIA,PA 19141	23-3024239	501(C)(3)	10,000				GENERAL SUPPORT
FOX ROK ATHLETIC ASSN 7723 LOVETTA AVE PHILADELPHIA,PA 19111	23-2160330	501(C)(3)	15,000				GENERAL SUPPORT
GRANTMAKERS IN THE ARTS 4055 - 21ST AVENUE W SEATTLE, WA 98199	36-3670955	501(C)(3)	10,000				GENERAL SUPPORT
GREATER PHILADELPHIA FILM OFFICE 1515 ARCH STREET 11TH FLOOR PHILADELPHIA,PA 19102	23-3039429	501(C)(3)	76,000				GENERAL SUPPORT
KOREAN COMMUNITY DEVELOPMENT SERVICES CENTER 6055 NORTH 5TH STREET PHILADELPHIA,PA 19120	23-2303766	501(C)(3)	5,100				GATEWAYS TO OLNEY GRANT

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal,	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
					other)		
LAWNCREST LIONS 6000 RISING SUN AVE PHILADELPHIA,PA 19111	27-1259538	501(C)(3)	10,000				GENERAL SUPPORT
MOSS ATHLETIC ASSOCIATION 6121 MARSDEN STREET PHILADELPHIA,PA 19135	23-6444706	501(C)(3)	15,000				GENERAL SUPPORT
NORTHWEST RAIDERS C/O LONNIE YOUNG RECREATION CENTER 1100 E CHELTEN AVENUE PHILADELPHIA,PA 19138	23-1582287	501(C)(3)	10,000				GENERAL SUPPORT
OAK LANE YOUTH ASSOCIATION PO BOX 14197 PHILADELPHIA,PA 19138	23-7261186	501(C)(3)	15,000				GENERAL SUPPORT
OXFORD CIRCLE ATHLETIC ASSOCIATION 5051 SUMMERDALE AVE PHILADELPHIA,PA 19124	23-2884166	501(C)(3)	20,000				GENERAL SUPPORT
PHIADELPHIA MUMMERS BRIDAGE ASSOCIATION PO BOX 37541 PHILADELPHIA,PA 19148	23-2057395	501(C)(3)	25,000				GENERAL SUPPORT
PHILA FESTIVAL OF THE ARTS INC ONE S BROAD ST 14TH FLOOR PHILADELPHIA, PA 19107	23-2778434	501(C)(3)	81,000				YOUNG ARTIST STUDY

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SCHEDULE O

As Filed Data -

DLN: 93493230001324

OMB No 1545-0047

2013

Open to Public
Inspection

Supplemental Information to Form 990 or 990-EZ

Department of the Treasury
Internal Revenue Service

(Form 990 or 990-EZ)

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

► Attach to Form 990 or 990-EZ.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization
FUND FOR PHILADELPHIA

Employer identification number

23-2174863

Return Reference	Explanation
FORM 990, PART I, LINE 1	THE MAYOR'S FUND FOR PHILADELPHIA SUPPORTS PROGRAMS LED BY CITY DEPARTMENTS AND COMMUNITY DEVELOPMENT ORGANIZATIONS THAT ACHIEVE THE MAYOR'S GOALS

Return Reference	Explanation
FORM 990, PART III, LINE 1	THE FUND'S GOAL IS TO ADVANCE THE MAYOR OF PHILADELPHIA'S PRIORITIES THROUGH LEVERAGING PUBLIC-PRIVATE PARTNERSHIPS TO BENEFIT THE PEOPLE OF PHILADELPHIA VALUES STATEMENT THE MAYOR'S FUND FOR PHILADELPHIA (BOARD, STAFF AND VOLUNTEERS) IS COMMITTED TO FULLY INTEGRATING THE FOLLOWING VALUES INTO ALL THAT WE DO THESE ARE THE PRINCIPALS THAT WILL GUIDE OUR WORK ON BEHALF OF THE MAYOR AND FOR THE RESIDENTS OF PHILADELPHIA STEWARDSHIP THE MAYOR'S FUND IS COMMITTED TO THE HIGHEST LEVEL OF STEWARDSHIP OF ALL PUBLIC AND PRIVATE FUNDS, WITH THE HIGHEST LEVEL OF INTEGRITY, TRANSPARENCY AND EFFICIENCY EQUALITY WE SEEK TO INTEGRATE EQUALITY IN ALL THAT WE DO AS AN EMPLOYER, FUNDER, AND IN OUR ROLE AS A POINT OF ENTRY FOR PUBLIC-PRIVATE PARTNERSHIPS IN PHILADELPHIA COLLABORATION THE FUND IS COMMITTED TO FACILITATING COLLABORATION BETWEEN THE PUBLIC AND PRIVATE SECTORS TO ENSURE A SUCCESSFUL AND PROSPEROUS PHILADELPHIA EXCELLENCE THE FUND IS COMMITTED TO EXCELLENCE IN ALL THAT WE DO, AND TO ALWAYS GO THE EXTRA STEP FOR THE RESIDENTS OF PHILADELPHIA SIGNIFICANT ACTIVITIES THE MAYOR'S FUND FOR PHILADELPHIA SUPPORTS PROGRAMS LED BY CITY DEPARTMENTS AND COMMUNITY DEVELOPMENT ORGANIZATIONS THAT ACHIEVE THE MAYOR'S GOALS THE FUND SERVES AS THE FISCAL AGENT OR A FISCAL SPONSOR FOR MORE THAN 100 CIVIC PROGRAMS, AND THE FOLLOWING IS A SAMPLING OF THE WORK THAT WE SUPPORT MAYOR'S 5 GOALS 1 PHILADELPHIA BECOMES ONE OF THE SAFEST CITIES IN AMERICA 2 THE EDUCATION AND HEALTH OF PHILADELPHIANS IMPROVE 3 PHILADELPHIA IS A PLACE OF CHOICE 4 PHILADELPHIA BECOMES THE GREENEST AND MOST SUSTAINABLE CITY IN AMERICA 5 PHILADELPHIA GOVERNMENT WORKS EFFICIENTLY AND EFFECTIVELY, WITH INTEGRITY AND RESPONSIVENESS

FORM 990, PART III, LINE 2 NEW PROGRAM THE EMPOWERMENT ZONES THE PHILADEL. PHIA EMPOWERMENT ZONE (PEZ) WAS ESTABLISHED IN 1994 AS A COMMUNITY DEVELOPMENT AND ECONOMIC REVITALIZATION PROGRAM, CREATED FEDERALLY AND GUIDED LOCALLY THE EZ'S GOAL WAS SUPPORT STRATEGIES AND PROGRAMS THAT IMPROVE PUBLIC SAFETY, ADVANCE HUMAN DEVELOPMENT, CREATE A WELCOMING ENVIRONMENT, AND INVIGORATE COMMERCE. THE PEZ PROGRAM CONTINUES TO BUILD HEALTHY, SELF-SUFFICIENT AND SAFE ENVIRONMENTS BY WORKING WITH RESIDENTS, BUSINESS OWNERS, AND OTHER STAKEHOLDERS TO RAISE THE QUALITY OF LIFE IN THEIR AREAS. IN 2004 PEZ CREATED A PROJECT CALLED THE NEIGHBORHOOD FUNDING STREAM, A COMMUNITY ENDOWMENT THAT MAKES ANNUALLY THROUGH ECONOMIC DEVELOPMENT GRANTS TO THE PEZ COMMUNITIES GRANT ACTIVITIES INCLUDE TAX PREPARATION AND FINANCIAL LITERACY, WORKFORCE DEVELOPMENT AND JOB TRAINING, COMMERCIAL DEVELOPMENT, BUSINESS TECHNICAL ASSISTANCE AND COMMERCIAL CORRIDOR REVITALIZATION NEW PROGRAM MORE PARK, LESS WAY THE DEPARTMENT OF PARKS AND RECREATION PARTNERED WITH PENN PRAXIS AND THE PENN PROJECT ON CIVIC ENGAGEMENT TO DEVELOP A PLAN FOR THE PARKWAY THAT IS SHAPED AROUND PROJECTS THAT CAN BE IMPLEMENTED QUICKLY. THEY GATHERED COMMUNITY INPUT THROUGH 4 PUBLIC MEETINGS AND THE RESULT WAS THE PLAN CALLED "MORE PARK, LESS WAY." THE FIRST PHASE OF THE PLAN TO BE IMPLEMENTED WAS REPURPOSING A PARKING LOT IN FRONT OF EAKINS OVAL INTO AN INNOVATIVE PLAY SPACE FOR CHILDREN AND ADULTS ALIKE.	Return Reference	Explanation
	PART III,	A COMMUNITY DEVELOPMENT AND ECONOMIC REVITALIZATION PROGRAM, CREATED FEDERALLY AND GUIDED LOCALLY THE EZ'S GOAL WAS SUPPORT STRATEGIES AND PROGRAMS THAT IMPROVE PUBLIC SAFETY, ADVANCE HUMAN DEVELOPMENT, CREATE A WELCOMING ENVIRONMENT, AND INVIGORATE COMMERCE. THE PEZ PROGRAM CONTINUES TO BUILD HEALTHY, SELF-SUFFICIENT AND SAFE ENVIRONMENTS BY WORKING WITH RESIDENTS, BUSINESS OWNERS, AND OTHER STAKEHOLDERS TO RAISE THE QUALITY OF LIFE IN THEIR AREAS IN 2004 PEZ CREATED A PROJECT CALLED THE NEIGHBORHOOD FUNDING STREAM, A COMMUNITY ENDOWMENT THAT MAKES ANNUAL GRANTS IN EACH PEZ NEIGHBORHOOD TO DATE, THE NEIGHBORHOOD FUNDING STREAM INVESTS 5% ANNUALLY THROUGH ECONOMIC DEVELOPMENT GRANTS TO THE PEZ COMMUNITIES GRANT ACTIVITIES INCLUDE TAX PREPARATION AND FINANCIAL LITERACY, WORKFORCE DEVELOPMENT AND JOB TRAINING, COMMERCIAL DEVELOPMENT, BUSINESS TECHNICAL ASSISTANCE AND COMMERCIAL CORRIDOR REVITALIZATION NEW PROGRAM MORE PARK, LESS WAY THE DEPARTMENT OF PARKS AND RECREATION PARTNERED WITH PENN PRAXIS AND THE PENN PROJECT ON CIVIC ENGAGEMENT TO DEVELOP A PLAN FOR THE PARKWAY THAT IS SHAPED AROUND PROJECTS THAT CAN BE IMPLEMENTED QUICKLY THEY GATHERED COMMUNITY INPUT THROUGH 4 PUBLIC MEETINGS AND THE RESULT WAS THE PLAN CALLED "MORE PARK, LESS WAY" THE FIRST PHASE OF THE PLAN TO BE IMPLEMENTED WAS REPURPOSING A PARKING LOT IN FRONT OF EAKINS OVAL INTO AN

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11	THE ORGANIZATION PROVIDES A COPY OF THE FORM 990 TO EACH VOTING BOARD MEMBER BEFORE IT HAS BEEN FILED. THE EXECUTIVE DIRECTOR OF THE ORGANIZATION REVIEWS THE FORM 990 AND ATTACHMENTS PRIOR TO SUBMITTING IT TO ALL VOTING BOARD MEMBERS. THE BOARD CHAIRPERSON AND BOARD TREASURER REVIEW AND SIGN THE FORM AND THE DOCUMENT IS THEN DISCUSSED AT THE NEXT REGULAR BOARD MEETING.

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	THE FUND FOR PHILADELPHIA ADOPTED THE CITY OF PHILADELPHIA'S ETHICS CODE, WHICH IS DISTRIBUTED TO EACH NEW BOARD MEMBER THE CODE INCLUDES RULES OF CONDUCT FOR CONFIDENTIALITY, PUBLIC DISCLOSURE AND DISQUALIFICATION, CONFLICTS OF INTEREST, GIFTS, LOANS AND FAVORS, AND OTHER MATTERS THE ORGANIZATION ALSO USES THE CITY OF PHILADELPHIA STATEMENT OF FINANACIAL INTEREST FOR BOARD MEMBERS TO DOCUMENT THE FINANCIAL INTERESTS FOR THEMSELVES AND THEIR FAMILY MEMBERS AND TO INDICATE ANY CONFLICTS OF INTEREST IN APPEARANCE OR FACT THE FORM IS USED TO AFFIRM BOARD MEMBER'S COMPLIANCE WITH THE REQUIREMENTS IN THE ETHICS CODE EMPLOYEES ARE REQUIRED TO SIGN A POLICY ON CONDUCT, INTEGRITY, AND ETHICS AT WORK

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15A	THE BOARD OF DIRECTORS REVIEWS AND APPROVES THE COMPENSATION OF THE TOP MANAGEMENT OFFICIAL AS PART OF THE OPERATING BUDGET OF THE ORGANIZATION CONTEMPORANEOUS MINUTES OF ALL BOARD MEETINGS ARE THEN DOCUMENTED THE ORGANIZATION ALSO FOLLOWS THE CITY OF PHILADELPHIA'S POLICY ON ANNUAL INCREASES, WHICH ARE DETERMINED BY THE CONTRACTS WITH THE CITY'S UNIONS THE LAST YEAR THIS PROCESS WAS UNDERTAKEN WAS IN 2011 THE POLICY FOLLOWING THE CITY'S WAGE INCREASE APPLIES TO ALL FUND PERSONNEL

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON WRITTEN REQUEST DURING REGULAR BUSINESS HOURS

FORM 990, CATERING - CITIES UNITED PROGRAM PROGRAM SERVICE EXPENSES 1,910 MANAGEMENT AND GENERAL EXPENSES 1.010 CATERING - DISTRICT EXPENSE ROCK AM SERVICE EXPENSES 6 (D.00 MANAGEMENT AND GENERAL EXPENSES 1.010 MANAGEMENT AND GENERAL EXPENSES 1.010 MANAGEMENT AND GENERAL EXPENSES 2.00 CATERING - GENERAL PROGRAM SERVICE EXPENSES 3.00 MANAGEMENT AND GENERAL EXPENSES 3.00 MANAGEMENT AND GENERAL EXPENSES 3.00 MANAGEMENT AND GENERAL EXPENSES 3.00 CATERING - INVESTORS ON FERENCE PROGRAM SERVICE EXPENSES 3.00 CATERING - GENERAL EXPENSES 3.00 CATERING - INVESTORS ON FERENCE PROGRAM SERVICE EXPENSES 3.00 CATERING - GENERAL EXPENSES 3.00 CATERING - INVESTORS ON MANAGEMENT AND GENERAL EXPENSES 3.00 CANDILLING - BADGE OF HONOR PROGRAM PROGRAM SERVICE EXPENSES 3.00 CANDILLING - BADGE OF HONOR PROGRAM SERVICE EXPENSES 3.00 CANDILLING - BADGE OF HONOR PROGRAM SERVICE EXPENSES 3.00 CANDILLING - GENERAL EXPENSES 3.00 CANDILLING -
NSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 1,431 DILWORTH AWARDS CONSULTING PROGRAM SERVICE EXPENSES 10,246 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 10,246 DISTRICT OUTREACH PROGRAM SERVICE EXPENSES 6,551 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 6,551 DISTRICT PLANNING AND ZONING PROGRAM SERVICE EXPENSES 132,177 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 132,177 EMPOWERMENT ZONE CONSULTING PROGRAM SERVICE EXPENSES 142,251 M

Return Explanation	
FORM 990, PART IX, LINE 11G	N PROGRAM SERVICE EXPENSES 9,700 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 9,700 HOLIDAY PARTY - CATERING PROGRAM SERVICE EXPENSES 8,570 MANAGE MENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 8,570 HOLIDAY PARTY - ENTERTAINMENT PROGRAM SERVICE EXPENSES 800 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 302 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 90 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 10 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 10 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 90 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 12,276 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 12,276 OPERA TION BROTHERLY LOVE CARNIVAL PROGRAM SERVICE EXPENSES 17,430 MANAGEMENT AND GENERAL EXPENSES 12,276 OPERA TION BROTHERLY LOVE CARNIVAL PROGRAM SERVICE EXPENSES 17,430 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 10 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 10 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 0 FUNDRAISING EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 0 FUNDRAISING EXPENSES 0 FUNDR

Return Reference	Explanation
FORM 990, PART IX, LINE 24E	RECLASSIFICATION OF GRANT EXPENSE FROM PROGRAM TO MANAGEMENT AND GENERAL