

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



DLN: 93493318037774

Form **990**

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

► Information about Form 990 and its instructions is at <u>www.IRS.gov/form990</u>

OMB No 1545-0047

2013

Open to Public Inspection

A Fo	r the	2013 ca	lendar year, or tax year beginning	01-01-2013 , 2013, and endi	ng 12-31	-2013					
B Ch	eck ıf a	applicable	C Name of organization Philadelphia Industrial Development				D Employ	yer ide	entification number		
Ad	dress c	hange	Corporation Doing Business As				23-60	5085	8		
∏ Na	me cha	ange	Doing Business As								
┌ Inr	tıal retu	ım	Number and street (or P O box if ma	ail is not delivered to street address)	Room/suite	e	E Telepho	ne nun	nber		
Г Те	rmınate	ed	1500 Market Street Suite 2600WEST								
┌ Am	nended	return	City or town, state or province, coun	try, and ZIP or foreign postal code			(215)	496-	8020		
Гар	plicatio	n pending	Philadelphia, PA 19102				G Gross re	eceipts	\$ 15,285,439		
			F Name and address of prin	cıpal officer		H(a) Is	this a group		· · · ·		
			John Grady				bordinates?	recuir	┌ Yes ┌ No		
			1500 Market Street Philadelphia, PA 19102			Ш/Ь) А					
			· ·				e all subordıı :luded?	nates	Γ Y es Γ No		
I Ta	ıx-exer	npt status	5	nsert no) 4947(a)(1) or 5	27	If'	'No," attach	a lıst	(see instructions)		
J W	ebsit	e: ► ww	w pidc-pa org			H(c) G	oup exempt	on nu	ımber ►		
<u></u>	6		n	. Гон »		1					
	m or or I rt I	_	n P Corporation Trust Association	of Other F		L Year of	formation 19	5/ P	State of legal domicile PA		
Fa			-								
		,	describe the organization's missio lans and implements economic de		ent initia	itives which	h enhance t	he co	mpetitive environment,		
a 1			e jobs and produce higher tax rata						<u> </u>		
Ě											
Ē											
Governance	2	Check t	his box দ if the organization dis	continued its operations or dis	posed of	more thai	n 25% of its	net a	ssets		
									1		
40 ያሳ ለ	1		of voting members of the governi		3	28					
Ě			of independent voting members o		4	28					
Activities &			umber of individuals employed in c umber of volunteers (estimate if ne		5	120					
Q.			nrelated business revenue from Pa	• •				6 7a	0		
	1		elated business taxable income fr					7a 7b	0		
	 		eracea basiness taxable income ii				rior Year	175	Current Year		
	8	Contr	ributions and grants (Part VIII, lir	e 1 h)				0	887,371		
≘	9		am service revenue (Part VIII, lir				14,283,216		14,396,404		
Ravenue	10		tment income (Part VIII, column					19	1,664		
æ	11	Other	revenue (Part VIII, column (A),	ines 5, 6d, 8c, 9c, 10c, and 1:	1e)			0	0		
	12		revenue—add lines 8 through 11				14,291,6		15 205 420		
	13		s and similar amounts paid (Part :				422,3	-	15,285,439		
	14		its paid to or for members (Part I)	422,3	0	193,328					
	15		ies, other compensation, employe		\dashv						
\$	13	5-10		7,137,5	49	7,940,763					
Expenses	16a	Profes	ssional fundraising fees (Part IX,	column (A), line 11e)				0	0		
ਡੌ	Ь	Total fo	undraising expenses (Part IX, column (D)	, line 25) ► 0							
	17	Other	expenses (Part IX, column (A), l	nes 11a-11d, 11f-24e)			7,183,7	49	7,704,713		
	18		expenses Add lines 13-17 (mus		•		14,743,6	-	15,839,004		
	19	Rever	nue less expenses Subtract line 1	8 from line 12		_	-451,9		-553,565		
\$ 8 \$ 6 \$ 8						Beginn	ing of Currer Year	nt	End of Year		
Net Assets or Fund Balances	20	Total	assets (Part X, line 16)				63,271,0	29	83,678,914		
4.45 4.8	21		liabilities (Part X, line 26)				59,211,1	_	74,884,632		
ž	22		ssets or fund balances Subtract I				4,059,8	-	8,794,282		
Pa	rt II		nature Block					<u> </u>	<u> </u>		
my k	nowle	dge and	perjury, I declare that I have exa belief, it is true, correct, and com nowledge								
,p			···- ·· y -								
		***					2014-11-11				
Sigr		Signature of officer									
Her	е		nony Simonetta Senior Vice President								
		<u> </u>	e or print name and title	I Drawa wada aya a ta	- 15	. I		DTT			
ь	اـ		Print/Type preparer's name Russlee Armstrong	Preparer's signature	Da	1,	Check if elf-employed	PTIN P0028	88383		
Paid			Firm's name FGRANT THORNTON LLP	•			im's EIN 🕨				
	pare		Firm's address > 2001 MARKET STREET S	SUITE 700			Phone no (215)	1 496-9	3020		
USE	: On	uv 🗀	Gadaress F ZOOT PIARKET STREET S	.G.L. 100		1,	(213	, ,,,,,-c			

PHILADELPHIA, PA 19103

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

✓ Yes No

Forn	n 990 (2013)					Page
Pai		ent of Program Serv chedule O contains a res			·	
1	Briefly describe	the organization's missior	1			
		nents economic developm t the City of Philadelphia (etitive environment, generate n statement)	obs and produce highe
2	Did the organizat the prior Form 99	ion undertake any signific 0 or 990-EZ?	ant program s	-	hich were not listed on	┌ Yes ┌ No
	If "Yes," describe	e these new services on S	chedule O			
3	services?			nt changes in how it cond	ucts, any program	┌ Yes ┌ No
	If "Yes," describe	e these changes on Scheo	dule O			
4	expenses Sectio		l) organization	s are required to report th	e largest program services, a ne amount of grants and alloc	
4a	(Code) (Expenses \$	3,566,032	ıncludıng grants of \$) (Revenue \$	5,001,714)
					E SUBORDINATED DEBT FINANCING IPLOYMENT IN THE CITY OF PHILAD	
	(Code) (Expenses \$	4,153,746	ıncludıng grants of \$) (Revenue \$	6,238,693)
	EXPERTISE IN REAL AND GREATER METI	ESTATE USAGE AND NEGOTIAT	IONS INVOLVING	COMMERCÍAL AND INDUSTRIÁL	THE SALE OR LEASE OF CONVEYED L DEVELOPMENT WHICH BENEFITS T NDS, OBTAINING INSURANCE ON PR	HE CITY OF PHILADELPHIA
	(Code) (Expenses \$	3,047,662	ıncludıng grants of \$	193,528) (Revenue \$	3,499,112)
-TC	GRANT/CONTRACT	, , ,	DING AND DISTRIE	BUTION OF GRANTS AND CONTI	RACTS TO BE USED FOR CAPITAL/C	, , ,

) (Revenue \$

4d

4e

(Expenses \$

Other program services (Describe in Schedule O)

Total program service expenses ►

208,630 including grants of \$

10,976,070

544,256)

Part IV	Chec	rklist	of Re	auired	Scher	dules
	CHE	LRIISL	OI NO	uuncu	SCILC	Juics

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		No
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? <i>If "Yes," complete Schedule C, Part II</i>	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		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		Νo
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 😼	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^{\bullet}	9	Yes	
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V^{\bullet}	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
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	Yes	
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		No
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	Yes	
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 "Yes," complete Schedule F, Parts III and IV</i>	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		

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		No
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	Yes	
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? If "Yes," complete Schedule L, Part III	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	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	Yes	
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? If "Yes," complete Schedule N, Part II	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? If "Yes," complete Schedule R, Part 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	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
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	Yes	
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		
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?	36	Yes	

-	Statements Regarding Other TRS Filings and Tax Compliance			_
	Check if Schedule O contains a response or note to any line in this Part V		Yes	No
•	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 75		163	140
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0	1		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	1		
	gaming (gambling) winnings to prize winners?	1 c	Yes	
1	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			
)	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	
1	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		No
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
1	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
)	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			
1	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?	5b		N
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
	2. 105, to fine 50 of 55, and the organization metrorin 0000-1.	5c		
1	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		N
	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		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
	The rest, indicate the number of forms 5252 med during the year.	1		
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
	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		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter	-55		
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	<u> </u>		
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	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		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
	year	1		
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	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		
	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			
		 aa		
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes" has it filed a Form 720 to report these payments? If "No" provide an explanation in Schedule O	14h		

Part VI 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.

Se	ection A. Governing Body and Management			
			Yes	No
1 a	Enter the number of voting members of the governing body at the end of the tax year			
	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 other officer, director, trustee, or key employee?	2		Νo
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	Yes	
_	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	٣	1 00	
	more members of the governing body?	7a		Νo
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	Yes	
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 R	evenu	ıe Cod	e.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Νo
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?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		No
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a				
h	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
U	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a 12b	Yes	No
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give		Yes	No
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		No
c	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b 12c	Yes	No
c 13	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b 12c 13	Yes Yes	No
c 13 14	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b 12c 13	Yes Yes	No
c 13 14 15	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b 12c 13 14	Yes Yes Yes	No
c 13 14 15	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b 12c 13 14	Yes Yes Yes	
c 13 14 15 a b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b 12c 13 14	Yes Yes Yes	
c 13 14 15 a b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b 12c 13 14 15a 15b	Yes Yes Yes	No
c 13 14 15 a b	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	12b 12c 13 14 15a 15b	Yes Yes Yes	No
c 13 14 15 a b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b 12c 13 14 15a 15b	Yes Yes Yes	No

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of

State the name, physical address, and telephone number of the person who possesses the books and records of the organization

interest policy, and financial statements available to the public during the tax year

►ANTHONY SIMONETTA 1500 MARKET ST SUITE 2600 WEST

Philadelphia, PA 19102 (215) 496-8122

Form 990	(2013)	
----------	--------	--

_				_
D	-	α	Δ	4
г	a	ч	_	•

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

Check if Schedule O contains a response or note to any line in this Part VII

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

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

List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter - 0 - in columns (D), (E), and (F) if no compensation was paid

◆ List all of the organization's current key employees, if any See instructions for definition of "key employee"

List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations

List all of the organization's former officers, key employees, 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 organizations below dotted line)	more t	han o	one l both	box, an o	heck sofficer (stee) Highest compensated	Former	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations

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

	(A) Name and Title	(B) Average hours per week (list any hours	A verage Position (do not check more than one box, unless person is both an officer and a director/trustee)							table sation the tion (W-	(E) Reportable compensation from related organizations (W-		(F) Estima amount o compens from t	ted f other ation
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099	-MISC)	2/1099-MISC)	0	rganizati relate organiza	ed
						-								
						-								
1b	Sub-Total				•			•						
c d	Total from continuation sheet Total (add lines 1b and 1c) .			`	٠.	٠.		Þ		2,393,088		0		371,241
2	Total number of individuals (in \$100,000 of reportable compe	_					d abov	e) w	ho receive	d more th	nan	•		
													Yes	No
3	Did the organization list any fo					, key	emplo	yee,	, or highes	t compen	sated employee			
4	on line 1a? <i>If "Yes," complete S</i> For any individual listed on line					mpe	nsatio	• nand	d other cou	• • mpensatio	on from the	3		No
	organization and related organ												V	
5	Did any person listed on line 1	a receive or ac	crue coi	npen	- satı	on fr	om an	- y unr	elated org	anızatıon	or individual for	4	Yes	
	services rendered to the organ	nızatıon? <i>If "Ye</i> s	," compi	ete S	chec	lule 3	for su	ch pe	erson .			5		No
Se	ction B. Independent Co	ntractors												
1	Complete this table for your five compensation from the organization												tax year	
	N	(A) lame and business	address						_	Des	(B) cription of services		(C Comper	
	Thornton LLP, 2001 Market Street Phaphix Inc, 201 Fulton Street RIVERTO		.03							Audit & Tax	(-		394,963 236,008
	Egg. 2007 Tation Street MIYERTO											\downarrow		
	Total number of independent co \$100,000 of compensation fron			not	lımıt	ed t	o thos	e list	ed above)	who rece	ived more than			

		Check if Sched	ule O contains a respoi	nse or note to any lu	ne in this Part VIII	<u></u>	<u> </u>	<u> </u>
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
0	1a	Federated cam	paigns 1a					
nts int	ь	Membership du	ies 1b					
Contributions, Gifts, Grants and Other Similar Amounts								
s, (An	С	_						
Siffe Iar	d	Related organiz	zations 1d					
s, (mi	е	Government grant	s (contributions) 1e	887,371				
ion I Si	f	All other contribution	ons, gifts, grants, and 1f					i i
uti hei		sımılar amounts no						
ţ <u>i</u>	g	Noncash contributi 1a-1f \$	ons included in lines					
Cont and	h	Total. Add lines	s 1 a - 1 f		887,371			
				Business Code				
ше	2a	BELOW MARKET R	ΛΤΕ	900099	4,466,747	4 466 747		
e.Ke						4,466,747		
選	b	CONTRACT & GRA		900099	3,007,611	3,007,611		
Program Serwce Revenue	С	LOAN FEES		900099	410,147	410,147		
	d	SOFTWARE DEVEL		900099	544,256	544,256		
E	e	PROPERTY MANAG		900099	5,967,643	5,967,643		ļ
ыDo	f	All other progra	am service revenue					
Š	g	Total. Add lines	s 2a-2f		14,396,404			
	3		ome (including dividen					
			aramounts)		1,664			1,664
	4		stment of tax-exempt bond	proceeds -	0			
	5	Royalties .			0			
		Cuara manta	(ı) Real	(II) Personal				
	6a	Gross rents Less rental						
	ן ו	expenses		_				
	С	Rental income or (loss)	0	0				
	d	Net rental inco	me or (loss)		0			
			(ı) Securities	(II) O ther				
	7a	Gross amount from sales of						
		assets other than inventory						
	ь	Less cost or						
		other basis and sales expenses						
	С	Gain or (loss)						
	d	Net gain or (los	ss)		0			
45	8a	Gross income fevents (not inc	from fundraising					
υπé		\$	ruumg					
Other Revenue		of contributions	s reported on line 1c)					
Ä		See Part IV, lir	ne 18 a					
ier	ь	Loss direct ov	penses b					
₹	c		(loss) from fundraising		0			
_			from gaming activities					
		See Part IV, lir	ne 19					
			а					
	Ь		penses b					
	С		(loss) from gamıng actı	vities . ⊨-	0			ļ
	10a	Gross sales of returns and allo						
		recurres and all	a a					
	ь	Less costofa	oods sold b					
			(loss) from sales of inv	entory 🛌	o			
		Miscellaneou	s Revenue	Business Code				
	11a							
	ь							
	С		_					
	d	All other reven	ue					
	e		s 11a-11d	🕨				
	12		See Instructions .	-	0			
	**	rocar revenué.	see instructions .	· · · · •	15,285,439	14,396,404		1,664

Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) .マ Check if Schedule O contains a response or note to any line in this Part IX (D) (B) Do not include amounts reported on lines 6b, (A) Program service Management and Fundraising 7b. 8b. 9b. and 10b of Part VIII. Total expenses expenses general expenses expenses Grants and other assistance to governments and organizations in the United States See Part IV, line 21 193,528 193,528 Grants and other assistance to individuals in the United States See Part IV, line 22 0 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16 0 Benefits paid to or for members 0 Compensation of current officers, directors, trustees, and 2,008,524 760,639 1,247,885 key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . Other salaries and wages 3,784,255 2,283,635 1,500,620 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits 1,758,616 773,193 985,423 10 389,368 213,081 176,287 11 Fees for services (non-employees) Management O 526,443 498,658 27,785 Legal 278,108 93,247 184,861 96,000 48,375 47,625 Professional fundraising services See Part IV, line 17 0 Investment management fees 0 Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on 98,429 98,429 Schedule O) Advertising and promotion . . 0 12 13 Office expenses 0 14 Information technology . . 0 15 0 Royalties . . 489,556 244,778 244,778 16 Occupancy **17** 0 Travel 18 Payments of travel or entertainment expenses for any federal, 0 state, or local public officials 0 19 Conferences, conventions, and meetings . . . 20 1,420 1,420 Payments to affiliates 21 O 22 Depreciation, depletion, and amortization . 79,323 79,323 23 719,923 643,048 76,875 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) OTHER EXPENSES 1,067,867 405,273 662,594 b DIRECT CONTRACT EXPENSES 4,347,644 4,347,644 C d e All other expenses Total functional expenses. Add lines 1 through 24e 10,976,070 25 15.839.004 4,862,934 0 Joint costs. Complete this line only if the organization 26 reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► [if following SOP 98-2 (ASC 958-720)

Form 990 (2013)

Part X Balance Sheet

Par	't X	Balance Sheet Check if Schedule O contains a response or note to any line in	this Pa	ırt X			
		,			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing			21,660,064	1	13,092,889
	2	Savings and temporary cash investments			0	2	0
	3	Pledges and grants receivable, net			0	3	0
	4	Accounts receivable, net		•	22,372,872	4	1,568,137
	5	Loans and other receivables from current and former officers, of employees, and highest compensated employees. Complete Paschedule L	art II d	of	0	5	o
its	6	Loans and other receivables from other disqualified persons (a $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and and sponsoring organizations of section $501(c)(9)$ voluntary e organizations (see instructions) Complete Part II of Schedule	contrib mploy	outing employers	0	6	0
Assets	7	Notes and loans receivable, net			0	7	909,000
4	8	Inventories for sale or use			0	8	0
	9	Prepaid expenses and deferred charges			34,990	9	166,851
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	1	1,771,242	,		100,001
	b	Less accumulated depreciation	10b	1,654,583	159,582	10c	116,659
	11	Investments—publicly traded securities		<u> </u>	0	11	0
	12	Investments—other securities See Part IV, line 11			0	12	0
	13	Investments—program-related See Part IV, line 11			0	13	0
	14	Intangible assets			0	14	0
	15	Other assets See Part IV, line 11			19,043,521	15	67,825,378
	16	Total assets. Add lines 1 through 15 (must equal line 34) .			63,271,029	16	83,678,914
	17	Accounts payable and accrued expenses			9,520,971	17	1,266,255
	18	Grants payable			0	18	0
	19	Deferred revenue			6,593,060	19	6,895,729
	20	Tax-exempt bond liabilities			0	20	0
	21	Escrow or custodial account liability Complete Part IV of Scho			253,622	21	258,622
Liabilities	22	Loans and other payables to current and former officers, direct key employees, highest compensated employees, and disquali	ors, tr		,		<u> </u>
ap		persons Complete Part II of Schedule L			0	22	0
	23	Secured mortgages and notes payable to unrelated third partie	s.		0	23	0
	24	Unsecured notes and loans payable to unrelated third parties			0	24	909,000
	25	Other liabilities (including federal income tax, payables to rela and other liabilities not included on lines 17-24) Complete Pa	rt X of		42,843,496	25	65,555,026
	26	Total liabilities. Add lines 17 through 25			59,211,149	26	74,884,632
es e		Organizations that follow SFAS 117 (ASC 958), check here ► lines 27 through 29, and lines 33 and 34.					<u> </u>
anc	27	Unrestricted net assets			4,059,880	27	8,794,282
<u> </u>	28	Temporarily restricted net assets			0	28	0
ē	29	Permanently restricted net assets			0	29	0
r Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check h complete lines 30 through 34.	ere ►	and			
S 01	30	Capital stock or trust principal, or current funds				30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other	funds			32	
Net	33	Total net assets or fund balances			4,059,880	33	8,794,282
~	34	Total liabilities and net assets/fund balances			63,271,029	34	83,678,914
			_				Form 990 (2013)

Par	t XI Reconcilliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI		•		.
1	Total revenue (must equal Part VIII, column (A), line 12)	1		15,2	285,439
2	Total expenses (must equal Part IX, column (A), line 25)	2		15,8	39,004
3	Revenue less expenses Subtract line 2 from line 1	3		- 5	553,565
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		4,0	59,880
5	Net unrealized gains (losses) on investments	5			
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		5,2	287,967
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		8,7	794,282
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 revie a separate basis, consolidated basis, or both	wed on			
	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 sepa basis, consolidated basis, or both	rate			
	☐ Separate basis ☐ Both consolidated and separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight audit, review, or compilation of its financial statements and selection of an independent accountant?	nt of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain i Schedule O	n			
3a	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?	e	3a	Yes	
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	Yes	

Software ID: **Software Version:**

EIN: 23-6050858

Name: Philadelphia Industrial Development Corporation

(A) Name and Tıtle	(B) A verage hours per week (list any hours for related	Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and
	organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			related organizations
M Walter D'Alessio	1 5	x		×				0	0	
Chairman Robert C Wonderling	6 0									
Vice Chairman	6.0	х		Х				0	0	
Edward H Morris	1 5	х		Х				0	0	
Treasurer	6 0							Ů	0	
David E Beavers	1 5	x		x				0	0	
Secretary Andrea Allon	6 0									
Director	6 0	Х						0	0	
Jeannie L Blackwell	1 5	×						0	0	
Director	6 0							Ů	0	
Audrey Bronson	1 5	х						0	0	
Director Craig Carnaroli	6 0									
Director	6.0	Х						0	0	
Fred Cosenza	1 5	х						0	0	
Director	6 0							Ů	0	
Rob Dubow	1 5	х						0	0	
Director Alan Greenberger	6 0									
Director	6 0	Х						0	0	
Frank Jıruska Jr	1 5	×						0	0	
Director	6 0							Ů		
Richard Negrin	1 5	х						0	0	
Director Michael A Nutter	6 0									
Director	6 0	X						0	0	
Salvatore J Patti	1 5	×						0	0	
Director Angelo R Perryman	6.0								-	
,	1 5	х						0	0	
Director Michael Rashid	6 0									
Director	6 0	Х						0	0	
William R Sautter	1 5	x						0	0	
Director Shelley R Smith	6 0									
Director	60	х						0	0	
Joseph H Weiss	1 5							_	_	
Director	6 0	Х						0	0	
Amheenah Young	1 5	×						0	0	
Director Christina Cavalieri	6 0									
Director	60	x						0	0	
Tina Malek	1 5							_	_	
Director	6 0	Х						0	0	
Leslie Anne Miller	1 5	х						0	0	
Director Bob Moul	6 0			_			\vdash			
Director	60	х						0	0	
55001		L			1			I	<u> </u>	1

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Inde	pendent Cor	ntracto	rs					1	I	
(A) Name and Title	(B) A verage hours per week (list any hours for related	Posit more th persoi and a	ion (d nan o n is b	ne booth a	ox, u an of	inless fficer tee)		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated	Former	2/1033 11130)	2/1033 14130)	related organizations
Thomas Queenan	1 5	x						0	0	
Director guillermos salas jr	6 0									
		×						0	0	
director(term end aug 2013) kenneth lawrence	6 0 1 5									
		×						0	0	
John Grady	6 0 33 5									
President	4 0			Х				265,740	0	28,071
anthony simonetta	33 5									
Senior Vice President	4 0			Х				201,052	0	41,677
sam rhoads	33 5									
Senior Vice President	4 0			Х				205,000	0	14,696
Anne Nevins	33 5									
Senior Vice President	4 0			Х				157,559	0	20,929
Paul Deegan	33 5								_	
Senior Vice President	4 0			Х				154,466	0	19,794
Terry Demusis	33 5			v				156 106		0.020
Snr Vice Pres & Asst Secretary	4 0			Х				156,186	0	9,820
Joseph Mee	33 5							136,908	0	27.405
Assistant Secretary	4 0			Х				136,908	0	27,485
Williams J Agate Jr	33 5			х				165,464	0	49,275
Senior Vice President	4 0			^				105,404	0	49,273
Thomas Dalfo	33 5			х				150,150	0	32,935
senior Vice President	4 0							·		
Mary Corcoran	33 5			х				81,835		9,606
Assistant Secretary Ilene burak	4 0 33 5									
				Х				130,917	0	27,918
Senior vice president Carole Bennis	4 0 33 5	-								
Vice President	4 0					Х		130,000	0	23,369
Maria Hamilton	33 5									
Vice President	4 0					X		119,000		18,022
Carol deFries	33 5									
Vice President	4 0					X		117,000		25,426
AVRUM KANTOR	33 5					.				
VICE PRESIDENT	4 0					X		117,037		21,947
MARK SELTZER	33 5					,		1017-		27:
VICE PRESIDENT	4 0					X		104,774		271
						•		•		

SCHEDULE A (Form 990 or 990-EZ)

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.

2013

Open to Public

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization PHILADELPHIA INDUSTRIAL DEVELOPMENT

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

w.irs.gov/form990. Inspection
Employer identification number

COI	RPOR	ATION								23	-6050858
Pa	rt I	Reason for Pub	lic Charity Status	s (All organizations mu	st con	nplete	this pa	art.) Se	e instr	uctions	B.
The	orga	nization is not a priv	ate foundation be	cause it is: (For lines 1 th	rough	11, che	eck only	one bo	x.)		
1		A church, convention	on of churches, or	association of churches	describ	ed in s	ection	170(b)(1)(A)(i)	-	
2		A school described	in section 170(b)	(1)(A)(ii). (Attach Schedul	e E.)						
3		A hospital or a coo	perative hospital s	ervice organization descri	ibed ın	sectio	n 170(t)(1)(A)	(iii).		
4		A medical researc	h organi <mark>zation</mark> op	erated in conjunction wi	th a h	ospita	l descr	ibed in	sectio	n 170(l	b)(1)(A)(iii). Enter the
		hospital's name, cit									
5		An organization op	erated for the be	nefit of a college or unive	ersity	owned	or ope	erated b	oy a go	vernme	ental unit described in
		section 170(b)(1)(A		•							
6	Ш		•	or governmental unit des							
7		-	•	es a substantial part of it	s supp	ort fro	m a go	vernme	ental ur	it or fro	om the general public
		described in sectio		•	_						
8	—	-		on 170(b)(1)(A)(vi). (Com	-						
9	X	-	·	es: (1) more than 331/3%							
		-		exempt functions - subj			-				
		•		ome and unrelated busin				-		1 511	tax) from businesses
40				ne 30, 1975. See section ted exclusively to test for	-		-		•	,	
10 11	\vdash	•		rated exclusively to test for the	•	•				•	or to carry out the
••	Ш	-	•	ipported organizations de			•				•
				es the type of supporting					•		
		a Type I		c Type III-Function	-						unctionally integrated
е		··		e organization is not conf	•	-			• •		• •
		•	•	other than one or more			•	-	-		
		or section 509(a)(2	-	•				Ū			(/, /
f			•	n determination from the	e IRS	that it	ıs a T	уре І, Т	ype II,	or Typ	e III supporting
		organization, check	this box								
g		Since August 17, 2	006, has the orga	nization accepted any gift	or co	ntributi	ion from	any of	the		
		following persons?									
				tly controls, either alone							
				the supported organization							
				scribed in (i) above?							
		• •		son described in (i) or (ii) a							11g(III)
h			-	ut the supported organiza	ation(s)).					Т
		ame of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9	(iv)	is the zation in		ou notify anization		s the zation in	(vii) Amount of monetary support
		<u></u>		above or IRC section	col (i)	listed in overning	ın col (l) of your	col (I) o	rganızed	зарран
				(see instructions))	Yes	ment?	Yes	oort?	Yes	US? No	
					103	NO	165	NO	165	NO	
(A)											
(B)											
(C)											
(D)											
(E)											_
Tota	al										

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

Schedule A (Form 990 or 990-EZ) 2013

Schedule A (Form 990 or 990-EZ) 2013

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2009 **(b)** 2010 (c) 2011 (d) 2012 (e) 2013 (f) Total grants, contributions, membership fees received (Do not include any "unusual grants") Tax revenues levied for organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3..... The portion of total contributions by each person (other than governmental publicly unit supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)..... Public support. Subtract line 5 from line 4 Section B. Total Support **(b)** 2010 (f) Total Calendar year (or fiscal year beginning in) (a) 2009 (c) 2011 (d) 2012 (e) 2013 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar Net income from unrelated business activities, whether or not the business 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 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f)) % % 16a 331/3% support test - 2013. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization b 331/3% support test - 2012. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, 17a 10%-facts-and-circumstances test - 2013. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10%-facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

Schedule A (Form 990 or 990-EZ) 2013

Page 3 Schedule A (Form 990 or 990-EZ) 2013

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.)

500	tion A. Public Support	any ander the	todio lidica po	iow, picase oc	inploto i arcii	· <i>)</i>	
		(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
_	ndar year (or fiscal year beginning in)	(4) 2000	(6) 2010	(0) 2011	(d) 2012	(6) 2010	(i) Total
1	, , ,	2 226 254	5 000 500	2 401 405	624 417	007 271	12 102 007
	received (Do not include any "unusual grants ")	3,306,254.	5,083,590.	3,491,405.	634,417.	887,371.	13,403,037.
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	10,403,582.	16,328,256.	15,505,343.	13,648,798.	14,396,404.	70,282,383.
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						0
4	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf						0
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						0
6	Total. Add lines 1 through 5	13,709,836.	21,411,846.	18,996,748.	14,283,215.	15,283,775.	83,685,420.
7 a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons						o
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 amount on line 13 for the year	6,939,425.	12,131,651.	11,547,628.	10,541,212.	10,727,978.	51,887,894.
С	Add lines 7a and 7b	6,939,425.	12,131,651.	11,547,628.	10,541,212.	10,727,978.	51,887,894.
	Public support (Subtract line 7c from						
	line 6)						31,797,526.
Sec	tion B. Total Support		'	1	-	•	
	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9	Amounts from line 6	13,709,836.	21,411,846.	18,996,748.	14,283,215.	15,283,775.	83,685,420.
	Gross income from interest, dividends,		, ,		. ,	, ,	• •
	payments received on securities loans,						
	rents, royalties and income from similar sources	42,338.	88,259.	31,848.	8,419.	1,664.	172,528.
h	Unrelated business taxable income (less	32,0001	55,255	02,0101	0,1200	2,000	212,0201
_	section 511 taxes) from businesses						
	acquired after June 30, 1975						0
_		42,338.	88,259.	31 848	8,419.	1,664.	172 520
	Add lines 10a and 10b	42,338.	88,259.	31,848.	8,419.	1,004.	172,528.
11	Net income from unrelated business activities not included in line 10b,						
	whether or not the business is regularly						
	carried on						0
12	Other income Do not include gain or						
	loss from the sale of capital assets						
40	(Explain in Part IV.)					+	
13	Total support. (Add lines 9, 10c, 11,	40 === :=:	04 -05	40 000	44 004	45 202 :	
	and 12)	13,752,174.	21,500,105.	19,028,596.	14,291,634.	15,285,439.	83,857,948.
14	First five years. If the Form 990 is for	~			•	•	~
	organization, check this box and stop here.			· · · · · · · · · · · ·	<u> </u>		🕨 📗
	tion C. Computation of Public Sup	•	_	(5)			27 020
15	Public support percentage for 2013 (line 8,	, column (f) divide	ed by line 13, colum	in (f)) A R T. 한 『다리스하	. ኳቴሊኒኒቴሪጥ	15	37.92%
16	Public support percentage from 2012 Sche	edule A, Part III, lin	ne 15 . ↑ \ ↑ † † †	יהיה" הניהי	. v. A. v. v. i	16	%_
Sec	tion D. Computation of Investmer	nt Income Per	centage				
17	Investment income percentage for 2013 (lin				44.444	17	.21%
18	Investment income percentage from 2012	Schedule A, Part	III, line 17 AVA	TTARTE OB	όν κεδόξ	48	%
19 a	331/3% support tests - 2013. If the org	ganization did no	ot check the box	on line 14, and	l line 15 is more	than 331/3%, a	
	17 is not more than 331/3%, check the	is box and sto p	here. The orga	ınızatıon qualıfıes	as a publicly s	supported organiz	ation ► X
b	331/3% support tests - 2012. If the orga	inization did not	check a box on l	ine 14 or line 19	a, and line 16 is	more than 331/3	%, and
	line 18 is not more than 331/3 %, check	this box and st	op here. The org	ganızatıon qualifie	es as a publicly :	supported organiz	ation ►
20	Private foundation. If the organization	did not check	a box on line 1	4, 19a, or 19b,	, check this box	k and see instru	ctions >

Part IV

Page 4

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).

PART III SUPPORT SCHEDULE

PURSUANT TO SECTION 1.509(A)-4 OF THE TREASURY REGULATIONS, A 501(C)(3) ORGANIZATION CAN BE THE SUPPORTING ORGANIZATION OF A 501(C)(4) ORGANIZATION PROVIDED THAT THE SUPPORTED ORGANIZATION MEETS THE REQUIREMENTS UNDER 509(A)(2). THE CORPORATION HAS PROVIDED SCHEDULE A FOR PIDC TO SUPPORT THE DETERMINATION THAT PIDC MEETS THE 509(A)(2) PUBLIC SUPPORT TEST.

DLN: 93493318037774

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 instruct	tions is at <u>www.irs.gov/form990</u> .			Inspect	ION	
Name of the organization Philadelphia Industrial Development			Emp	loyer identifica	tion numbe	r	
niladelphia Industrial i orporation	Development		23-	6050858			
	nizations Maintaining Donor Adv				. Complet	e ıf	th
organı	zation answered "Yes" to Form 990	•					
T - + -	at and at war a	(a) Donor advised funds		(b) Funds and	other accou	nts	
Total number a	at end of year atributions to (during year)						
33 3	nts from (during year)						
33 3 3	ue at end of year						
	zation inform all donors and donor advise	ore in writing that the assets held in do	nor advi	us a d			
funds are the	organization's property, subject to the or	ganization's exclusive legal control?			☐ Yes	Γ	No
used only for d	zation inform all grantees, donors, and d charitable purposes and not for the benef permissible private benefit?				┌ Yes	Г	No
rt III Conse	ervation Easements. Complete if	the organization answered "Yes"	to Forn	n 990, Part IV	/, line 7.		
Purpose(s) of	conservation easements held by the org	anızatıon (check all that apply)					
☐ Preservati	on of land for public use (e g , recreation	·					
Protection	of natural habitat	Preservation of a	certifie	d historic struc	ture		
☐ Preservati	on of open space						
•	s 2a through 2d if the organization held a	a qualified conservation contribution in	the forn	n of a conserva	tion		
easement on t	the last day of the tax year			Held at the	End of the	Vas	
Total number	of conservation easements		2a	neid at the	End of the	rea	<u> </u>
	restricted by conservation easements		2b				
_	nservation easements on a certified histo	oric structure included in (a)	2c				
	nservation easements included in (c) acc	, ,					
	cure listed in the National Register	,	2d				
Number of con	nservation easements modified, transferi	red, released, extinguished, or terminat	ed by th	ne organization	during		
the tax year 🕨	·						
Number of sta	tes where property subject to conservat	ion easement is located ▶					
	nization have a written policy regarding to fixe the conservation easements it holds?	the periodic monitoring, inspection, han	ıdlıng of	violations, and	┌ Yes	Г	No
Staff and volur	nteer hours devoted to monitoring, inspe	cting, and enforcing conservation ease	ments o	luring the year			
_	penses incurred in monitoring, inspecting	g, and enforcing conservation easement	s durin	g the year			
►\$	nservation easement reported on line 2(d) above cation the manufactor of	ation 1 -	70/h)/4\/D\/.\			
	nservation easement reported on line 2(70(h)(4)(B)(ii)?	a, above satisty the requirements of se	CHOIL I	/ U(II)(#)(I)	☐ Yes	Γ	No
In Part XIII, d balance sheet	describe how the organization reports col , and include, if applicable, the text of th on's accounting for conservation easeme	e footnote to the organization's financia					
t IIII Organ	nizations Maintaining Collection lete if the organization answered "Y	s of Art, Historical Treasures,	or Ot	her Similar	Assets.		
If the organiza works of art, h	ation elected, as permitted under SFAS 1 istorical treasures, or other similar asse de, in Part XIII, the text of the footnote t	.16 (ASC 958), not to report in its reve	or rese	arch in furthera			
If the organiza works of art, h	ation elected, as permitted under SFAS 1 istorical treasures, or other similar asse de the following amounts relating to thes	.16 (ASC 958), to report in its revenue	statem	ent and balanc		ıc	
(i) Revenues	included in Form 990, Part VIII, line 1			► \$			_
	cluded in Form 990, Part X			. <u></u>			
If the organiza	ation received or held works of art, histor ation received or held works of art, histor ants required to be reported under SFAS			cial gain, provid	de the		
_	uded in Form 990, Part VIII, line 1			⊫- ⊄			
Assets include	ed ın Form 990, Part X			▶ \$			

Part	••• Organizations Maintaining Col	llections of Art,	, Hist	tori	cal T	<u>reasu</u>	res, or (<u> Othe</u>	r Similar <i>i</i>	sse	ts (co.	<u>ntınued)</u>
3	Using the organization's acquisition, accessi collection items (check all that apply)	on, and other record	ds, ch	eck	any of	the follo	owing that	are a	sıgnıfıcant u	se of	ıts	
а	Public exhibition		d	Γ	Loan	or exch	nange prog	ırams				
b	Scholarly research		e	Γ	Othe	r						
С	Preservation for future generations											
4	Provide a description of the organization's co Part XIII	llections and explai	n how	v the	y furth	er the o	rganızatıo	n's ex	empt purpos	e ın		
5	During the year, did the organization solicit o assets to be sold to raise funds rather than t	o be maintained as	part o	f the	organ	ızatıon':	s collectio	n?			Yes	┌ No
Par	Escrow and Custodial Arrange Part IV, line 9, or reported an am						answere	ed "Y	es" to Form	990	,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ian or other interme	dıary	for c	ontribi	utions o	r other as	setsı	not	Γ,	Yes	√ No
b	If "Yes," explain the arrangement in Part XII $$	I and complete the	follow	/ıng t	able							
										\ mou	nt	
С	Beginning balance							1c				
d	Additions during the year							1d				
e	Distributions during the year							1e				
f	Ending balance							1f				
2a	Did the organization include an amount on Fo	rm 990, Part X, line	21?							┏,	Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I Check here if the	expla	natı	on has	been p	rovided in	Part	XIII			✓
Pai	rt V Endowment Funds. Complete i	f the organization	ans	wer	ed "Ye							
		(a)Current year	(b)	Prior	year	b (c) Tv	vo years bad	k (d)	Three years bac	k (e)	Four ye	ars 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 curr	ent year end balanc	e (line	e 1 g	, colun	nn (a)) h	neld as					
а	Board designated or quasi-endowment 🕨											
b	Permanent endowment 🕒											
С	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c shou	ıld equal 100%										
За	Are there endowment funds not in the posses	·	ition t	hat a	are hel	d and a	dmınıstere	ed for	the			
	organization by	_							_		Yes	No
	(i) unrelated organizations			•					<u> </u>	a(i)		
	(ii) related organizations							•	<u> 3</u>	a(ii)		
ь 4	If "Yes" to 3a(II), are the related organization Describe in Part XIII the intended uses of th	<u>=</u>								3b		
	t VI Land, Buildings, and Equipme					n answ	rered 'Ye	s' to	Form 990	Part	TV lır	ne
1 (3)	11a. See Form 990, Part X, line 1		110 01	gai	nzacio	ii ansi	rerea re	3 (0	101111 330,	uit	1 7 , 111	
	Description of property				o) Cost o	or other estment)	(b)Cost or basis (ot		(c) Accumula depreciatio		(d) Bo	ok value
1a	_and											
b I	Buildings											
	_easehold improvements		•				62	1,387	62:	.,387		0
	Equipment		•				57	2,445	48	,707		116,659
е (Other			1			I 57	7,410	l 57	,410		0
	I. Add lines 1a through 1e (Column (d) must ed									, 110		116,659

See Form 990, Part X, line 12. (a) Description of security or category	(b)Book value	(c) Method of v	
(including name of security)		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)	F		
Part VIII Investments—Program Related. C	Complete if the organization	on answered 'Yes' to Fo	orm 990, Part IV, line 11
See Form 990, Part X, line 13. (a) Description of investment	(b) Rook value	(c) Method of v	aluation
(a) Description of investment	(b) Book value	Cost or end-of-year	
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	F		
Part IX Other Assets. Complete if the organizati	on answered 'Yes' to Form 99	0, Part IV, line 11d See	Form 990, Part X, line 15
(a) Desc	ription		(b) Book value
(1) DUE FROM RELATED PARTIES			64,001,30
(2) DUE FROM AFFILIATED PARTIES			3,824,07
Total. (Column (b) must equal Form 990, Part X, col.(B) line	15.)		67,825,37
Part X Other Liabilities. Complete if the org			
Form 990, Part X, line 25.	1	Т	
1 (a) Description of liability	(b) Book value		
Federal income taxes	0		
DUE TO RELATED PARTIES	60,214,495		
ACCRUED POST RETIREMNT BENEFITS	3,401,319	-	
DUE TO OTHER AGENCIES	1,340,744	-	
DUE TO AFFILIATE ENTITIES	598,468	-	
]	
		1	
	i e	i .	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	► 65,555,026		

Part		evenue per Audited Financial Stat wered 'Yes' to Form 990, Part IV, line 1		ts With	Revenue p	er R	eturn Complete If
1		er support per audited financial statements				1	15,285,439
2	Amounts included on line 1 bi	ut not on Form 990, Part VIII, line 12					
а	Net unrealized gains on inves	tments	2a				
b	Donated services and use of t	acılıtıes	2b				
C	Recoveries of prior year grant	s	2c				
d	Other (Describe in Part XIII		2d				
e	Add lines 2a through 2d					2e	
3	Subtract line 2e from line 1 .					3	15,285,439
4	A mounts included on Form 99	0, Part VIII, line 12, but not on line 1					
а	Investment expenses not inc	uded on Form 990, Part VIII, line 7b .	4a				
b	Other (Describe in Part XIII)		4b				
С	Add lines 4a and 4b					4c	
5	Total revenue Add lines 3 an	d 4c. (This must equal Form 990, Part I, line	12)			5	15,285,439
Part		xpenses per Audited Financial Sta		nts Witl	1 Expenses	s per	Return. Complete
		swered 'Yes' to Form 990, Part IV, line				1	T
1	·	r audited financial statements				1	10,551,037
2		t not on Form 990, Part IX, line 25		i			
а		acilities	2a			_	
b	Prior year adjustments		2b			_	
С	Other losses		2c				
d	Other (Describe in Part XIII)		2d		-5,287,967		
e	Add lines 2a through 2d					2e	-5,287,967
3	Subtract line ${f 2e}$ from line ${f 1}$.					3	15,839,004
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	
5	Total expenses Add lines 3 a	nd 4c. (This must equal Form 990, Part I, line	18)			5	15,839,004
Part	XIII Supplemental In	formation					
Part \		Part II, lines 3, 5, and 9, Part III, lines 1a a , lines 2d and 4b, and Part XII, lines 2d and					de any additional
	Return Reference	Explanation					
Part I\	/, Line 2a	The Escrow account represents interest ea on loans managed by PIDC	rned th	nat is paya	able to the De	laware	River Port Authority
PART	X, LINE 2	Philadelphia Industrial Development Corpo	ration	(PIDC) ar	nd its affiliates	s, whic	h include PIDC,

Return Reference	Explanation
Part IV, Line 2a	The Escrow account represents interest earned that is payable to the Delaware River Port Authority on loans managed by PIDC
PART X, LINE 2	Philadelphia Industrial Development Corporation (PIDC) and its affiliates, which include PIDC, present combined financial statements. The combined financial statements includes the assessment for Accounting for Uncertainty in Income Taxes, which requires that a tax position be recognized or derecognized based on a "more likely than not" threshold. For tax positions meeting the more likely than not threshold, the amount recognized in the combined financial statements is the largest benefit that has a greater than 50 percent likelihood of being realized upon ultimate settlement with the relevant taxing authority. Management believes there are no uncertain tax positions for PIDC, as such, no provision is recorded in the combined statements of activities. PIDC is required to file tax returns with the Internal Revenue Service (IRS). Income tax returns are subject to examination by the IRS for a period of three years. While no income tax returns are currently being examined by the IRS, tax years since 2011 remain open.
Part XII, Line 2d	The change in pension and postretirement benefit other than net periodic benefit cost was (\$5,287,967) at December 31, 2013

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

Schedule D (Form 990) 2013

Schedule I (Form 990)

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.

Open to Public Attach to Form 990

Department of the Treasury

Name of the organization		ation about Schedule 1 (Form 990) and its inst	Tuctions is at <u>www.irs</u>	<u>gov / 101 111 990</u> .	Employer identifi	cation number
Philadelphia Industrial Developi Corporation						23-6050858	
	nation on Grants						
 Does the organization mai the selection criteria used Describe in Part IV the or 	d to award the grants og ganization's procedure	r assistance? es for monitoring the use	of grant funds in the l	Jnited States			√ Yes
		Governments and ecipient that receive					"Yes" 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 grant or assistance
(1) CRANE ARTS LLC 1400 N AMERICAN ST PHILADELPHIA,PA 19122	26-2877217		14,400				Econ Development
(2) DELAWARE RIVER WATERFRONT CORP 121 N COLUMBUS BLVD PHILADELPHIA,PA 19106	23-1734559	501 (c)(3)	47,896				Econ Development
(3) PENNSYLVANIA CONVENTION CENTER 1101 ARCH STREET PHILADELPHIA,PA 19107	23-0969325	501 (c)(6)	100,000				Econ Development
(4) YALE REALTY CORPORATION 7300 CITY AVE PHILADELPHIA,PA 19151	23-1628267		5,042				Econ Development

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . .

DLN: 93493318037774

OMB No 1545-0047

П	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 assistan		lumber of cipients	(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
Part IV Supplemental 1	Information.	Provide the inf	ormation required in Pa	art I, line 2, Part III, col	umn (b), and any other a	dditional information.

Supplemental I	normation. Frovide the information required in Fart 1, line 2, Fart 111, column (b), and any other additional information.
Return Reference	Explanation
•	PIDC has controls in place to ensure grant proceeds will be used and distributed in accordance with the terms of the grant agreement. A review of grant proceeds is done during the application process, through which, grantees request funds. Management reviews the documentation provided by grantees.
	to ensure the request meets the criteria of the grant agreement

Schedule I (Form 990) 2013

DLN: 93493318037774

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** ► Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

► Attach to Form 990. ► See separate instructions.

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

Open to Public Inspection

Name of the organization Philadelphia Industrial Development Corporation

Employer identification number

23-6050858

Pai	t I Questions Regarding Compensation					
					Yes	No
1a	Check the appropriate box(es) if the organization provi 990, Part VII, Section A, line 1a Complete Part III t					
	First-class or charter travel	Γ	Housing allowance or residence for personal use			
	Travel for companions	Γ	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Γ	Health or social club dues or initiation fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organishment or provision of all of the expenses des			1b		
2	Did the organization require substantiation prior to rei directors, trustees, officers, including the CEO/Execu			2		
3	Indicate which, if any, of the following the filing organization's CEO/Executive Director Check all tha used by a related organization to establish compensation	t appl	y Do not check any boxes for methods			
	✓ Compensation committee	\sqcap	Written employment contract			
	☐ Independent compensation consultant	Γ	Compensation survey or study			
	Form 990 of other organizations	<u> </u>	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Pa or a related organization	art VII	I, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control pa	aymer	nt?	4a		Νo
b	Participate in, or receive payment from, a supplement	al non	nqualified retirement plan?	4b		Νo
c	Participate in, or receive payment from, an equity-bas	sed co	mpensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and prov	vide th	ne applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must	t com	plete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, li compensation contingent on the revenues of	ıne 1 a	, did the organization pay or accrue any			
а	The organization?			5a		Νo
b	Any related organization?			5b		No
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in Form 990, Part VII, Section A, li compensation contingent on the net earnings of	ıne 1a	, did the organization pay or accrue any			
а	The organization?			6a		Νo
b	Any related organization?			6b		No
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A, li payments not described in lines 5 and 6? If "Yes," de			7	Yes	
8	Were any amounts reported in Form 990, Part VII, pa	ıd or a	accured pursuant to a contract that was			
	subject to the initial contract exception described in F					
	ın Part III			8		Νo
9	If "Yes" to line 8, did the organization also follow the r section 53 $4958-6(c)$?	rebutt	able presumption procedure described in Regulations	9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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

Note. The sum of columns (B)(1)-(111) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and	(D) Nontaxable	(E) Total of	(F) Compensation
	(i) Base compensation	(ii) Bonus & ıncentıve compensatıon	(iii) Other reportable compensation	other deferred compensation	benefits	columns (B)(ı)-(D)	reported as deferred in prior Form 990
See Additional Data Table							

Schedule J (Form 990) 2013

Part IIII Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II

Also complete this part for any additional information

Also complete this part for any auc	actional information
Return Reference	Explanation
Part I, Line 7	PIDC has established a Compensation Program to ensure the salaries and benefits paid to officers and employees is fair, competitive, and reflective of an employee's actual performance. The compensation structure embeds a risk based component that considers achievement of performance goals.
Part II, Column (C)	PIDC offers a defined benefit plan (the "Plan") to its employees Participants become eligible to receive retirement benefits the first month on or the next following attainment of age 60 and completion of 5 years of vesting services from the date they become eligible participants of the Plan The participant's benefit is equal to 2 0% of final average compensation multiplied by years of service (not in excess of 35 years), less 1 0% of the Social Security benefit multiplied by years of service (not in excess of 35 years). Pursuant to generally accepted accounting principles, management is required to determine the present value of the defined benefit plan liability, which considers various factors, including number of years until the participant's eligible retirement age, a discounted interest rate, and the expected return on plan assets. During 2013, the discounted interest rate assumption increased by 91 basis points, which reflected an improvement in the overall market conditions. In some cases, the increase in the discount rate resulted in a decrease of the present value of the defined benefit plan's liability from the prior year valuation, which is disclosed as \$0 in Schedule J, Part II, Column (C). However, the change determined by PIDC's actuary for some employees increased due to additional pay and or remaining years of service. The impact of the change in the present value of the defined benefit liability to an individual's deferred compensation is reflected in "retirement and other deferred compensation" in Schedule J, Part II, Column (c). The change in the present value of the defined benefit plan's liability does not correspond to the actual benefit due to the Plan participants that is based on the compensation structure and years of experience, for which there was no significant changes during 2013.

Schedule J (Form 990) 2013

Additional Data

Software ID:

Software Version:

EIN: 23-6050858

Name: Philadelphia Industrial Development

Corporation

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

i orini 990, Schedule 3, Pa	<u> </u>	ti Officers, birec	,tors, rrustees, Re	y Employees, and	Trigitest compen-	Satea Employees		
(A) Name		(B) Breakdown o	of W-2 and/or 1099-MIS	SC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation reported in prior Form
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation	compensation	benefits	(B)(ı)-(D)	990 or Form 990-EZ
John Grady President	(ı) (ıı)	· _	30,000	5,740 0	0 0	28,071 0	293,811	
anthony simonetta Senior Vice President	(I) (II)	'I	15,000	1,052 0	41,297 0	380 0	242,729 0	
sam rhoads Senior Vice President	(I) (II)	· •	15,000	0	0 0	14,696 0	219,696	
Anne Nevins Senior Vice President	(I) (II)		12,500	5 9 0	6,330 0	14,599 0	178,488 0	
Paul Deegan Senior Vice President	(I) (II)		7,000	5,736 0	0 0	19,794 0	174,260	
Terry Demusis Snr Vice Pres & Asst Secretary	(I) (II)		8,500	186 0	0	9,820 0	166,006	
Joseph Mee Assistant Secretary	(I) (II)		7,500 0	408 0	2,292 0	25,193 0	164,393 0	
Williams J Agate Jr Senior Vice President	(I) (II)	· I	10,000	464 0	24,051 0	25,224 0	214,739	
Carole Bennis Vice President	(I) (II)		6,000	0	23,026 0	343 0	153,369 0	
Thomas Dalfo senior Vice President	(ı) (ıı)	·	10,000	150 0	4,988 0	27,947 0	183,085	
ilene burak senior vice president	(I) (II)		5,800 0	117 0		27,918 0	158,835	

DLN: 93493318037774

Employer identification number

OMB No 1545-0047

Open to Public Inspection

Schedule L

(Form 990 or 990-EZ)

Name of the organization

Department of the Treasury Internal Revenue Service

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

Transactions with Interested Persons

► Attach to Form 990 or Form 990-EZ. ► See separate instructions. ▶Information about Schedule L (Form 990 or 990-EZ) and its instructions is at

www.irs.gov/form990.

Enter the amount of tax incurred by organization managers or disqualified persons during the year under section 4958 .						B) and section							40b	
Enter the amount of tax incurred by organization managers or disqualified persons during the year under section 4958														ecte
Enter the amount of tax incurred by organization managers or disqualified persons during the year under section 4958	<u> </u>	o or alb qualifica	,					(4)		01 114		·		No
Enter the amount of tax, if any, on line 2, above, reimbursed by the organization														
Enter the amount of tax, if any, on line 2, above, reimbursed by the organization														
Enter the amount of tax, if any, on line 2, above, reimbursed by the organization														
Enter the amount of tax, if any, on line 2, above, reimbursed by the organization														
Enter the amount of tax, if any, on line 2, above, reimbursed by the organization														
Enter the amount of tax, if any, on line 2, above, reimbursed by the organization														
Enter the amount of tax, if any, on line 2, above, reimbursed by the organization	Enterthe:	amount of tay in	curred by or	raanization r	managers or	disqualified ne	reone	during t	he ves	r unde	rsection			
Loans to and/or From Interested Persons. Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22 Name of terested Person with organization Purpose of loan or from the organization? To From Yes No Yes Yes No Ye			· · ·			uisquaiilleu pe		• • • •	iie yeai		> \$	'		
Loans to and/or From Interested Persons. Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22 Name of terested Person with organization Purpose of loan or from the organization? To From Yes No Yes Yes No Ye	3 Enterthe	amount of tax, if	any, on line	2, above, re	eımbursed by	the organizat	ion .				- \$			
Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22 Name of terested person (b) Purpose of with organization Purpose of or from the organization Purpose of or from the organization Organiz											•			
Organization reported an amount on Form 990, Part X, line 5, 6, or 22 On Name of terested person Name of terested person Note of terested person (a) Loan to or from the principal amount (b) Relationship between interested person and the principal amount (b) Relationship between interested person and the principal amount (c) Amount of assistance (d) Type of assistance (e) Purpose of assistance (f) Balance due due due due due due due due due du														
Name of terested person with organization person with organization person with organization person with organization person with organization? To From Prom Prom Prom Prom Prom Prom Prom P		•				•		38a, or	Form 9	90, Pa	art IV , li	ne 26,	or if the	
Relationship with organization with organization Purpose of loan organization? Purpose of assistance organization answered organization and the loan organization organization organization organization and the loan organization or									(a) In		(b)		(i)\\/r:	tton
person with organization organization? amount by board or committee? To From Yes No Yes No Yes I To From Yes No Yes No Yes I To From Yes No Yes I To F	nterested					1 ' '						ed		
To From Yes No Yes No Yes In Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. (e) Purpose of assistance person and the interested person and the interes	person		1 '			1 ' '				_	1			
To From Yes No Y		organızatıon									board			
To From Yes No Yes No Yes In Yes No Yes No Yes No Yes In Yes No Yes No Yes No Yes No Yes No Yes No Yes In Yes No Y														
Grants or Assistance Benefitting Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. (b) Relationship between person unterested person and the linterested person and				T .	T =	4			<u> </u>		_	1		Τ.,
Grants or Assistance Benefitting Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. (b) Relationship between person interested person and the content of assistance person interested person and the content of assistance person				1 10	FIOIII					l Ni-			res	N
Grants or Assistance Benefitting Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. (b) Relationship between person interested person and the line of interested persons.									Yes	No	res			
Grants or Assistance Benefitting Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. (b) Relationship between person interested person and the (c) A mount of assistance (d) Type of assistance (e) Purpose of assistance									Yes	No	res	110	_	
Grants or Assistance Benefitting Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. (b) Relationship between person interested person and the line of interested persons.									Yes	No	res		_	
Grants or Assistance Benefitting Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. (b) Relationship between person interested person and the line of interested persons.									Yes	No	res		- -	
Grants or Assistance Benefitting Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. (b) Relationship between person interested person and the line of interested persons.									Yes	No	res		_ _ _ _	
Grants or Assistance Benefitting Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. (b) Relationship between person interested person and the content of assistance person interested person and the content of assistance person									Yes	No	res			
Complete if the organization answered "Yes" on Form 990, Part IV, line 27. (b) Relationship between person interested person and the (c) Amount of assistance person (d) Type of assistance (e) Purpose of assistance person and the (c) Amount of assistance person (e) Purpose of assistance person and the (c) Amount of assistance person (d) Type of assistance person (e) Purpose of assistance perso									Yes	No	res		_ _ _ _ _	
(b) Relationship between person interested person and the (c) A mount of assistance (d) Type of assistance (e) Purpose of assistance			- 1						Yes	No	res		_ _ _ _ _	
person Interested person and the	it IIII Gra		tance Be							No	res		_ _ _ _ _ _	
	Со	mplete if the o	tance Be		d "Yes" on	Form 990, P			27.				_ _ _ _ _ _	
organization	rt IIII Gra	mplete if the o	stance Be organizatio) Relationsh	n answere	(c) A mour	Form 990, P			27.				se of ass	ısta
	Colora) Name of I	mplete if the o	stance Be organizatio) Relationsh erested per	n answere nip between son and the	(c) A mour	Form 990, P			27.				se of ass	ısta
	Col	mplete if the o	stance Be organizatio) Relationsh erested per	n answere nip between son and the	(c) A mour	Form 990, P			27.				se of ass	ısta
	Colora) Name of I	mplete if the o	stance Be organizatio) Relationsh erested per	n answere nip between son and the	(c) A mour	Form 990, P			27.				se of ass	ista
	Co Name of I	mplete if the o	stance Be organizatio) Relationsh erested per	n answere nip between son and the	(c) A mour	Form 990, P			27.				se of ass	ısta
	Co Name of I	mplete if the o	stance Be organizatio) Relationsh erested per	n answere nip between son and the	(c) A mour	Form 990, P			27.				se of ass	ista
	Co Name of I	mplete if the o	stance Be organizatio) Relationsh erested per	n answere nip between son and the	(c) A mour	Form 990, P			27.				se of ass	ista
	Co Name of I	mplete if the o	stance Be organizatio) Relationsh erested per	n answere nip between son and the	(c) A mour	Form 990, P			27.				se of ass	sista
	Co Name of I	mplete if the o	stance Be organizatio) Relationsh erested per	n answere nip between son and the	(c) A mour	Form 990, P			27.				se of ass	ıısta
	Co Name of I	mplete if the o	stance Be organizatio) Relationsh erested per	n answere nip between son and the	(c) A mour	Form 990, P			27.				se of ass	usta

Part IV Business Transactions Complete if the organizat			a 20a 20h aw 20a		
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) A mount of transaction	(d) Description of transaction	(e) Sh of organiz	f zatıon':
				Yes	No
(1) E MorrisM D'Alessio	Directors	1,023,227	Health Insurance		Νo

Part V Supplemental Information

Provide additional information for responses to questions on Schedule L (see instructions)

Return Reference	Explanation
	Philadelphia Industrial Development Corporation (PIDC) Chairman M Walter D'Alessio serves as the Chairman of the Board at Independence Blue Cross Edward H Morris serves as the Treasurer on the PIDC Board, and is the Vice President at Independence Blue Cross (IBC) IBC is the primary health care benefit provider in the Delaware Valley, and, through a contract with PIDC, provides health insurance coverage to the employees of PIDC PIDC's employee benefit broker is responsible for reviewing coverage, rates and competitive alternatives. The amount of revenue related to this relationship is negligible to IBC. The nature of these individuals' positions at IBC are such that they are removed from direct business contact with PIDC.

Schedule L (Form 990 or 990-EZ) 2013

efile GRAPHIC print - DO NOT PROCESS

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

As Filed Data -

DLN: 93493318037774

OMB No 1545-0047

2013

Open to Public
Inspection

Supplemental Information to Form 990 or 990-EZ

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

FAttach 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
Philadelphia Industrial Development
Corporation

Employer identification number
23-6050858

Return Reference	Explanation
Form 990, Part III, Line 4d	Other Program Services Program Service Expenses \$208,630, Grants and allocations \$0, Revenue \$544,256 Software Development and Maintenance PIDC created a software program for its use that is specifically designed to assimilate, track, and report the information required by local, state, and federal regulators/authorities PIDC licenses the software to similarly situated tax exempt organizations for the management of their portfolios and reporting requirements

Return Reference	Explanation
Form 990, Part VI, Line 6	Members or Stockholders The members of Philadelphia Industrial Development Corporation and its combined affiliates (collectively, the Corporation) are the persons who are the directors of the Corporation. The business and affairs of the Corporation are managed by the directors. The organization has three classes of directors. 1) 7 City Directors consisting of the seven officers of the City of Philadelphia (the City), the Mayor of the City of Philadelphia, the Director of Commerce, the President of the Council, the Chairman of the Planning Commission, the City Solicitor, the Managing Director, and the Director of Finance. 2) 8 Chamber of Commerce Directors nominated by the President of the Greater Philadelphia Chamber of Commerce. 3) 15 Public Directors as nominated jointly by the President of the Greater Philadelphia Chamber of Commerce and the Director of Commerce of the City of Philadelphia. The seat of the Director of Commerce and the Planning Commissioner is held by one person.

Return Reference	Explanation
Form 990, Part VI, Line 7b	Decisions Subject to Approval The Board of Directors (comprised of the 30 members as defined above) is authorized to approve by appropriate resolution the purchase, sale, lease, mortgage pledge, or other disposal of real estate and the borrowing of money for that purpose. The decisions of the Board regarding certain loan programs are subject to approval by external parties. In addition, between the times of the Board of Directors meeting, the Executive Committee has the right to exercise the authority of the Board of Directors. The Executive committee consists of 15 directors including the seven (7) City Directors and eight (8) Chamber Directors who are named to the Board of Directors. The Chairman of the Board of Directors is also the Chairman of the Executive Committee.

Return Reference	Explanation
Form 990, Part VI, Line 11b	Form 990 Review Process The Vice President of Financial Reporting assembles the Form 990, which is subsequently reviewed by the Senior Vice President of Operations, and also subject to review by PIDC's outside tax advisors. The Form 990 is required to be reviewed by the Audit Committee of the Board prior to filing with the Internal Revenue Service. The Form 990 is made available to all Board members upon request.

Return Reference	Explanation
Form 990, Part VI, Line 12c	Conflict of Interest Policy Monitoring & Enforcement All Directors of the Corporation must disclose the nature and extent of any interests, direct or indirect, contact, and/or activity related to such projects promoted by the Corporation. No director who has such an interest can vote on any matter relating to it. The disclosure is retained in the minute book of the organization. The Corporation has included a conflict of interest policy within the Personnel Policy Manual (updated during 2012), that is applicable to all employees of the Corporation. Further, on a periodic basis, the Corporation may require the officers of the Corporation to disclose any conflicted interests.

Return Reference	Explanation
Form 990, Part VI, Line 15a	Process for Determining Compensation The compensation for the CEO is approved by the compensation committee which includes the Chairman of the Board of Directors and designated Board members appointed by the Chairman of the Board of Directors FORM 990, PART VI, LINE 15B The Corporation has established a Compensation Program to ensure the salaries and benefits paid to officers and employees is fair, competitive, and reflective of employee's actual performance. For the Corporation's senior executives, this includes establishing performance standards at the beginning of the year, which are used by the CEO to measure each executive's performance at year end. The Corporation periodically performs pay-range surveys of other comparable employers and monitors current trends in compensation. In addition, the compensation structure embeds a risk based component that considers achievement of performance goals.

Return Reference	Explanation
Form 990, Part VI, Section C, Line 18	How Documents are Made Available to the Public PIDC makes its Form 990 available to the public by retaining a copy at its place of business. The Form 990 is likewise published on the internet at www guidestar com. Form 990, Part VI, Section C, Line 19 How Documents are Made Available to the Public The Corporation's financial statements, governing documents, and conflict of interest policy are not ordinarily made available to the public

L

Return Reference	Explanation
Form 990, Part XI, Line 5	Reconciliation of Net Assets The change in pension and postretirement benefit other than net periodic benefit (\$5,287,967) at December 31, 2013

Return Reference	Explanation
Section A, Line 35	Support Schedule Pursuant to section 1 509(A)-4 of the Treasury Regulations, a 501(C)(3) organization can be the supporting organization of a 501(C)(4) organization provided that the supported organization meets the requirements under 509(A)(2) PIDC has provided Schedule A to support the determination that PIDC meets the 509(A)(2) test

Return Reference	Explanation
Form 990, Part III, Line 1	Mission Statement PIDC has been Philadelphia's economic development agency since 1957. As a non-profit, public-private partnership founded by the City and the Greater Philadelphia Chamber of Commerce, PIDC plans and implements finance and real estate transactions throughout all neighborhoods that attract investments, jobs, and tax ratables to the city. PIDC's investments serve to diversify the City's economic base and improve the quality of life for business and residents.

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

SCHEDULE R (Form 990)

Department of the Treasury

Corporation

Related Organizations and Unrelated Partnerships

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

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

OMB No 1545-0047

Employer identification number

DLN: 93493318037774

Open to Public Inspection

Internal Revenue Service Name of the organization Philadelphia Industrial Development ▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

(a) Name, address, and EIN (If applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income En	(e) id-of-year assets	C	(f) Direct controlling entity		
Part II Identification of Related Tax-Exempt Organizations during	inizations Complete if g the tax year.	the organization ai	nswered "Yes" on	Form 990, Pa	art IV,	line 34 because it	had or	ne
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity: (if section 501)	status (c)(3))	(f) Direct controlling entity	Section (13) co	g) n 512(l ontrolle tity?
(1) PIDC- Development Management Corporation	Econ Develop	PA	501(c)(4)				Yes	No No
	LCOII Develop		301(c)(4)					"0
1500 Market Street						N/A		
Philadelphia, PA 19102 23-2176818								
(2) PIDC- Financing Corporation	Econ Develop	PA	501(c)(4)					No
1500 Market Street						N/A		
Philadelphia, PA 19102 36-4665239								
(3) PIDC- Local Development Corporation	Econ Develop	PA	501(c)(4)					No
1500 Market Street						N/A		
Philadelphia, PA 19102 30-0598934								
(4) PIDC- Regional Development Corporation	Econ Develop	PA	501(c)(3)	11 type 1		PIDC	Yes	
1500 Market Street								
Philadelphia, PA 19102 23-2889102								
(5) PIDC- Penn Venture Fund	Econ Develop	PA	501(c)(4)					No
1500 Market Street						N/A		
Philadelphia, PA 19102 21-1585341								
(6) Food Distribution Center	Econ Develop	PA	115					No
1500 Market Street Philadelphia, PA 19102						N/A		
23-1475639								
For Panerwork Reduction Act Notice see the Instructions for Form	200	Cat No 501	3 E V			Schedule R (Form	- 000\ 3	012

(a) Name, address, and EIN of related organization		(b) Primary activit	(c) Legal domicile (state or foreign country)	entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets		prtionate	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene man part	j) eral or aging :ner?	(k) Percentag ownersh
					314)			Yes	No	1	Yes	No	
V Identification of Related Org								were	d "Yes	" on Form	990,	Part	IV,
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)		(d) Direct controllin entity	(e) Type of entit (C corp, S corp, or trust)	y Share of income	total Share e of	(g) e of end- year ssets		(h) ercentage ownership	Section (b) cont	i) on 512 (13) rolled tity?	!
					1				_		Yes		No
					_	+			_				+

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

Yes

1 D	uring the tax year, did the orgranization engage in any of the following transactions with one or more r	elated organizations lis	sted in Parts II-IV?				
а	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a		No
b	Gift, grant, or capital contribution to related organization(s)				1b		No
c	Gift, grant, or capital contribution from related organization(s)				1c		No
d	Loans or loan guarantees to or for related organization(s)				1d	Yes	
e	Loans or loan guarantees by related organization(s)				1e	Yes	
f	Dividends from related organization(s)				1f		
	Sale of assets to related organization(s)				1g		No
_	Purchase of assets from related organization(s)				1h		No
	Exchange of assets with related organization(s)				1i		No
	Lease of facilities, equipment, or other assets to related organization(s)				1j		No
k	Lease of facilities, equipment, or other assets from related organization(s)				1k		No
ı	Performance of services or membership or fundraising solicitations for related organization(s)				11		No
	Performance of services or membership or fundraising solicitations by related organization(s)				1m		No
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n		No
o	Sharing of paid employees with related organization(s)				10	Yes	
р	Reimbursement paid to related organization(s) for expenses				1 p	Yes	
q	Reimbursement paid by related organization(s) for expenses				1q	Yes	
r	Other transfer of cash or property to related organization(s)				1r		No
	Other transfer of cash or property from related organization(s)				1s		No
<u> </u>	If the answer to any of the above is "Yes," see the instructions for information on who must complete	this line including co	vered relationships	and transaction thresholds			
	(a)	(b)	(c)	(d)			
	Name of related organization	Transaction type (a-s)	Amount involved	Method of determining amo	ount II	nvolved	
(1) PI	IDC- Regional Development Corporation	р	1,329,970	Contractual Fee			

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

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

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

revenue) that was not a related organization. See instructions i													
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)		(e) all partners section 501(c)(3) anizations?	(f) Share of total Income	(g) Share of end-of-year assets	(h) Disproprtiona allocations ⁷	_	(i) Code V ² UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?	_	(k) Percentage ownership
			314)	Yes	No			Yes	No		Yes	No	
												1	
													_
			<u> </u>				l					<u> </u>	

Schedule R (Form 990) 2013

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference Explanation

Schedule R (Form 990) 2013

Additional Data

Software ID: **Software Version:**

EIN: 23-6050858

Name: Philadelphia Industrial Development Corporation

Form 990, Schedule R, Part II - Identification of Relat	ed Tax-Exempt Or	ganizations			_	_	,
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c) (3))	(f) Direct controlling entity	Section (b)(1 contro entit	on 512 (13) rolled
						Yes	No
(1) PIDC- Development Management Corporation	Econ Develop	PA	501(c)(4)	T	N/A		No
1500 Market Street Philadelphia, PA 19102 23-2176818							
(1) PIDC- Financing Corporation	Econ Develop	PA	501(c)(4)	T	N/A		No
1500 Market Street Philadelphia, PA 19102 36-4665239							
(2) PIDC- Local Development Corporation	Econ Develop	PA	501(c)(4)		N/A		No
1500 Market Street Philadelphia, PA 19102 30-0598934							
(3) PIDC- Regional Development Corporation	Econ Develop	PA	501(c)(3)	11 type 1	PIDC	Yes	
1500 Market Street Philadelphia, PA 19102 23-2889102							
(4) PIDC- Penn Venture Fund	Econ Develop	PA	501(c)(4)		N/A		No
1500 Market Street Philadelphia, PA 19102 21-1585341							
(5) Food Distribution Center	Econ Develop	PA	115		N/A		No
1500 Market Street Philadelphia, PA 19102 23-1475639							