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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

▶ Information about Form 990 and its instructions is at [www.IRS.gov/form990](http://www.irs.gov/form990)

OMB No 1545-0047

2014

Open to Public Inspection

A For the 2014 calendar year, or tax year beginning 01-01-2014, and ending 12-31-2014

B Check if applicable

☐ Address change

☐ Name change

☐ Initial return

☐ Final return/terminated

☐ Amended return

☐ Application pending

C Name of organization

FUND FOR PHILADELPHIA

Doing business as

THE MAYOR'S FUND FOR PHILA INC

Number and street (or P O box if mail is not delivered to street address)

CITY HALL NO 708

Room/suite

City or town, state or province, country, and ZIP or foreign postal code

PHILADELPHIA, PA 19107

D Employer identification number

23-2174863

E Telephone number

(215) 686-0321

G Gross receipts \$ 12,127,820

F Name and address of principal officer

ASHLEY DEL BIANCO
CITY HALL NO 708
PHILADELPHIA, PA 19107

H(a) Is this a group return for subordinates?

☐ Yes ☒ No

H(b) Are all subordinates included?

☐ Yes ☐ No

If "No," attach a list (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status

☒ 501(c)(3) ☐ 501(c) () ◀(insert no) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ WWW.MAYORSFUNDPHILA.ORG

K Form of organization

☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation 1981

M State of legal domicile PA

| Part I | | Summary | | |
|-----------------------------|-----|--|---------------------------|--------------|
| Activities & Governance | 1 | Briefly describe the organization's mission or most significant activities SEE SCHEDULE O | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | 2 | Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets | | |
| | 3 | Number of voting members of the governing body (Part VI, line 1a) | 3 | 9 |
| | 4 | Number of independent voting members of the governing body (Part VI, line 1b) | 4 | 9 |
| | 5 | Total number of individuals employed in calendar year 2014 (Part V, line 2a) | 5 | 6 |
| | 6 | Total number of volunteers (estimate if necessary) | 6 | 11 |
| | 7a | Total unrelated business revenue from Part VIII, column (C), line 12 | 7a | 0 |
| | b | Net unrelated business taxable income from Form 990-T, line 34 | 7b | 0 |
| Revenue | 8 | Contributions and grants (Part VIII, line 1h) | Prior Year | Current Year |
| | 9 | Program service revenue (Part VIII, line 2g) | 2,952,505 | 7,906,237 |
| | 10 | Investment income (Part VIII, column (A), lines 3, 4, and 7d) | 3,808,584 | 4,189,772 |
| | 11 | Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) | 0 | 41 |
| | 12 | Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) | 50,029 | 31,770 |
| | 12 | Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) | 6,811,118 | 12,127,820 |
| Expenses | 13 | Grants and similar amounts paid (Part IX, column (A), lines 1–3) | 512,618 | 1,056,060 |
| | 14 | Benefits paid to or for members (Part IX, column (A), line 4) | 0 | 0 |
| | 15 | Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) | 191,354 | 277,178 |
| | 16a | Professional fundraising fees (Part IX, column (A), line 11e) | 0 | 0 |
| | b | Total fundraising expenses (Part IX, column (D), line 25) ▶0 | | |
| | 17 | Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e) | 5,307,156 | 6,245,393 |
| Net Assets or Fund Balances | 18 | Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25) | 6,011,128 | 7,578,631 |
| | 19 | Revenue less expenses Subtract line 18 from line 12 | 799,990 | 4,549,189 |
| | | | Beginning of Current Year | End of Year |
| | 20 | Total assets (Part X, line 16) | 9,904,801 | 15,511,436 |
| | 21 | Total liabilities (Part X, line 26) | 4,398,081 | 5,455,527 |
| | 22 | Net assets or fund balances Subtract line 21 from line 20 | 5,506,720 | 10,055,909 |

Part II

Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here

Signature of officer

2015-09-23
Date

MAARI PORTER EXECUTIVE DIRECTOR
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name

CHRISTOPHER M PEKULA

Preparer's signature

CHRISTOPHER M PEKULA

Date

Check ☐ if self-employed

PTIN
P00734965

Firm's name ▶ MCGLADREY LLP

Firm's EIN ▶ 42-0714325

Firm's address ▶ 751 ARBOR WAY SUITE 200
BLUE BELL, PA 19422

Phone no (215) 641-8600

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

☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form 990 (2014)

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization’s mission
SEE SCHEDULE O

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☒ Yes ☐ No
If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No
If "Yes," describe these changes on Schedule O

4 Describe the organization’s program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses \$ 2,683,338 including grants of \$ 221,913) (Revenue \$ 4,167,555)
THE PHILADELPHIA MARATHON IS THE LAST MARATHON IN THE UNITED STATES THAT IS WHOLLY RUN AND OWNED BY A CITY EVERY YEAR THE CITY PRODUCES A WEEKEND OF EVENTS TO CELEBRATE THE RUNNERS IN THE 8K, 12 1 AND 26 2 MILE RACES DURING THE 2014 RACE, THE MARATHON HOSTED OVER 31,000 RUNNERS WHO REGISTERED FOR THESE THREE RACES

4b (Code) (Expenses \$ 1,000,000 including grants of \$) (Revenue \$)
ON MAY 14, 2014, THE FUND ENTERED INTO AN AGREEMENT WITH FORBES MEDIA LLC (FORBES) UNDER TERMS OF THE AGREEMENT, THE FUND, ON BEHALF OF THE CITY OF PHILADELPHIA, AGREED TO TAKE ON THE ROLE OF HOST CITY OF FORBES' FIRST ANNUAL UNDER 30 SUMMIT AS A DESIGNEE OF THE HOST CITY, THE FUND HAS AGREED TO PURCHASE \$3,000,000 IN ADVERTISING, WHICH WILL RUN IN 2014 AND 2015 THE FUND AND FORBES HAVE ACKNOWLEDGED AND AGREED THAT THE FUND HAS THE RIGHT TO USE UP TO \$1,000,000 OF THE ADVERTISING BUDGET AS IN KIND PROMOTION AND/OR GOODS, SERVICES AND MATERIALS ADVERTISING INCURRED AND PAID IN 2014 WAS \$1,000,000
















4c (Code) (Expenses \$ 410,795 including grants of \$ 303,309) (Revenue \$)
IN 2004, THE CITY OF PHILADELPHIA EMPOWERMENT ZONE (EZ) ANNOUNCED A SIGNATURE PROJECT CALLED THE NEIGHBORHOOD FUNDING STREAM (NFS) THE NFS MAKES GRANTS AVAILABLE ON AN ANNUAL BASIS TO SUPPORT ACTIVITIES SERVING RESIDENTS OF THE AMERICAN STREET, NORTH CENTRAL AND WEST PHILADELPHIA EMPOWERMENT ZONE NEIGHBORHOODS THE MISSION OF THE NEIGHBORHOOD FUNDING STREAM IS TO SUPPORT SUSTAINABLE COMMUNITY AND ECONOMIC DEVELOPMENT EFFORTS IN CULTURALLY AND ETHNICALLY DIVERSE COMMUNITIES THE NEIGHBORHOOD FUNDING STREAM CONTRIBUTES TO A HEALTHY, SELF SUFFICIENT AND SAFE ENVIRONMENT IMPROVING QUALITY OF LIFE FOR ALL COMMUNITY MEMBERS THE AMERICAN STREET EMPOWERMENT ZONE (ASEZ) COMMUNITY TRUST BOARD (CTB) ESTABLISHES THE PRIORITIES TO BE ADDRESSED BY THE NEIGHBORHOOD FUNDING STREAM IN THE ASEZ, AND CONSISTS OF LOCAL RESIDENTS, LOCAL EMPLOYERS AND OTHER COMMUNITY EXPERTS
See Additional Data

4d Other program services (Describe in Schedule O)
(Expenses \$ 3,114,642 including grants of \$ 530,838) (Revenue \$ 53,987)

4e Total program service expenses ▶ 7,208,775

Part IV

Checklist of Required Schedules

| | Yes | No |
|---|---------|----|
| 1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A  | 1 Yes | |
| 2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?  | 2 Yes | |
| 3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I | 3 | No |
| 4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II | 4 | No |
| 5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III | 5 | No |
| 6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I  | 6 | No |
| 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II  | 7 | No |
| 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III  | 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  | 9 | No |
| 10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V  | 10 | No |
| 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable | | |
| a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI  | 11a | No |
| b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII  | 11b | No |
| c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII  | 11c | No |
| d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX  | 11d | No |
| e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X  | 11e Yes | |
| f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X  | 11f Yes | |
| 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII  | 12a Yes | |
| b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional  | 12b | No |
| 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E | 13 | No |
| 14a Did the organization maintain an office, employees, or agents outside of the United States? | 14a | No |
| b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV | 14b | No |
| 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV | 15 | No |
| 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV | 16 | No |
| 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) | 17 | No |
| 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II | 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 | |

Part 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 domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i> | 21 | Yes | |
| 22 | Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i> | 22 | Yes | |
| 23 | Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> | 23 | | No |
| 24a | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i> | 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), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</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? <i>If "Yes," complete Schedule L, Part I</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? <i>If "Yes," complete Schedule L, Part II</i> | 26 | | No |
| 27 | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i> | 27 | | No |
| 28 | Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions) | | | |
| a | A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> | 28a | | No |
| b | A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> | 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? <i>If "Yes," complete Schedule L, Part IV</i> | 28c | | No |
| 29 | Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> | 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? <i>If "Yes," complete Schedule N, Part I</i> | 31 | | No |
| 32 | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> | 32 | | No |
| 33 | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> | 33 | | No |
| 34 | Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i> | 34 | | No |
| 35a | Did the organization have a controlled entity within the meaning of section 512(b)(13)? | 35a | | No |
| b | If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> | 35b | | |
| 36 | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> | 36 | | No |
| 37 | Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> | 37 | | No |
| 38 | Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O | 38 | Yes | |

Part V

Statements Regarding Other IRS Filings and Tax Compliance

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

| | | Yes | No |
|--|--|-----|-----|
| 1a | Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable. | 233 | |
| 1b | Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable. | 0 | |
| c. Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? | | 1c | Yes |
| 2a | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return. | 6 | |
| b. If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions). | | 2b | Yes |
| 3a | Did the organization have unrelated business gross income of \$1,000 or more during the year? | 3a | No |
| b. If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O. | | 3b | |
| 4a | At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? | 4a | No |
| b. If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). | | | |
| 5a | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | 5a | No |
| b. Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | | 5b | No |
| c. If "Yes," to line 5a or 5b, did the organization file Form 8886-T? | | 5c | |
| 6a | Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? | 6a | No |
| b. If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? | | 6b | |
| 7 Organizations that may receive deductible contributions under section 170(c). | | | |
| a. Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? | | 7a | No |
| b. If "Yes," did the organization notify the donor of the value of the goods or services provided? | | 7b | |
| c. Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? | | 7c | No |
| d. If "Yes," indicate the number of Forms 8282 filed during the year. | | 7d | |
| e. Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | | 7e | No |
| f. Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | | 7f | No |
| g. If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? | | 7g | |
| h. If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? | | 7h | |
| 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? | | | |
| | | 8 | |
| 9a. Did the sponsoring organization make any taxable distributions under section 4966? | | 9a | |
| b. Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? | | 9b | |
| 10 Section 501(c)(7) organizations. Enter | | | |
| a. Initiation fees and capital contributions included on Part VIII, line 12. | | 10a | |
| b. Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities. | | 10b | |
| 11 Section 501(c)(12) organizations. Enter | | | |
| a. Gross income from members or shareholders. | | 11a | |
| b. Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them). | | 11b | |
| 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? | | | |
| b. If "Yes," enter the amount of tax-exempt interest received or accrued during the year. | | 12b | |
| 13 Section 501(c)(29) qualified nonprofit health insurance issuers. | | | |
| a. Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. | | 13a | |
| b. Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans. | | 13b | |
| c. Enter the amount of reserves on hand. | | 13c | |
| 14a | Did the organization receive any payments for indoor tanning services during the tax year? | 14a | No |
| b. If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O. | | 14b | |

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.

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

Section A. Governing Body and Management

| | | | |
|--|---|-----|-----|
| | | Yes | No |
| 1a | Enter the number of voting members of the governing body at the end of the tax year | 9 | |
| 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 | | | |
| 1b | Enter the number of voting members included in line 1a, above, who are independent | 9 | |
| 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 | No |
| 3 | Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? | 3 | No |
| 4 | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? | 4 | No |
| 5 | Did the organization become aware during the year of a significant diversion of the organization's assets? | 5 | No |
| 6 | Did the organization have members or stockholders? | 6 | No |
| 7a | Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? | 7a | No |
| 7b | Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? | 7b | No |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following | | |
| 8a | The governing body? | 8a | Yes |
| 8b | 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 |

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

| | | | |
|--|--|-----|-----|
| | | Yes | No |
| 10a | Did the organization have local chapters, branches, or affiliates? | 10a | No |
| 10b | 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 | Yes |
| 11b | Describe in Schedule O the process, if any, used by the organization to review this Form 990 | | |
| 12a | Did the organization have a written conflict of interest policy? If "No," go to line 13 | 12a | Yes |
| 12b | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? | 12b | Yes |
| 12c | Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done | 12c | Yes |
| 13 | Did the organization have a written whistleblower policy? | 13 | Yes |
| 14 | Did the organization have a written document retention and destruction policy? | 14 | Yes |
| 15 | Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? | | |
| 15a | The organization's CEO, Executive Director, or top management official | 15a | Yes |
| 15b | Other officers or key employees of the organization | 15b | No |
| If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) | | | |
| 16a | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? | 16a | No |
| 16b | If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? | 16b | |

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed

18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
☒ Own website ☐ Another's website ☒ Upon request ☐ Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year

20 State the name, address, and telephone number of the person who possesses the organization's books and records

ASHLEY DEL BIANCO

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) Average hours per week (list any hours for related organizations below dotted line) | (C) 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 related organizations |
|---|--|---|-----------------------|---------|--------------|------------------------------|--------|---|--|---|
| | | Individual trustee or director | Institutional Trustee | Officer | Key employee | Highest compensated employee | Former | | | |
| (1) DESIREE PETERKIN-BELL CHAIR OF BOARD | 1 00 | X | | X | | | | 0 | 0 | 0 |
| (2) RICH NEGRIN BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| (3) ASHLEY DEL BIANCO EXECUTIVE DIRECTOR/SECRETARY | 8 00 | X | | X | | | | 0 | 0 | 0 |
| (4) ANNA WALLACE ADAMS BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| (5) COUNCILMAN BOBBY HENON BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| (6) TUMAR ALEXANDER BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| (7) MAMI HARA BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| (8) ANDREW FRISHKOFF BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| (9) DAVID STREIM TREASURER | 1 00 | X | | X | | | | 0 | 0 | 0 |

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 for related organizations below dotted line) | (C) 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 related organizations |
|-----------------------|--|---|-----------------------|---------|--------------|------------------------------|--------|--|---|---|
| | | Individual trustee or director | Institutional Trustee | Officer | Key employee | Highest compensated employee | Former | | | |
| | | | | | | | | | | |

| | | | | | |
|----|---|---|---|---|---|
| 1b | Sub-Total | ▶ | | | |
| c | Total from continuation sheets to Part VII, Section A | ▶ | | | |
| d | Total (add lines 1b and 1c) | ▶ | 0 | 0 | 0 |

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization▶0

| | | Yes | No |
|---|---|-----|----|
| 3 | Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i> | 3 | No |
| 4 | For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i> | 4 | No |
| 5 | Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i> | 5 | No |

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

| (A) Name and business address | (B) Description of services | (C) Compensation |
|--|---|---------------------|
| FORBESMEDIA LLC 499 WASHINGTON BLV JERSEY CITY, NJ 07310 | ADVERTISING FOR UNDER 30 SUMMIT | 1,035,000 |
| SOCIAL SOLUTIONS 425 WILLIAMS COURT STE 100 BALTIMORE, MD 21220 | INFORMATION TECHNOLOGY | 294,294 |
| ANDROPOGON ASSOCIATES LTD 10 SHURS LANE PHILADELPHIA, PA 19127 | ARCHITECTURE AND ECOLOGICAL DEISGN | 216,238 |
| NORTH LIBERTY REALTY LLC 1344 NORTH AMERICAN STREET PHILADELPHIA, PA 19122 | ECONOMIC DEVELOPMENT | 170,858 |
| 310 MASTER LLC 1314 N 4TH STREET PHILADELPHIA, PA 19123 | REDEVELOPMENT OF COMMERCIAL SPACE | 135,000 |
| 2 | Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶6 | |

Part VIII

Statement of Revenue

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

| | | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512-514 | |
|---|---|---|---|--|---|---|----|
| Contributions, Gifts, Grants and Other Similar Amounts | 1a | Federated campaigns | 1a | | | | |
| | b | Membership dues | 1b | | | | |
| | c | Fundraising events | 1c | | | | |
| | d | Related organizations | 1d | | | | |
| | e | Government grants (contributions) | 1e | | | | |
| | f | All other contributions, gifts, grants, and similar amounts not included above | 1f | 7,906,237 | | | |
| | g | Noncash contributions included in lines 1a-1f \$ | | | | | |
| | h | Total. Add lines 1a-1f | | 7,906,237 | | | |
| Program Service Revenue | 2a | PHILADELPHIA MARATHON | Business Code 900099 | 4,135,785 | 4,135,785 | | |
| | b | OTHER | 900099 | 53,987 | 53,987 | | |
| | c | | | | | | |
| | d | | | | | | |
| | e | | | | | | |
| | f | All other program service revenue | | | | | |
| | g | Total. Add lines 2a-2f | | 4,189,772 | | | |
| | Other Revenue | 3 | Investment income (including dividends, interest, and other similar amounts) | 41 | | | 41 |
| 4 | | Income from investment of tax-exempt bond proceeds | | | | | |
| 5 | | Royalties | | | | | |
| 6a | | Gross rents | (i) Real | (ii) Personal | | | |
| | | b | Less rental expenses | | | | |
| | | c | Rental income or (loss) | | | | |
| | | d | Net rental income or (loss) | | | | |
| 7a | | Gross amount from sales of assets other than inventory | (i) Securities | (ii) Other | | | |
| | | b | Less cost or other basis and sales expenses | | | | |
| | | c | Gain or (loss) | | | | |
| | | d | Net gain or (loss) | | | | |
| 8a | | Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18 | a | | | | |
| | | b | Less direct expenses | b | | | |
| | | c | Net income or (loss) from fundraising events | | | | |
| 9a | | Gross income from gaming activities See Part IV, line 19 | a | | | | |
| | | b | Less direct expenses | b | | | |
| | | c | Net income or (loss) from gaming activities | | | | |
| 10a | | Gross sales of inventory, less returns and allowances | a | | | | |
| | | b | Less cost of goods sold | b | | | |
| | | c | Net income or (loss) from sales of inventory | | | | |
| Miscellaneous Revenue | | Business Code | | | | | |
| 11a | ADMINISTRATIVE FEES | 900099 | 31,770 | 31,770 | | | |
| b | | | | | | | |
| c | | | | | | | |
| d | All other revenue | | | | | | |
| e | Total. Add lines 11a-11d | | 31,770 | | | | |
| 12 | Total revenue. See Instructions | | | 12,127,820 | 4,221,542 | 0 | 41 |

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).

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

☒

| Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. | | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses |
|--|---|-----------------------|---------------------------------|--|-----------------------------|
| 1 | Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21. | 988,660 | 988,660 | | |
| 2 | Grants and other assistance to domestic individuals. See Part IV, line 22. | 67,400 | 67,400 | | |
| 3 | Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16. | | | | |
| 4 | Benefits paid to or for members. | | | | |
| 5 | Compensation of current officers, directors, trustees, and key employees. | | | | |
| 6 | Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). | | | | |
| 7 | Other salaries and wages. | 226,712 | 102,605 | 124,107 | |
| 8 | Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions). | 11,297 | | 11,297 | |
| 9 | Other employee benefits. | 17,722 | 5,354 | 12,368 | |
| 10 | Payroll taxes. | 21,447 | 7,865 | 13,582 | |
| 11 | Fees for services (non-employees): | | | | |
| a | Management. | | | | |
| b | Legal. | 23,005 | | 23,005 | |
| c | Accounting. | 96,947 | | 96,947 | |
| d | Lobbying. | | | | |
| e | Professional fundraising services. See Part IV, line 17. | | | | |
| f | Investment management fees. | | | | |
| g | Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O). | 3,475,723 | 3,475,723 | | |
| 12 | Advertising and promotion. | 1,229,100 | 1,205,278 | 23,822 | |
| 13 | Office expenses. | 943,612 | 907,689 | 35,923 | |
| 14 | Information technology. | | | | |
| 15 | Royalties. | | | | |
| 16 | Occupancy. | 122,249 | 122,249 | | |
| 17 | Travel. | 190,919 | 183,160 | 7,759 | |
| 18 | Payments of travel or entertainment expenses for any federal, state, or local public officials. | | | | |
| 19 | Conferences, conventions, and meetings. | 22,194 | 18,105 | 4,089 | |
| 20 | Interest. | | | | |
| 21 | Payments to affiliates. | | | | |
| 22 | Depreciation, depletion, and amortization. | | | | |
| 23 | Insurance. | 23,263 | 17,774 | 5,489 | |
| 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): | | | | |
| a | DUES, MEMBERSHIPS, SUBS | 92,508 | 88,449 | 4,059 | |
| b | TRAINING AND PROFESSION | 19,934 | 12,525 | 7,409 | |
| c | TOOLKIT DEVELOPMENT | 5,939 | 5,939 | | |
| d | | | | | |
| e | All other expenses | | | | |
| 25 | Total functional expenses. Add lines 1 through 24e. | 7,578,631 | 7,208,775 | 369,856 | 0 |
| 26 | Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720). | | | | |

Part X

Balance Sheet

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

| | | | | | (A) | | (B) |
|-----------------------------|---|--|-----|--|-------------------|-----|-------------|
| | | | | | Beginning of year | | End of year |
| Assets | 1 | Cash—non-interest-bearing | | | | 1 | |
| | 2 | Savings and temporary cash investments | | | 9,199,038 | 2 | 14,886,304 |
| | 3 | Pledges and grants receivable, net | | | | 3 | |
| | 4 | Accounts receivable, net | | | 165,184 | 4 | 305,421 |
| | 5 | Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L | | | | 5 | |
| | 6 | Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L | | | | 6 | |
| | 7 | Notes and loans receivable, net | | | 177,000 | 7 | 177,000 |
| | 8 | Inventories for sale or use | | | | 8 | |
| | 9 | Prepaid expenses and deferred charges | | | | 9 | |
| | 10a | Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D | 10a | | | | |
| | b | Less accumulated depreciation | 10b | | | 10c | |
| | 11 | Investments—publicly traded securities | | | | 11 | |
| | 12 | Investments—other securities See Part IV, line 11 | | | | 12 | |
| | 13 | Investments—program-related See Part IV, line 11 | | | | 13 | |
| | 14 | Intangible assets | | | | 14 | |
| | 15 | Other assets See Part IV, line 11 | | | 363,579 | 15 | 142,711 |
| | 16 | Total assets. Add lines 1 through 15 (must equal line 34) | | | 9,904,801 | 16 | 15,511,436 |
| Liabilities | 17 | Accounts payable and accrued expenses | | | 1,231,340 | 17 | 1,173,965 |
| | 18 | Grants payable | | | | 18 | |
| | 19 | Deferred revenue | | | | 19 | |
| | 20 | Tax-exempt bond liabilities | | | | 20 | |
| | 21 | Escrow or custodial account liability Complete Part IV of Schedule D | | | | 21 | |
| | 22 | Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L | | | | 22 | |
| | 23 | Secured mortgages and notes payable to unrelated third parties | | | | 23 | |
| | 24 | Unsecured notes and loans payable to unrelated third parties | | | 0 | 24 | 1,000,000 |
| | 25 | Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D | | | 3,166,741 | 25 | 3,281,562 |
| | 26 | Total liabilities. Add lines 17 through 25 | | | 4,398,081 | 26 | 5,455,527 |
| Net Assets or Fund Balances | Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34. | | | | | | |
| | 27 | Unrestricted net assets | | | 2,839,818 | 27 | 3,111,641 |
| | 28 | Temporarily restricted net assets | | | 2,666,902 | 28 | 6,944,268 |
| | 29 | Permanently restricted net assets | | | | 29 | |
| | Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34. | | | | | | |
| | 30 | Capital stock or trust principal, or current funds | | | | 30 | |
| | 31 | Paid-in or capital surplus, or land, building or equipment fund | | | | 31 | |
| | 32 | Retained earnings, endowment, accumulated income, or other funds | | | | 32 | |
| | 33 | Total net assets or fund balances | | | 5,506,720 | 33 | 10,055,909 |
| | 34 | Total liabilities and net assets/fund balances | | | 9,904,801 | 34 | 15,511,436 |

Part XI

Reconciliation 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 | 12,127,820 |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | 7,578,631 |
| 3 | Revenue less expenses Subtract line 2 from line 1 | 3 | 4,549,189 |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) | 4 | 5,506,720 |
| 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 | 0 |
| 10 | Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B)) | 10 | 10,055,909 |

Part XII

Financial Statements and Reporting

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

| | | Yes | No |
|----|--|-----|-----|
| 1 | Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O | | |
| 2a | Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis | 2a | No |
| 2b | Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis | 2b | Yes |
| 2c | If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O | 2c | Yes |
| 3a | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? | 3a | No |
| 3b | If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits | 3b | |

Additional Data

Software ID:
Software Version:
EIN: 23-2174863
Name: FUND FOR PHILADELPHIA

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

| |
|---|
| (Code) (Expenses \$ 86,514 including grants of \$) (Revenue \$) |
| 10K SMALL BUSINESSES- GOLDMAN SACHS |
| (Code) (Expenses \$ 108,350 including grants of \$) (Revenue \$) |
| A GATHERING OF LEADERS |

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

| | | | |
|------------------------|--------------------|------------------------------|---------------|
| (Code) | (Expenses \$ 191 | including grants of \$ | (Revenue \$) |
| ANTI-GRAFFITI NEWTWORK | | | |
| (Code) | (Expenses \$ 4,113 | including grants of \$ 2,400 | (Revenue \$) |
| ART IN CITY HALL | | | |

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

| |
|---|
| (Code) (Expenses \$ 922 including grants of \$ 922) (Revenue \$) |
| BADGES OF HONOR |
| (Code) (Expenses \$ 178,075 including grants of \$) (Revenue \$) |
| BARTRAM'S MILE RIVERFRONT TRAIL |

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

| | | | |
|-------------------------------------|--------------------|------------------------|---------------|
| (Code) | (Expenses \$ 206 | including grants of \$ | (Revenue \$) |
| CEO UNITING TO FIGHT POVERTY SUMMIT | | | |
| (Code) | (Expenses \$ 5,231 | including grants of \$ | (Revenue \$) |
| CITIES UNITED | | | |

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

| | | | | | |
|--------------------------|--------------|--------|------------------------|-------------|---|
| (Code) | (Expenses \$ | 3,281 | including grants of \$ | (Revenue \$ |) |
| CITY PUBLIC HEALTH FAIRS | | | | | |
| (Code) | (Expenses \$ | 20,880 | including grants of \$ | (Revenue \$ |) |
| CITYWIDE CLEAN UP | | | | | |

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

| | | | |
|-----------------------------|---------------------|------------------------------|---------------|
| (Code) | (Expenses \$ 66,608 | including grants of \$ | (Revenue \$) |
| CIVIT ENGAGEMENT VOLUNTEERS | | | |
| (Code) | (Expenses \$ 7,221 | including grants of \$ 7,221 | (Revenue \$) |
| COLLATERAL MATERIALS | | | |

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

| | | | | | |
|-----------------------|--------------|--------|------------------------|-------------|---|
| (Code) | (Expenses \$ | 21,810 | including grants of \$ | (Revenue \$ |) |
| COLLEGE ACCESS | | | | | |
| (Code) | (Expenses \$ | 94,246 | including grants of \$ | (Revenue \$ |) |
| CPI PROGRAM EXPANSION | | | | | |

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

| | | | |
|---------------------|---------------------|------------------------|---------------------|
| (Code) | (Expenses \$ 56,288 | including grants of \$ | (Revenue \$) |
| DELL PERFORMANCE | | | |
| (Code) | (Expenses \$ 185 | including grants of \$ | (Revenue \$ 1,250) |
| DHC #1 STD TRAINING | | | |

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

| |
|--|
| (Code) (Expenses \$ 15,450 including grants of \$ 6,775) (Revenue \$) |
| DILWORTH AWARD |
| (Code) (Expenses \$ 7,779 including grants of \$) (Revenue \$) |
| DOLLARWISE INNOVATION |

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

| |
|--|
| (Code) (Expenses \$ 66,659 including grants of \$) (Revenue \$) |
| EARLY CHILDHOOD |
| (Code) (Expenses \$ 1,709 including grants of \$) (Revenue \$) |
| EMPOWERMENT ZONE AND CATERING PROFESSIONAL SERVICES |

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

| | | | |
|------------------------|---------------------|------------------------|---------------|
| (Code) | (Expenses \$ 3,173 | including grants of \$ | (Revenue \$) |
| FUN SAFE PHILLY SUMMER | | | |
| (Code) | (Expenses \$ 26,802 | including grants of \$ | (Revenue \$) |
| GRADUATION COACHES | | | |

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

| | | | |
|-----------------|---------------------|-------------------------------|---------------|
| (Code) | (Expenses \$ 20,563 | including grants of \$ | (Revenue \$) |
| HOLIDAY PARTY | | | |
| (Code) | (Expenses \$ 15,500 | including grants of \$ 15,500 | (Revenue \$) |
| INNOVATION FUND | | | |

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

| | | | |
|---------------------|---------------------|------------------------|---------------|
| (Code) | (Expenses \$ 37,243 | including grants of \$ | (Revenue \$) |
| ITALIAN FESTIVITIES | | | |
| (Code) | (Expenses \$ 90,000 | including grants of \$ | (Revenue \$) |
| JOE FRAZIER STATUE | | | |

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

| | | | | | |
|----------|--------------|--------|------------------------|----------|---------------|
| (Code) | (Expenses \$ | 83,156 | including grants of \$ | 75,000) | (Revenue \$) |
| KIVA | | | | | |
| (Code) | (Expenses \$ | 4,200 | including grants of \$ | 4,200) | (Revenue \$) |
| L A SYNC | | | | | |

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

| | | | | | |
|--------------------------------|--------------|--------|------------------------|-------------|---|
| (Code) | (Expenses \$ | 74,681 | including grants of \$ | (Revenue \$ |) |
| LOVE PARK | | | | | |
| (Code) | (Expenses \$ | 37,386 | including grants of \$ | (Revenue \$ |) |
| MAYOR'S COMMISSION ON LITERACY | | | | | |

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

| |
|---|
| (Code) (Expenses \$ 8,252 including grants of \$ 8,000) (Revenue \$) |
| MAYOR'S COMMISSION ON PEOPLE WITH DISABILITIES |
| (Code) (Expenses \$ 580 including grants of \$) (Revenue \$) |
| MAYOR'S OFFICE FOR THE AGING |

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

| | | | |
|---|---------------------|---------------------------------|----------------------|
| (Code) | (Expenses \$ 90,304 | including grants of \$ 33,750) | (Revenue \$) |
| MAYOR'S OFFICE OF COMMUNITY EMPOWERMENT AND OPPORTUNITY | | | |
| (Code) | (Expenses \$ 27,547 | including grants of \$) | (Revenue \$ 12,250) |
| MAYOR'S RECEPTION ROOM | | | |

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

| | | | |
|------------------------------|---------------------|------------------------|---------------|
| (Code) | (Expenses \$ 175 | including grants of \$ | (Revenue \$) |
| MISCELLANEOUS MATCHING FUNDS | | | |
| (Code) | (Expenses \$ 50,237 | including grants of \$ | (Revenue \$) |
| MORTGAGE CRISIS | | | |

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

| |
|---|
| (Code) (Expenses \$ 570 including grants of \$ 570) (Revenue \$) |
| MUMMERS FUND |
| (Code) (Expenses \$ 92,786 including grants of \$) (Revenue \$) |
| NEIGHBORHOOD PARKS |

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

| | | | | | |
|--------------------------|--------------|-------|------------------------|-------------|---|
| (Code) | (Expenses \$ | 1,255 | including grants of \$ | (Revenue \$ |) |
| NEW URBAN MECHANICS | | | | | |
| (Code) | (Expenses \$ | 1,055 | including grants of \$ | (Revenue \$ |) |
| NEW WORLD TUTOR TRAINING | | | | | |

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

| |
|---|
| (Code) (Expenses \$ 304,534 including grants of \$ 221,000) (Revenue \$) |
| NORTH CENTRAL EMPOWERMENT ZONE |
| (Code) (Expenses \$ 1,523 including grants of \$) (Revenue \$) |
| OACCE OFFICE RENOVATIONS |

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

| | | | |
|-----------------------------------|---------------------|------------------------|---------------|
| (Code) | (Expenses \$ 4,700 | including grants of \$ | (Revenue \$) |
| OFFICE OF SUSTAINABILITY | | | |
| (Code) | (Expenses \$ 87,319 | including grants of \$ | (Revenue \$) |
| OPERATION BROTHERLY LOVE CARNIVAL | | | |

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

| |
|---|
| (Code) (Expenses \$ 364,501 including grants of \$) (Revenue \$) |
| OUT OF SCHOOL TIME |
| (Code) (Expenses \$ 8,874 including grants of \$) (Revenue \$) |
| PARKS AND REC GREENWORKS AND YOUTH DEVELOPMENT |

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

| | | | |
|--|---------------------|------------------------|---------------|
| (Code) | (Expenses \$ 23,348 | including grants of \$ | (Revenue \$) |
| PARKS AND REC PLANNING AND DEVELOPMENT | | | |
| (Code) | (Expenses \$ 57,490 | including grants of \$ | (Revenue \$) |
| PARKWAY ACTIVATION PILOT PROJECT | | | |

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

| | | | |
|---|---------------------|------------------------|----------------------|
| (Code) | (Expenses \$ 27,598 | including grants of \$ | (Revenue \$ 36,424) |
| PHASION PHEST | | | |
| (Code) | (Expenses \$ 31,806 | including grants of \$ | (Revenue \$) |
| PHILA 2035 IMPLEMENTATION/PERFORMANCE MEASURE | | | |

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

| | | | | | |
|------------------------|--------------|---------|------------------------|-------------|---|
| (Code) | (Expenses \$ | 14,875 | including grants of \$ | (Revenue \$ |) |
| PHILLIES PHUNDAMENTALS | | | | | |
| (Code) | (Expenses \$ | 229,609 | including grants of \$ | (Revenue \$ |) |
| PHILLY BIKE SHARE | | | | | |

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

| |
|---|
| (Code) (Expenses \$ 148,140 including grants of \$ 135,000) (Revenue \$) |
| PHILLY CHAMPIONS FUND |
| (Code) (Expenses \$ 59,948 including grants of \$ 5,000) (Revenue \$) |
| PHILLY GOES TO COLLEGE |

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

| | | | |
|-------------|---------------------|------------------------|---------------|
| (Code) | (Expenses \$ 93,604 | including grants of \$ | (Revenue \$) |
| PHILLY PLAY | | | |
| (Code) | (Expenses \$ 6,000 | including grants of \$ | (Revenue \$) |
| POETRY | | | |

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

| | | | |
|----------------------|----------------------|------------------------|---------------|
| (Code) | (Expenses \$ 3,856 | including grants of \$ | (Revenue \$) |
| PRINCE MUSIC THEATER | | | |
| (Code) | (Expenses \$ 137,492 | including grants of \$ | (Revenue \$) |
| PUBLIC SAFETY | | | |

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

| |
|---|
| (Code) (Expenses \$ including grants of \$) (Revenue \$ 4,063) |
| RECORDS DEPARTMENT |
| (Code) (Expenses \$ 1,449 including grants of \$) (Revenue \$) |
| R I S E |

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

| | | | | | |
|--------------------------------|--------------|--------|------------------------|-------------|---|
| (Code) | (Expenses \$ | 51,258 | including grants of \$ | (Revenue \$ |) |
| TOOLS FOR FINANCIAL CAPABILITY | | | | | |
| (Code) | (Expenses \$ | 5,035 | including grants of \$ | (Revenue \$ |) |
| US2020 | | | | | |

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

| |
|---|
| (Code) (Expenses \$ 15,500 including grants of \$ 15,500) (Revenue \$) |
| WALTER HANCOCK AIR SCULPTURE |
| (Code) (Expenses \$ 25,000 including grants of \$) (Revenue \$) |
| WEST PHILADELPHIA EMPOWERMENT ZONE |

SCHEDULE A
(Form 990 or 990EZ)

Department of the
Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ.
▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2014

Open to Public Inspection

| | |
|---|--|
| Name of the organization FUND FOR PHILADELPHIA | Employer identification number 23-2174863 |
|---|--|

Part I

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

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

1

☐

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

2

☐

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

3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state _____

5

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)

6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7

☐

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II)

8

☐

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)

9

☒

An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)

10

☐

An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**

11

☐

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g

a

☐

Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization **You must complete Part IV, Sections A and B.**

b

☐

Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) **You must complete Part IV, Sections A and C.**

c

☐

Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) **You must complete Part IV, Sections A, D, and E.**

d

☐

Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) **You must complete Part IV, Sections A and D, and Part V.**

e

☐

Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization

f

Enter the number of supported organizations _____

g

Provide the following information about the supported organization(s)

| (i)Name of supported organization | (ii) EIN | (iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions)) | (iv) Is the organization listed in your governing document? | | (v) Amount of monetary support (see instructions) | (vi) Amount of other support (see instructions) |
|-----------------------------------|----------|--|---|----|---|---|
| | | | Yes | No | | |
| | | | | | | |
| | | | | | | |
| Total | | | | | | |

Part II

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) 2010 | (b) 2011 | (c) 2012 | (d) 2013 | (e) 2014 | (f) Total |
| 1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.") | | | | | | |
| 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | |
| 3 The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | |
| 4 Total. Add lines 1 through 3 | | | | | | |
| 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) | | | | | | |
| 6 Public support. Subtract line 5 from line 4 | | | | | | |

| Section B. Total Support | | | | | | |
|--|----------|----------|----------|----------|----------|-----------|
| Calendar year (or fiscal year beginning in) ▶ | (a) 2010 | (b) 2011 | (c) 2012 | (d) 2013 | (e) 2014 | (f) Total |
| 7 Amounts from line 4 | | | | | | |
| 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources | | | | | | |
| 9 Net income from unrelated business activities, whether or not the business is regularly carried on | | | | | | |
| 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) | | | | | | |
| 11 Total support Add lines 7 through 10 | | | | | | |
| 12 Gross receipts from related activities, etc (see instructions) | | | | | 12 | |
| 13 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 | | | | | | |
|---|--|----|--|--|--|---|
| 14 Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f)) | | 14 | | | | |
| 15 Public support percentage for 2013 Schedule A, Part II, line 14 | | 15 | | | | |
| 16a 33 1/3% support test—2014. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization | | | | | | ▶ |
| b 33 1/3% support test—2013. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization | | | | | | ▶ |
| 17a 10%-facts-and-circumstances test—2014. 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 VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization | | | | | | ▶ |
| b 10%-facts-and-circumstances test—2013. 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 VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization | | | | | | ▶ |
| 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions | | | | | | ▶ |

Part IIISupport 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.)

Section A. Public Support

| Calendar year (or fiscal year beginning in) ▶ | (a) 2010 | (b) 2011 | (c) 2012 | (d) 2013 | (e) 2014 | (f) Total |
|---|-----------|-----------|-----------|-----------|------------|------------|
| 1Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.") | 2,682,824 | 1,460,192 | 2,910,730 | 2,952,505 | 7,906,237 | 17,912,488 |
| 2Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose | 2,741,813 | 3,253,437 | 3,774,747 | 3,808,584 | 4,189,772 | 17,768,353 |
| 3Gross receipts from activities that are not an unrelated trade or business under section 513 | | | | | | |
| 4Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | |
| 5The value of services or facilities furnished by a governmental unit to the organization without charge | 5,113 | 15,556 | 15,556 | 109,212 | 109,212 | 254,649 |
| 6Total. Add lines 1 through 5 | 5,429,750 | 4,729,185 | 6,701,033 | 6,870,301 | 12,205,221 | 35,935,490 |
| 7aAmounts included on lines 1, 2, and 3 received from disqualified persons | | | | | | 0 |
| bAmounts 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 | | | | | | 0 |
| cAdd lines 7a and 7b | | | | | | 0 |
| 8Public support (Subtract line 7c from line 6.) | | | | | | 35,935,490 |

Section B. Total Support

| Calendar year (or fiscal year beginning in) ▶ | (a) 2010 | (b) 2011 | (c) 2012 | (d) 2013 | (e) 2014 | (f) Total |
|---|-----------|-----------|-----------|-----------|------------|------------|
| 9Amounts from line 6 | 5,429,750 | 4,729,185 | 6,701,033 | 6,870,301 | 12,205,221 | 35,935,490 |
| 10aGross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources | 14,557 | 6,578 | 10,667 | | 41 | 31,843 |
| bUnrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 | | | | | | |
| cAdd lines 10a and 10b | 14,557 | 6,578 | 10,667 | | 41 | 31,843 |
| 11Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on | | | | | | |
| 12Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) | 23,331 | 20,671 | 20,012 | 50,029 | 31,770 | 145,813 |
| 13Total support. (Add lines 9, 10c, 11, and 12.) | 5,467,638 | 4,756,434 | 6,731,712 | 6,920,330 | 12,237,032 | 36,113,146 |
| 14First 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

| | | |
|--|----|----------|
| 15Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f)) | 15 | 99.510 % |
| 16Public support percentage from 2013 Schedule A, Part III, line 15 | 16 | 99.400 % |

Section D. Computation of Investment Income Percentage

| | | |
|---|----|---------|
| 17Investment income percentage for 2014 (line 10c, column (f) divided by line 13, column (f)) | 17 | 0.090 % |
| 18Investment income percentage from 2013 Schedule A, Part III, line 17 | 18 | 0.190 % |

- 19a33 1/3% support tests—2014. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶
- b33 1/3% support tests—2013. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶
- 20Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

| | Yes | No |
|--|-----|----|
| 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain. | 1 | |
| 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2). | 2 | |
| 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below. | 3a | |
| b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination. | 3b | |
| c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use. | 3c | |
| 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below. | 4a | |
| b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations. | 4b | |
| c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes. | 4c | |
| 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document). | 5a | |
| b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document? | 5b | |
| c Substitutions only. Was the substitution the result of an event beyond the organization's control? | 5c | |
| 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI . | 6 | |
| 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990). | 7 | |
| 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part II of Schedule L (Form 990). | 8 | |
| 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI . | 9a | |
| b Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI . | 9b | |
| c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI . | 9c | |
| 10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below. | 10a | |
| b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings). | 10b | |
| 11 Has the organization accepted a gift or contribution from any of the following persons? | | |
| a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization? | 11a | |
| b A family member of a person described in (a) above? | 11b | |
| c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI. | 11c | |

Part IV

Supporting Organizations (continued)

Section B. Type I Supporting Organizations

| | Yes | No |
|--|-----|----|
| 1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. | | |
| 2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization. | | |

Section C. Type II Supporting Organizations

| | Yes | No |
|---|-----|----|
| 1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s). | | |

Section D. All Type III Supporting Organizations

| | Yes | No |
|---|-----|----|
| 1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? | | |
| 2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). | | |
| 3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard. | | |

Section E. Type III Functionally-Integrated Supporting Organizations

| | | | |
|--|----|-----|----|
| 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions) | | | |
| a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below. | | | |
| b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below. | | | |
| c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions). | | | |
| 2 <u>Activities Test</u> Answer (a) and (b) below. | | Yes | No |
| a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities. | 2a | | |
| b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement. | 2b | | |
| 3 <u>Parent of Supported Organizations</u> Answer (a) and (b) below. | | | |
| a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI. | 3a | | |
| b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard. | 3b | | |

Part V – Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E

| Section A - Adjusted Net Income | | (A) Prior Year | (B) Current Year (optional) |
|---------------------------------|--|----------------|-----------------------------|
| 1 | Net short-term capital gain | 1 | |
| 2 | Recoveries of prior-year distributions | 2 | |
| 3 | Other gross income (see instructions) | 3 | |
| 4 | Add lines 1 through 3 | 4 | |
| 5 | Depreciation and depletion | 5 | |
| 6 | Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) | 6 | |
| 7 | Other expenses (see instructions) | 7 | |
| 8 | Adjusted Net Income (subtract lines 5, 6 and 7 from line 4) | 8 | |

| Section B - Minimum Asset Amount | | (A) Prior Year | (B) Current Year (optional) |
|----------------------------------|--|----------------|-----------------------------|
| 1 | Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year) | 1 | |
| a | Average monthly value of securities | 1a | |
| b | Average monthly cash balances | 1b | |
| c | Fair market value of other non-exempt-use assets | 1c | |
| d | Total (add lines 1a, 1b, and 1c) | 1d | |
| e | Discount claimed for blockage or other factors (explain in detail in Part VI) _____ | | |
| 2 | Acquisition indebtedness applicable to non-exempt use assets | 2 | |
| 3 | Subtract line 2 from line 1d | 3 | |
| 4 | Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions) | 4 | |
| 5 | Net value of non-exempt-use assets (subtract line 4 from line 3) | 5 | |
| 6 | Multiply line 5 by .035 | 6 | |
| 7 | Recoveries of prior-year distributions | 7 | |
| 8 | Minimum Asset Amount (add line 7 to line 6) | 8 | |

| Section C - Distributable Amount | | | Current Year |
|----------------------------------|--|---|--------------|
| 1 | Adjusted net income for prior year (from Section A, line 8, Column A) | 1 | |
| 2 | Enter 85% of line 1 | 2 | |
| 3 | Minimum asset amount for prior year (from Section B, line 8, Column A) | 3 | |
| 4 | Enter greater of line 2 or line 3 | 4 | |
| 5 | Income tax imposed in prior year | 5 | |
| 6 | Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) | 6 | |
| 7 | <input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions) | | |

| Section D - Distributions | Current Year |
|--|--------------|
| 1 Amounts paid to supported organizations to accomplish exempt purposes | |
| 2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity | |
| 3 Administrative expenses paid to accomplish exempt purposes of supported organizations | |
| 4 Amounts paid to acquire exempt-use assets | |
| 5 Qualified set-aside amounts (prior IRS approval required) | |
| 6 Other distributions (describe in Part VI) See instructions | |
| 7 Total annual distributions. Add lines 1 through 6 | |
| 8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions | |
| 9 Distributable amount for 2014 from Section C, line 6 | |
| 10 Line 8 amount divided by Line 9 amount | |

| Section E - Distribution Allocations (see instructions) | (i) Excess Distributions | (ii) Underdistributions Pre-2014 | (iii) Distributable Amount for 2014 |
|---|-----------------------------|--|---|
| 1 Distributable amount for 2014 from Section C, line 6 | | | |
| 2 Underdistributions, if any, for years prior to 2014 (reasonable cause required--see instructions) | | | |
| 3 Excess distributions carryover, if any, to 2014 | | | |
| a From 2009. | | | |
| b From 2010. | | | |
| c From 2011. | | | |
| d From 2012. | | | |
| e From 2013. | | | |
| f Total of lines 3a through e | | | |
| g Applied to underdistributions of prior years | | | |
| h Applied to 2014 distributable amount | | | |
| i Carryover from 2009 not applied (see instructions) | | | |
| j Remainder Subtract lines 3g, 3h, and 3i from 3f | | | |
| 4 Distributions for 2014 from Section D, line 7 \$ | | | |
| a Applied to underdistributions of prior years | | | |
| b Applied to 2014 distributable amount | | | |
| c Remainder Subtract lines 4a and 4b from 4 | | | |
| 5 Remaining underdistributions for years prior to 2014, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions) | | | |
| 6 Remaining underdistributions for 2014 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions) | | | |
| 7 Excess distributions carryover to 2015. Add lines 3j and 4c | | | |
| 8 Breakdown of line 7 | | | |
| a From 2010. | | | |
| b From 2011. | | | |
| c From 2012. | | | |
| d From 2013. | | | |
| e From 2014. | | | |

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Return Reference

Explanation

SCHEDULE D
(Form 990)

Supplemental Financial Statements

OMB No 1545-0047

2014

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

► 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.

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

| | |
|---|--|
| Name of the organization FUND FOR PHILADELPHIA | Employer identification number 23-2174863 |
|---|--|

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

| | | |
|---|---|------------------------------|
| | (a) Donor advised funds | (b) Funds and other accounts |
| 1 | Total number at end of year | |
| 2 | Aggregate value of contributions to (during year) | |
| 3 | Aggregate value of grants from (during year) | |
| 4 | Aggregate value at end of year | |
| 5 | Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div> | |
| 6 | Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div> | |

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1

Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or education) ☐ Preservation of an historically important land area
☐ Protection of natural habitat ☐ Preservation of a certified historic structure
☐ Preservation of open space

2

Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

| | |
|---|--|
| | Held at the End of the Year |
| a | Total number of conservation easements |
| b | Total acreage restricted by conservation easements |
| c | Number of conservation easements on a certified historic structure included in (a) |
| d | Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register |

3

Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ►

4

Number of states where property subject to conservation easement is located ►

5

Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes ☐ No

6

Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ►

7

Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ► \$

8

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

☐ Yes ☐ No

9

In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a

If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b

If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenue included in Form 990, Part VIII, line 1

► \$

(ii) Assets included in Form 990, Part X

► \$

2

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a

Revenue included in Form 990, Part VIII, line 1

► \$

b

Assets included in Form 990, Part X

► \$

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

Cat No 52283D

Schedule D (Form 990) 2014

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

- 3

Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)
- a

☐ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other
- 4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII
- 5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☐ No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No
- b

If "Yes," explain the arrangement in Part XIII and complete the following table
- c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance
- | | |
|----|--------|
| | Amount |
| 1c | |
| 1d | |
| 1e | |
| 1f | |
- 2a

Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?

☐ Yes

☐ No
- b

If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

☐

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

- | | (a)Current year | (b)Prior year | b (c)Two years back | (d)Three years back | (e)Four years back |
|----|--|---------------|---------------------|---------------------|--------------------|
| 1a | Beginning of year balance | | | | |
| b | Contributions | | | | |
| c | 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 current year end balance (line 1g, column (a)) held as
- a

Board designated or quasi-endowment
- b

Permanent endowment
- c

Temporarily restricted endowment

The percentages in lines 2a, 2b, and 2c should equal 100%
- 3a

Are there endowment funds not in the possession of the organization that are held and administered for the organization by
- (i)

unrelated organizations

(ii)

related organizations
- b

If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?
- | | | |
|--------|-----|----|
| | Yes | No |
| 3a(i) | | |
| 3a(ii) | | |
| 3b | | |
- 4

Describe in Part XIII the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

| Description of property | (a) Cost or other basis (investment) | (b)Cost or other basis (other) | (c) Accumulated depreciation | (d) Book value |
|--|--------------------------------------|--------------------------------|------------------------------|----------------|
| 1a Land | | | | |
| b Buildings | | | | |
| c Leasehold improvements | | | | |
| d Equipment | | | | |
| e Other | | | | |
| Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).) | | | | 0 |

Part XI

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

| | | | |
|---|--|----|------------|
| 1 | Total revenue, gains, and other support per audited financial statements | 1 | 12,237,032 |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12 | | |
| a | Net unrealized gains (losses) on investments | 2a | |
| b | Donated services and use of facilities | 2b | 109,212 |
| c | Recoveries of prior year grants | 2c | |
| d | Other (Describe in Part XIII) | 2d | |
| e | Add lines 2a through 2d | 2e | 109,212 |
| 3 | Subtract line 2e from line 1 | 3 | 12,127,820 |
| 4 | Amounts included on Form 990, Part VIII, line 12, but not on line 1 | | |
| a | Investment expenses not included on Form 990, Part VIII, line 7b | 4a | |
| b | Other (Describe in Part XIII) | 4b | |
| c | Add lines 4a and 4b | 4c | 0 |
| 5 | Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) | 5 | 12,127,820 |

Part XII

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

| | | | |
|---|---|----|-----------|
| 1 | Total expenses and losses per audited financial statements | 1 | 7,687,843 |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25 | | |
| a | Donated services and use of facilities | 2a | 109,212 |
| b | Prior year adjustments | 2b | |
| c | Other losses | 2c | |
| d | Other (Describe in Part XIII) | 2d | |
| e | Add lines 2a through 2d | 2e | 109,212 |
| 3 | Subtract line 2e from line 1 | 3 | 7,578,631 |
| 4 | Amounts included on Form 990, Part IX, line 25, but not on line 1: | | |
| a | Investment expenses not included on Form 990, Part VIII, line 7b | 4a | |
| b | Other (Describe in Part XIII) | 4b | |
| c | Add lines 4a and 4b | 4c | 0 |
| 5 | Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) | 5 | 7,578,631 |

Part XIII

Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

| Return Reference | Explanation |
|------------------|---|
| PART X, LINE 2 | THE FUND IS A NOT-FOR-PROFIT ORGANIZATION THAT IS EXEMPT FROM FEDERAL INCOME TAX UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE. IN ADDITION, THE FUND QUALIFIES FOR CHARITABLE CONTRIBUTION DEDUCTIONS AND HAS BEEN CLASSIFIED AS AN ORGANIZATION THAT IS NOT A PRIVATE FOUNDATION. INCOME WHICH IS NOT RELATED TO EXEMPT PURPOSES, LESS APPLICABLE DEDUCTIONS, IS SUBJECT TO FEDERAL AND STATE CORPORATE INCOME TAXES. THE FOUNDATION HAD NO NET UNRELATED BUSINESS INCOME FOR THE YEARS ENDED DECEMBER 31, 2014 AND 2013. MANAGEMENT EVALUATED THE FUND'S TAX POSITIONS AND CONCLUDED THAT THE FUND HAD TAKEN NO UNCERTAIN TAX POSITIONS THAT REQUIRE ADJUSTMENT TO THE FINANCIAL STATEMENTS. THE FUND FILES INCOME TAX RETURNS IN THE U.S. FEDERAL JURISDICTION. GENERALLY, THE FUND IS NO LONGER SUBJECT TO FEDERAL INCOME TAX EXAMINATIONS FOR YEARS BEFORE 2011. |
| | |
| | |
| | |
| | |
| | |
| | |

[illegible]

Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization
FUND FOR PHILADELPHIA

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

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

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

OMB No 1545-0047

2014

Open to Public
Inspection

Employer identification number
23-2174863

Part I General Information on Grants and Assistance

1

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ Yes ☐ No

2

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|---------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| See Additional Data Table | | | | | | | |

2

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

27

3

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

4

Part III

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

| (a)Type of grant or assistance | (b)Number of recipients | (c)Amount of cash grant | (d)Amount of non-cash assistance | (e)Method of valuation (book, FMV, appraisal, other) | (f)Description of non-cash assistance |
|--------------------------------|-------------------------|-------------------------|----------------------------------|--|---------------------------------------|
| (1) MARATHON PRIZES | 42 | 40,802 | | | |
| (2) DILWORTH AWARD RECEIPT | 1 | 6,775 | | | |
| (3) SCHOLARSHIP AWARDS | 13 | 17,423 | | | |
| (4) ART AWARD RECIPIENTS | 16 | 2,400 | | | |

Part IV

Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

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

Additional Data

Software ID:
Software Version:
EIN: 23-2174863
Name: FUND FOR PHILADELPHIA

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV , appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| BUSTLETON BENGALS CLUBPO BOX 6103 PHILADELPHIA,PA 19115 | 23-2009069 | 501(C)(3) | 10,000 | | | | GENERAL SUPPORT |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV , appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| CITY YOUTH ASSOCIATIONPO BOX 5235 PHILADELPHIA,PA 19141 | 23-3024239 | 501(C)(3) | 10,000 | | | | GENERAL SUPPORT |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| FOX ROK ATHLETIC ASSN 7723 LOVETTA AVE PHILADELPHIA, PA 19111 | 23-2160330 | 501(C)(3) | 15,000 | | | | GENERAL SUPPORT |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| LAWNCREST LIONS6000 RISING SUN AVE PHILADELPHIA, PA 19111 | 27-1259538 | 501(C)(3) | 10,000 | | | | GENERAL SUPPORT |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV , appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| NORTHWEST RAIDERS ATHLETIC ASSOCIATION C/O LONNIE YOUNG RECREATION CENTER 1100 E CHELTEN AVENUE PHILADELPHIA,PA 19138 | 23-2136595 | 501(C)(3) | 15,000 | | | | GENERAL SUPPORT |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| OAK LANE YOUTH ASSOCIATIONPO BOX 14197 PHILADELPHIA, PA 19138 | 23-7261186 | 501(C)(3) | 10,000 | | | | GENERAL SUPPORT |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV , appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| OXFORD CIRCLE ATHLETIC ASSOCIATION5051 SUMMERDALE AVE PHILADELPHIA,PA 19124 | 23-2884166 | 501(C)(3) | 15,000 | | | | GENERAL SUPPORT |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV , appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| RUTGERS UNIVERSITY FOUNDATIONWINANTS HALL 7 COLLEGE AVENUE NEW BRUNSWICK, NJ 08901 | 23-7318742 | 501(C)(3) | 25,000 | | | | DIGITAL ENCYCLOPEDIA |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV , appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| MOTHERS IN CHARGE1415 N BROAD STREET SUITE 229 PHILADELPHIA,PA 19122 | 30-0185280 | 501(C)(3) | 25,000 | | | | FUNDING OF A CONFERENCE |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| CENTER FOR ARCHITECTURE1218 ARCH STREET PHILADELPHIA, PA 19107 | 76-0725828 | 501(C)(3) | 25,555 | | | | DESIGNPHILADELPHIA FESTIVAL |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV , appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|------------|------------------------------------|--------------------------|-----------------------------------|--|--|--|
| TRUSTEES OF THE UNIVERSITY OF PENNSYLVANIABLDG 3451 WALNUT STREET P221 PHILADELPHIA,PA 19104 | 23-1352685 | 501(C)(3) | 41,055 | | | | FUNDING FOR OUT OF SCHOOL TIME RESOURCE CENTER |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV , appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| PENNSYLVANIA HORTICULTURAL SOCIETY 100 N 20TH STREET 5TH FLOOR PHILADELPHIA,PA 19103 | 23-1352265 | 501(C)(3) | 10,000 | | | | GENERAL SUPPORT |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|--|
| PHILADELPHIA READS325 CHESTNUT ST SUITE 903 PHILADELPHIA, PA 19106 | 27-1723052 | 501(C)(3) | 10,000 | | | | EXPANSION OF CHILDREN'S LITERACY PROGRAM |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| PEOPLE'S EMERGENCY CENTER325 N 39TH ST PHILADELPHIA, PA 19104 | 23-2017882 | 501(C)(3) | 30,000 | | | | FUNDING FOR TIME EXCHANGE PROJECT |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV , appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|------------|------------------------------------|--------------------------|-----------------------------------|--|--|---|
| COMMUNITY DESIGN COLLABORATIVE OF PHILADELPHIA1216 ARCH ST PHILADELPHIA,PA 19107 | 23-2835435 | 501(C)(3) | 20,000 | | | | DESIGN PROTOTYPES FOR TEMPORARY AND LONG TERM REUSE OF VACANT SCHOOLS |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV , appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|------------|------------------------------------|--------------------------|-----------------------------------|--|--|---|
| KIVA MICROFUNDS875 HOWARD ST STE 340 SAN FRANSICSO, CA 94103 | 71-0992446 | 501(C)(3) | 75,000 | | | | SUPPORT LAUNCH OF "KIVA CITY PHILADELPHIA " |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV , appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| REANIMATOR COFFEE LLC 310 MASTER ST PHILADELPHIA,PA 19122 | 27-4748496 | | 18,950 | | | | BUSINESS EXPANSION GRANT |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV , appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|------------|------------------------------------|--------------------------|-----------------------------------|--|--|---|
| NORTH LIBERTY REALTY LLC1344 NORTH AMERICAN ST PHILADELPHIA,PA 19122 | 26-4676891 | | 170,859 | | | | NEIGHBORHOOD ECONOMIC DEVELOPMENT GRANT |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|---|
| VEKYO INC216 FAIRMOUNT AVE PHILADELPHIA, PA 19123 | 56-2307507 | | 110,000 | | | | NEIGHBORHOOD ECONOMIC DEVELOPMENT GRANT |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| PROJECT HOME1515 FAIRMOUNT AVE PHILADELPHIA, PA 19130 | 23-2555950 | 501(C)(3) | 200,000 | | | | ECONOMIC DEVELOPMENT GRANT |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV , appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| URBAN AFFAIRS COALITION1207 CHESTNUT ST STE 700 PHILADELPHIA,PA 19107 | 23-7046393 | 501(C)(3) | 21,000 | | | | TAX PREPARATION WORKSHOP |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV , appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| JUNIATA THUNDERCATS YOUTH ORGANIZATIONPO BOX 25455 PHILADELPHIA,PA 19140 | 20-8117380 | 501(C)(3) | 10,000 | | | | GENERAL SUPPORT |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV , appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| OLNEY TOUCHDOWN CLUB 6001 A ST PHILADELPHIA,PA 19120 | 23-2847856 | 501(C)(3) | 8,500 | | | | GENERAL SUPPORT |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| FRANKFORD CHARGERS SPORTS1700 MEADOW ST PHILADELPHIA, PA 19124 | 23-2124905 | 501(C)(3) | 8,500 | | | | GENERAL SUPPORT |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| ENON TABERNACLE BAPTIST CHURCH2800 W CHELTENHAM AVE PHILADELPHIA, PA 19119 | 92-0194648 | 501(C)(3) | 10,000 | | | | GENERAL SUPPORT |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| RESSURECTION BAPTIST CHURCH1610 N 54TH STREET PHILADELPHIA, PA 19131 | 23-3008732 | 501(C)(3) | 7,500 | | | | GENERAL SUPPORT |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV , appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| BLESSED SARNELLI COMMUNITY INCPO BOX 29303 PHILADELPHIA, PA 19125 | 03-0599575 | 501(C)(3) | 7,500 | | | | GENERAL SUPPORT |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| SALVATION ARMY PIONEER CORP1920 ALLEGHENY AVE PHILADELPHIA, PA 19134 | 13-5562351 | 501(C)(3) | 7,500 | | | | GENERAL SUPPORT |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| BETHEL PRESBYTERIAN 1900 WYORK ST PHILADELPHIA, PA 19132 | 23-1725540 | 501(C)(3) | 7,500 | | | | GENERAL SUPPORT |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| FAIRMONT PARK HISTORIC PRESERVATION TRUST 6245 WISSAHICKON AVE PHILADELPHIA, PA 19144 | 23-2703821 | 501(C)(3) | 15,500 | | | | WALTER HANCOCK AIR SCULPTURE |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| MASKAR DESIGN1608 WALNUT ST PHILADELPHIA, PA 19103 | 23-2837900 | | 7,221 | | | | VARIOUS DESIGN WORK |

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

**Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.**
▶ Attach to Form 990 or 990-EZ.
**▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at
www.irs.gov/form990.**

OMB No 1545-0047

2014

**Open to Public
Inspection**

| | |
|---|--|
| Name of the organization FUND FOR PHILADELPHIA | Employer identification number 23-2174863 |
|---|--|

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

| Return Reference | Explanation |
|----------------------------------|--|
| FORM 990, PART III, LINE 1 | <p>THE FUND'S GOAL IS TO ADVANCE THE MAYOR OF PHILADELPHIA'S PRIORITIES THROUGH LEVERAGING PUBLIC-PRIVATE PARTNERSHIPS TO BENEFIT THE PEOPLE OF PHILADELPHIA. VALUES STATEMENT: THE MAYOR'S FUND FOR PHILADELPHIA (BOARD, STAFF AND VOLUNTEERS) IS COMMITTED TO FULLY INTEGRATING THE FOLLOWING VALUES INTO ALL THAT WE DO. THESE ARE THE PRINCIPALS THAT WILL GUIDE OUR WORK ON BEHALF OF THE MAYOR AND FOR THE RESIDENTS OF PHILADELPHIA:</p> <p>STEWARDSHIP: THE MAYOR'S FUND IS COMMITTED TO THE HIGHEST LEVEL OF STEWARDSHIP OF ALL PUBLIC AND PRIVATE FUNDS, WITH THE HIGHEST LEVEL OF INTEGRITY, TRANSPARENCY AND EFFICIENCY.</p> <p>EQUALITY: WE SEEK TO INTEGRATE EQUALITY IN ALL THAT WE DO AS AN EMPLOYER, FUNDER, AND IN OUR ROLE AS A POINT OF ENTRY FOR PUBLIC-PRIVATE PARTNERSHIPS IN PHILADELPHIA.</p> <p>COLLABORATION: THE FUND IS COMMITTED TO FACILITATING COLLABORATION BETWEEN THE PUBLIC AND PRIVATE SECTORS TO ENSURE A SUCCESSFUL AND PROSPEROUS PHILADELPHIA.</p> <p>EXCELLENCE: THE FUND IS COMMITTED TO EXCELLENCE IN ALL THAT WE DO, AND TO ALWAYS GO THE EXTRA STEP FOR THE RESIDENTS OF PHILADELPHIA.</p> <p>SIGNIFICANT ACTIVITIES: THE MAYOR'S FUND FOR PHILADELPHIA SUPPORTS PROGRAMS LED BY CITY DEPARTMENTS AND COMMUNITY DEVELOPMENT ORGANIZATIONS THAT ACHIEVE THE MAYOR'S GOALS. THE FUND SERVES AS THE FISCAL AGENT OR A FISCAL SPONSOR FOR MORE THAN 100 CIVIC PROGRAMS, AND THE FOLLOWING IS A SAMPLING OF THE WORK THAT WE SUPPORT:</p> <p>MAYOR'S 5 GOALS:</p> <ol style="list-style-type: none">1. PHILADELPHIA BECOMES ONE OF THE SAFEST CITIES IN AMERICA.2. THE EDUCATION AND HEALTH OF PHILADELPHIANS IMPROVE.3. PHILADELPHIA IS A PLACE OF CHOICE.4. PHILADELPHIA BECOMES THE GREENEST AND MOST SUSTAINABLE CITY IN AMERICA.5. PHILADELPHIA GOVERNMENT WORKS EFFICIENTLY AND EFFECTIVELY, WITH INTEGRITY AND RESPONSIVENESS. |

| Return Reference | Explanation |
|----------------------------------|---|
| FORM 990, PART III, LINE 2 | <p>NEW PROGRAM KIVA KIVA CITY PHILADELPHIA IS A PARTNERSHIP BETWEEN THE CITY OF PHILADELPHIA'S DEPARTMENT OF COMMERCE AND KIVA ORG TO BRING CROWD FUNDED MICRO LENDING TO PHILADELPHIA'S SMALL BUSINESS COMMUNITY</p> <p>NEW PROGRAM PHILLY BIKE SHARE THE BETTER BIKE SHARE PARTNERSHIP IS A GRANT-FUNDED COLLABORATION BETWEEN THE CITY OF PHILADELPHIA, BICYCLE COALITION OF GREATER PHILADELPHIA, THE NATIONAL ASSOCIATION OF CITY TRANSPORTATION OFFICIALS (NACTO), AND PEOPLEFORBIKES TO INCREASE ACCESS TO AND USE OF BIKE SHARE IN UNDERSERVED COMMUNITIES BIKE SHARE REPRESENTS AN INEXPENSIVE, ACCESSIBLE, AND HEALTHY NEW FORM OF PUBLIC TRANSIT</p> <p>NEW PROGRAM A GATHERING OF LEADERS - CITIES UNITED LAUNCHED IN 2011, CITIES UNITED IS A NATIONAL MOVEMENT FOCUSED ON ELIMINATING THE VIOLENCE IN A MERICAN CITIES RELATED TO AFRICAN AMERICAN MEN AND BOYS CURRENTLY 56 MAYORS PARTICIPATE IN CITIES UNITED, WITH THE INTENTION TO REDUCE VIOLENCE BY 50%, BY THE YEAR 2020, IN EACH OF THEIR CITIES UNDER THE LEADERSHIP OF PHILADELPHIA MAYOR MICHAEL A NUTTER AND NEW ORLEANS' MAYOR MITCH LANDRIEU, CITIES UNITED HAS GROWN TO SUPPORT A NATIONAL NETWORK OF MAYORS COMMITTED TO WORKING IN PARTNERSHIP WITH COMMUNITY LEADERS, FAMILIES, YOUTH, PHILANTHROPIC ORGANIZATIONS, GOVERNMENT OFFICIALS, AND OTHER STAKEHOLDERS TO REDUCE THE EPIDEMIC OF HOMICIDE-RELATED DEATHS AND INJURIES PLAGUING AFRICAN AMERICAN MEN AND BOYS</p> |

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

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

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

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

| Return Reference | Explanation | |
|-----------------------------|--|--|
| FORM 990, PART IX, LINE 11G | ARTISTS/ENTERTAINMENT/MODELS - DELL PERFORMANCE PROGRAM SERVICE EXPENSES 56,288 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 56,288 ARTISTS/ENTERTAINMENT/MODELS - FUN SAFE PHILLY SUMMER PROGRAM SERVICE EXPENSES 600 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 600 ARTISTS/ENTERTAINMENT/MODELS - HOLIDAY PARTY PROGRAM SERVICE EXPENSES 4,350 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 4,350 ARTISTS/ENTERTAINMENT/MODELS - JOE FRAZIER STATUE PROGRAM SERVICE EXPENSES 45,000 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 45,000 ARTISTS/ENTERTAINMENT/MODELS - OPERATION BROTHERLY LOVE CARNIVAL PROGRAM SERVICE EXPENSES 15,626 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 15,626 ARTISTS/ENTERTAINMENT/MODELS - PHASION PHEST PROGRAM SERVICE EXPENSES 7,200 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 7,200 ARTISTS/ENTERTAINMENT/MODELS - PHILADELPHIA MARATHON PROGRAM SERVICE EXPENSES 1,325 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 1,325 ARTISTS/ENTERTAINMENT/MODELS - POETRY PROGRAM SERVICE EXPENSES 6,000 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 6,000 CATERING - A GATHERING OF LEADERS PROGRAM SERVICE EXPENSES 20,000 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 20,000 CATERING - ANTI-GRAFFITI NETWORK PROGRAM SERVICE EXPENSES 191 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 191 CATERING - CEO UNITING TO FIGHT POVERTY SUMMIT PROGRAM SERVICE EXPENSES 206 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 206 CATERING - CITIES UNITED PROGRAM SERVICE EXPENSES 886 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 886 CATERING - CIVIC ENGAGEMENT VOLUNTEERS PROGRAM SERVICE EXPENSES 4,749 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 4,749 CATERING - CPI PROGRAM EXPANSION PROGRAM SERVICE EXPENSES 6,237 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 6,237 CATERING - DHC#1 STD TRAINING PROGRAM SERVICE EXPENSES 185 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 185 CATERING - DILWORTH AWARDS PROGRAM SERVICE EXPENSES 1,622 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 1,622 CATERING - EMPOWERMENT ZONE CATERING AND PROFESSIONAL SERVICES PROGRAM SERVICE EXPENSES 1,588 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 1,588 CATERING - GRADUATION COACHES PROGRAM SERVICE EXPENSES 978 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 978 CATERING - HOLIDAY PARTY PROGRAM SERVICE EXPENSES 11,925 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 11,925 CATERING - MAYOR'S OFFICE FOR THE AGING PROGRAM SERVICE EXPENSES 270 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 270 CATERING - MAYOR'S RECEPTION ROOM PROGRAM SERVICE EXPENSES 143 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 143 CATERING - NEIGHBORHOOD PARKS PROGRAM SERVICE EXPENSES 14,083 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 14,083 CATERING - OACCE OFFICE RENOVATIONS PROGRAM SERVICE EXPENSES 140 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 140 CATERING - OPERATION BROTHERLY LOVE CARNIVAL PROGRAM SERVICE EXPENSES 6,080 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 6,080 CATERING - OUT OF SCHOOL TIME PROGRAM SERVICE EXPENSES 277 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 277 CATERING - PARKWAY ACTIVATION PILOT PROJECT PROGRAM SERVICE EXPENSES 3,000 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 3,000 CATERING - PHASHION PHEST PROGRAM SERVICE EXPENSES 2,500 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 2,500 CATERING - PHILA 2035 IMPLEMENTATION / PERFORMANCE MEASURE PROGRAM SERVICE EXPENSES 2,649 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 2,649 CATERING - PHILADELPHIA MARATHON PROGRAM SERVICE EXPENSES 76,317 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 76,317 CATERING - PHILLY BIKE SHARE PROGRAM SERVICE EXPENSES 548 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 548 CATERING - PHILLY CHAMPIONS FUND PROGRAM SERVICE EXPENSES 7,520 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 7,520 CATERING - US2020 PROGRAM SERVICE EXPENSES 1,248 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 1,248 CONSULTING - AMERICAN STREET EMPOWERMENT ZONE PROGRAM SERVICE EXPENSES 107,487 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 T | |

| Return Reference | Explanation | |
|------------------|-----------------------------|--|
| | FORM 990, PART IX, LINE 11G | <p>OTAL EXPENSES 107,487 CONSULTING - BARTRAM'S MILE RIVERFRONT TRAIL PROGRAM SERVICE EXPENSES 178,075 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 178,075 CONSULTING - CIVIC ENGAGEMENT VOLUNTEERS PROGRAM SERVICE EXPENSES 52,743 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 52,743 CONSULTING - COLLEGE ACCESS PROGRAM SERVICE EXPENSES 5,640 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 5,640 CONSULTING - CPI PROGRAM EXPANSION PROGRAM SERVICE EXPENSES 85,478 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 85,478 CONSULTING - DILWORTH AWARDS PROGRAM SERVICE EXPENSES 2,301 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 2,301 CONSULTING - DOLLARWISE INNOVATION PROGRAM SERVICE EXPENSES 7,779 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 7,779 CONSULTING - EARLY CHILDHOOD PROGRAM SERVICE EXPENSES 66,659 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 66,659 CONSULTING - FUN SAFE PHILLY SUMMER PROGRAM SERVICE EXPENSES 673 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 673 CONSULTING - GRADUATION COACHES PROGRAM SERVICE EXPENSES 4,690 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 4,690 CONSULTING - HOLIDAY PARTY PROGRAM SERVICE EXPENSES 1,000 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 1,000 CONSULTING - ITALIAN FESTIVITIES PROGRAM SERVICE EXPENSES 25,000 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 25,000 CONSULTING - JOE FRAZIER STATUE PROGRAM SERVICE EXPENSES 45,000 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 45,000 CONSULTING - KIVA PROGRAM SERVICE EXPENSES 2,200 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 2,200 CONSULTING - LOVE PARK PROGRAM SERVICE EXPENSES 74,681 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 74,681 CONSULTING - MAYOR'S COMMISSION ON LITERACY PROGRAM SERVICE EXPENSES 30,333 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 30,333 CONSULTING - MAYOR'S OFFICE OF COMMUNITY EMPOWERMENT AND OPPORTUNITY PROGRAM SERVICE EXPENSES 1,645 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 1,645 CONSULTING - MAYOR'S RECEPTION ROOM PROGRAM SERVICE EXPENSES 15,263 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 15,263 CONSULTING - MISCELLANEOUS MATCHING FUNDS PROGRAM SERVICE EXPENSES 175 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 175 CONSULTING - MORTGAGE CRISIS PROGRAM SERVICE EXPENSES 50,237 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 50,237 CONSULTING - NEIGHBORHOOD PARKS PROGRAM SERVICE EXPENSES 16,040 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 16,040 CONSULTING - NEW WORLD TUTOR TRAINING PROGRAM SERVICE EXPENSES 720 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 720 CONSULTING - NORTH CENTRAL EMPOWERMENT ZONE PROGRAM SERVICE EXPENSES 83,534 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 83,534 CONSULTING - OUT OF SCHOOL TIME PROGRAM SERVICE EXPENSES 357,889 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 357,889 CONSULTING - PARKS AND RECREATION GREENWORKS AND YOUTH DEVELOPMENT PROGRAM SERVICE EXPENSES 450 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 450 CONSULTING - PARKS AND RECREATION PLANNING AND DEVELOPMENT PROGRAM SERVICE EXPENSES 17,990 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 17,990 CONSULTING - PARKWAY ACTIVATION PILOT PROJECT PROGRAM SERVICE EXPENSES 37,326 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 37,326 CONSULTING - PHASION PHEST</p> |