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Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

Open to Public Do not enter social security numbers on this form as it may be made public. Department of the Treasury Information about Form 990 and its instructions is at www.irs.gov/form990. Inspection Internal Revenue Service For the 2014 calendar year, or tax year beginning 7/1/2014 and ending 6/30/2015 D Employer identification number Check if applicable C Name of organization Greater Philadelphia Alliance for Capital & Technologies Address change Doing business as Number and street (or PO box if mail is not delivered to street address) Room/suite 23-3036397 Name change 200 South Broad Street 600 E Telephone number Initial return City or town ZIP code (215) 790-3646 19102-3896 Philadelphia PA inal return/terminated Foreign country name Foreign province/state/county Foreign postal code 2,078,384 Amended return G Gross receipts \$ Application pending F Name and address of principal officer H(a) Is this a group return for subordinates? Dean Miller 200 South Broad Street, Philadelphia, PA 19102 H(b) Are all subordinates included? If "No," attach a list (see instructions) Tax-exempt status 501(c)(3) X | 501(c) (6) **◄** (insert no) 527 Website: ► www.philadelphiapact.com H(c) Group exemption number ▶ X Corporation K Form of organization Trust Association L Year of formation 2000 M State of legal domicile PA Part I Summarv Briefly describe the organization's mission or most significant activities Greater Philadelphia Alliance for Capital & MAR 0 8 2016 Activities & Governance Technologies (PACT)'s mission is to create a strategic Hub for the region's emerging growth companies in the information technology, (continued on Schedule O) Check this box | If the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) 3 27 Number of independent voting members of the governing body (Part VI, line 1b) 4 25 Total number of individuals employed in calendar year 2014 (Part V, line 2a). 5 8 Total number of volunteers (estimate if necessary) 6 140 Total unrelated business revenue from Part VIII, column (C), line 12 7a 0 Net unrelated business taxable income from Form 990-T, line 34 7b 0 **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) 175,170 9 Program service revenue (Part VIII, line 2g) 1,820,570 1,902,344 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) Other revenue (Part VIII, column (A) Times 5 60/80, 9c, 10d, and 11e) 11 371 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 1,821,563 2,078,384 Grants and similar amounts Faid (Part IX, column (A), lines 1–3)
Benefits paid to or for mempers (Part IX, column (A), lines 1–3) 13 0 14 0 0 Salaries, other compensation, employee benefits (Part IX, dolumn (A), lines 5–10) 665,929 15 686,007 Professional fundraising fees (Path & Denn (A) | pe 1fe) 16a O R WIN ON THE THE b Total fundraising expenses (Part IX, column (L) 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 1,025,769 1,285,538 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 1,691,698 1,971,545 19 Revenue less expenses Subtract line 18 from line 12 129,865 106,839 Beginning of Current Year **End of Year** Total assets (Part X, line 16) 20 669,399 834,929 21 Total liabilities (Part X, line 26) 275,242 333,934 Net assets or fund balances Subtract line 21 from line 20 394,157 500,995 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 many officer) is based on all information of which preparer has any knowledge 12/1/2015 Sign Signature of officer Date Here Dean Miller President and CEO Type or print name and title Print/Type preparer's name Date PTIN Preparer's signature Check Paid self-employed Preparer Firm's EIN Firm's name **Use Only** Firm's address ▶ Phone no

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

For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2014)

Form 99	0 (2014) Greater Philadelphia Alliance for Capital & Technologies	23-3036397	Page 2
Par			
1	Briefly describe the organization's mission		
	Greater Philadelphia Alliance for Capital and Technologies (PACT)'s vision is to be a		
	premier resource for emerging growth companies in the information technology, clean		
	technology, and life sciences industries PACT connects emerging growth companies, venture		
	investors, professional advisors, and technology-focused (continued on Schedule O)		
2	Did the organization undertake any significant program services during the year which were not listed on		<u></u>
	the prior Form 990 or 990-EZ?	Yes	X 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	X No
	If "Yes," describe these changes on Schedule O		
4	Describe the organization's program service accomplishments for each of its three largest program service		
	expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and	allocations to others,	1
	the total expenses, and revenue, if any, for each program service reported		
4a	(Code) (Expenses \$ including grants of \$) (Reve	nue \$)
	IMPACT Conference - Unites the key players from the private equity, venture capital and		/
	entrepreneurial communities This day-and-a-half event offers both sponsors and attendees access		
	to emerging companies from the Mid-Atlantic region, networking opportunities with the movers and		
	shakers from our community, and educational panels and content sessions. As the oldest, most		
	established venture conference in the Northeast, the conference regularly draws over 1,100		
	registrants and is believed to have been the catalyst for billions of dollars in venture funding		
	and entrepreneurial success in the region		
46	(Code) (Expenses \$ including grants of \$) (Reve	ADUA S	```
4b	PACT Enterprise Awards Gala - One of the region's most prestigious business honors for,		/
	Healthcare, MedTech and CleanTech companies, leaders, and entrepreneurs. Attracting more than		
	1,200 prominent business leaders, the PACT Enterprise Awards black-tie gala celebrates		
	achievement, innovation, and success in the Greater Philadelphia region		·
			· -
4c		enue \$)
	PACT Phorum Conference - This full-day conference showcases top-tier industry speakers, seminars,		
	hands-on workshops, and exhibits in technology Phorum introduces and educates attendees on		
	leading-edge technologies and related best practices and implementation strategies		
			
			-
			-
			· · · · · · · · · · · · · · · · · ·
	Other program services (Describe in Schedule O)		
	(Expenses \$ 0 including grants of \$ 0) (Revenue \$	0)	
40	Total program service expenses 0	· · · · · · · · · · · · · · · · · · ·	_

		23-3036397	F	age 🤅
Part	Checklist of Required Schedules		1,,	١
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		Yes	No
•	complete Schedule A	1	İ	×
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	 ^
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," <i>complete Schedule C, Part II</i>	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III	. 5	X	ļ
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.			
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	6_	-	<u>X</u>
′	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes,"</i>	,	 	 ^
•	complete Schedule D, Part III	8	ł	x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt	t		
	negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			ŀ
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	025X 2X	X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,		を と と と なる。	
_	VII, VIII, IX, or X as applicable	<u> </u>		23
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		x
h	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more	114	 	 ^
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	. 11b	ļ	x
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more	1111		
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	. 11c	1	X
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	+	X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part	1X . 11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
42-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	-
128	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	12a		x
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Ye		<u> </u>	^
_	and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Ιx	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	. 13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	. 14a		Х
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		ļ	
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	. 14b	<u> </u>	X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	1.5	ŀ	,
16	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	-	<u>X</u>
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		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services	10	\vdash	╁
-	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		x
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	1	X

19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H

If "Yes," complete Schedule G, Part III . . .

19

20a

20b

Par	Checklist of Required Schedules (continued)			
			Yes	No
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? If "Yes," complete Schedule I, Parts I and II	21		х
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? If "Yes," complete Schedule I, Parts I and III	22		х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	x	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		×
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a		•	
	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or			
	990-EZ? If "Yes," complete Schedule L, Part I	25b		<u></u>
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	1	 	
	disqualified persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27	stille, druck	X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b	ļ	X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	00-		
-00	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	<u> </u>	. X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		"
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N,</i>	30		X
31	Part I	31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?	<u> </u>		 ^
-	If "Yes," complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	\ <u>\\</u>		 ``
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II,	1		<u> </u>
	III, or IV, and Part V, line 1	34	х	<u> </u>
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled			
	entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
-•	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part			
	VI .	37		×
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	Ιx	
			990	(2014)

Form 9	90 (2014) Greater Philadelphia Alliance for Capital & Technologies 23-30	36397	Р	age 5
Par	t 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			\Box
	•		Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	<u>α 🚟 🨸</u>		1.00
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b	ᆌ	3 3 37 3	3
	· ·	430	18.0	
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable		- 2-3	LEX.
•	gaming (gambling) winnings to prize winners?	1c	X	ļ.,
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	*		
		8	-32	12.3
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	<u> </u>
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)	86. A		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
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		Х
b	If "Yes," enter the name of the foreign country	- 1325°	٠.,	2
_	See instructions for filing requirements for FinCen Form 114, Report of Foreign Bank and Financial Accounts			
	(FBAR)	\$ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\	3.	à
E۵	·		څنځ	2
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	1		
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
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).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	, si		
	and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided? .	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d		2;	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	£	100 W P . 60
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
-	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			
g	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7g		
h		7h	1,25500	
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	<u> </u>		air s
_	sponsoring organization have excess business holdings at any time during the year?	8	2 98/3	ļ.,
9	Sponsoring organizations maintaining donor advised funds.	1	400	
а	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	,	<u> </u>
10	Section 501(c)(7) organizations. Enter	4 / *	×	ľ
а	Initiation fees and capital contributions included on Part VIII, line 12		S. 132	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b		23	
11	Section 501(c)(12) organizations. Enter	ž '	£., 1	
а	Gross income from members or shareholders	4.	\$ 1	
b	Gross income from other sources (Do not net amounts due or paid to other sources	7 7	\$ 1	
	against amounts due or received from them)	1,4		ĺ
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		i
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.	- /	4	
a	Is the organization licensed to issue qualified health plans in more than one state?	13a		
a	Note. See the instructions for additional information the organization must report on Schedule O	ısa		 -
h	· · · · · · · · · · · · · · · · · · ·		``	1
b	Enter the amount of reserves the organization is required to maintain by the states in which	,		Ĩ.
_	the organization is licensed to issue qualified health plans [13b]	-		l
С	Enter the amount of reserves on hand			<u> </u>
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		l

Part VI

	Check in Schedule O Contains a response of note to any line in this Part VI.		<u> </u>		\square
Sect	ion A. Governing Body and Management				
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar	1a	27	Yes	No
	committee, explain in Schedule O				
b	Enter the number of voting members included in line 1a, above, who are independent		25	ì	14 (1) 12 (1)
2	Did any officer, director, trustee, or key employee have a family relationship or a business relations any other officer, director, trustee, or key employee?	•	2	X X	
3	Did the organization delegate control over management duties customarily performed by or under supervision of officers, directors, or trustees, or key employees to a management company or other		3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was		4		X
5	Did the organization become aware during the year of a significant diversion of the organization's a		5		X
6	Did the organization have members or stockholders?		6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or one or more members of the governing body?	appoint	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members	,			
	stockholders, or persons other than the governing body?		7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken	n during	\$400		300
	the year by the following		Ž.X		-1869
a	The governing body?	•	8a	Х	
ь	Each committee with authority to act on behalf of the governing body?		8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rest the expansional and research	eached			v
Soct	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O ion B. Policies (This Section B requests information about policies not required by the	Internal Devenue	9		<u>X</u>
Ject	ion b. Policies (This Section b requests illiornation about policies not required by the	internai Revenue	code.	/ Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		10a	163	X
b	If "Yes," did the organization have written policies and procedures governing the activities of such of	chapters.	1,000		~~
	affiliates, and branches to ensure their operations are consistent with the organization's exempt pu		10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body befo		11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990	·	<u> </u>		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a		Χ
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could g		12b		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If '	'Yes,"	Ì		
40	describe in Schedule O how this was done		12c		
13	Did the organization have a written whistleblower policy?		13	X	
14	Did the organization have a written document retention and destruction policy?		14	X	(% 1 4.2
15	Did the process for determining compensation of the following persons include a review and appro-	•		36.2	
а	independent persons, comparability data, and contemporaneous substantiation of the deliberation. The organization's CEO, Executive Director, or top management official.	and decision?	450	الم الله الله	
b	Other officers or key employees of the organization .	•	15a 15b	X	X
-	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)		/328	L Sylver	<u>^</u>
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrang	ement			
	with a taxable entity during the year?		16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evalu	ate its	17.78	7/00	7.38
	participation in joint venture arrangements under applicable federal tax law, and take steps to safe				4 7
	the organization's exempt status with respect to such arrangements?		16b		
	ion C. Disclosure				
17	List the states with which a copy of this Form 990 is required to be filed PA				
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990	J- 「(Section 501(c)	(3)s only	()	
	available for public inspection. Indicate how you made these available. Check all that apply	mlain in Ostsada a	. .		
19	Own website Another's website X Upon request Other (ex Describe in Schedule O whether (and if so, how) the organization made its governing documents, or	plain in Schedule C		ب	
13	financial statements available to the public during the tax year	Johnica of interest p	olicy, an	u	
20	State the name, address, and telephone number of the person who possesses the organization's b	ooks and records	_		
-	David Hepburn	215-790-364	1		
	200 South Broad St , Suite 700, Philadelphia, PA 19102-3896				

Form 990 (2014)	Greater Philadelphia Alliance for C	apital & Technol	ogies	į						23-30363	97 Page 7
Part VII	Compensation of Officers, Dire				En	plo	oyee	s, ł	lighest Comp	ensated	· ·
•	Employees, and Independent C					_					_
	Check if Schedule O contains a r	esponse or no	te to	an	y lır	ne i	n this	s Pa	art VII		
Section A.	Officers, Directors, Trustees, Key E	mployees, and	High	est	Cor	npe	nsat	ed E	mployees		
1a Complete to organization's	his table for all persons required to be tax year	listed Report co	mper	ısatı	on 1	for t	he ca	lend	dar year ending v	with or within the	
List all of compensation List all of List the who received	of the organization's current officers, di on Enter -0- in columns (D), (E), and (lof the organization's current key emplo organization's five current highest con reportable compensation (Box 5 of Forl and any related organizations	F) if no compens yees, if any See npensated emplo	sation e insti oyees	wa ructi (ot	s pa ons her	aid for thai	defin	itior offic	of "key employe er, director, truste	ee " ee, or key emplo	
 List all 6 \$100,000 of re List all 6 	of the organization's former officers, ke eportable compensation from the organ of the organization's former directors of	ization and any or trustees that	relate	ed oi ved,	rgar ın t	nizat	tions capad	city a	as a former direc	tor or trustee of t	
-	more than \$10,000 of reportable compe		-					•	•		
	n the following order individual trustees employees, and former such persons	or directors, ins	titutio	onal	trus	stee	s, offi	icers	s, key employees	s, highest	
											
Check thi	s box if neither the organization nor any	y related organiz	alion	COI			ied a	ny c	urrent omcer, air	ector, or trustee	
	(A) Name and Title	(B) Average hours per	box,	unle	Pos neck ss pe d a d	rson	than of the than of the than the than the than the than the the than the	n an ee)	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	hours for 급 및 활 출 (후 급 및 일) the organiz			from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations						
(1) Dean M	liller	40 00									
Director and C		0 00	Х	<u> </u>	Х	_			205,585		38,888
(2) Andrea	Allon	1 00	١.,								
Director	has	40 00	X	\vdash		_	<u> </u>	}—	0	327,244	104,166
(3) Saul Be	:nar	1 00 0 00	x								
	an Brassington	1 00	† 	\vdash	├-	-	-				

Continuation Sheet for Form 990

Page 1 of 1

Name of the Organization

Greater Philadelphia Alliance for Capital & Technologies

Employer identification number

23-3036397

Part VII Section A Continuation of Officers, Directors, Trustees, Key Employees, and Highest

Compensated Emp	i -	ı						(5)	45)	
(A)	(B)	Posit	hon /		C) k all	that ap	กไรง	(D)	(E)	(F)
Name and title	Average hours per week (list any hours for related organizations below dotted line)	or director	T			1		Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
(20) John Countly DhD	1.00	 	├—	-	L	-	_			
(26) John Swartly, PhD	1 00		1			1]	
Director	0 00	_	-		<u> </u>	-	<u> </u>			
(27) Harry Vitelli	1 00		-							
Director	0 00	_	╙	_	ļ	ļ	_			
(28) Dianne Strunk	40 00					1				
Vice President, Business Development	0 00	ļ		X	<u> </u>		L	134,488	0	14,463
(29)										
(30)			\vdash	_	\vdash					
(31)										
(32)										
(33)										-
(34)										
(35)										
(36)										_
(37)										
(38)										
(39)								<u></u>		
(40)										
(41)										
(42)										
(43)										
(44)										
(45)										
(46)										

			(C) Position										
	(A)	(B)	(do r	not ch			than o	one	(D)	(E)		(F)	
	Name and title	Average					is both		Reportable	Reportable		timate	_
		hours per week (list any			$\overline{}$		or/trust oo ⊐		compensation from	compensation from related		nount o	DΤ
		hours for	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the	organizations		pensat	
		related organizations	e dua	듛	띡	mg	oye	ଙ୍କ	organization (W-2/1099-MISC)	(W-2/1099-MISC)		om the	
		below dotted	~ =	i i		Į Į	e ping		,		and	d relate	ed
		line)	stee	탏		ď	ens				orga	anızatıc	ons
			"	8			atec						
	··			\vdash		 							
(15) Marc Lederma	in	1 00											
Director		0 00	X	ļ				<u> </u>			<u> </u>		
		1 00											
Director		0 00	X	<u> </u>	_	<u> </u>		<u> </u>					
		1 00											
Director		0 00	X	ļ		L		<u> </u>					
(18) Vince Meniche	elli 	1 00											
Director		0 00	X			_							
	ıller	1 00											
Director		0 00	X	<u> </u>		<u> </u>		<u> </u>					
		1 00											
Director		0 00	<u> </u>	<u> </u>				_					
		1 00] .						
Director		0 00	X	_				_					
	S	1 00											
Director		0 00	X	<u> </u>	_			<u> </u>					
	enthal	1 00		İ									
Director		0 00	X	<u> </u>		_		<u> </u>					_
	r 	1 00				ł							
Director		0 00	X	<u> </u>		<u> </u>		<u> </u>					
(25) Sandra Stoner	man	1 00		1									
Director		0 00	X					•					
1b Sub-total	•								205,585	327,244	L		,054
	ntinuation sheets to Part VII, S	ection A						•	134,488	0			,463
d Total (add line		·						•	340,073	327,244		157	<u>,517</u>
	of individuals (including but not li		ted a	bov	e) v	vho	recei	ved	more than \$100	,000 of			
reportable con	npensation from the organization	•			3							,	
											-	Yes	
-	zation list any former officer, dire		•	-	loye	e, c	r high	nest	compensated				
employee on I	ine 1a? If "Yes," complete Sched	lule J for such in	dıvıdı	ıal					•		3		Х
4 For any individ	dual listed on line 1a, is the sum o	of reportable con	npens	satio	on a	nd (other	con	npensation from				×
the organization	on and related organizations grea	ater than \$150,00	00? <i>II</i>	^ε "Υε	es, "	con	nplete	Sc	hedule J for suci	h			
ındıvıdual											4	X	
5 Did any persor	n listed on line 1a receive or acci	rue compensatio	n fror	n ar	างเ	nre	lated	ora:	anization or indiv	/idual	¥;		
							5	1	X				
Section B. Indeper		,					poi	2011					
	table for your five highest compe	ensated indepen	dent 4	cont	rac	ore	that	rece	lived more than	\$100 000 of			
	from the organization Report co										tax		
year				🗸 1		,		9	or widing the				
	(A)								(B)		(C)		
	Name and business add	ress							Description of ser	vices (ری Compen		

]	Compone	54.011
NO	NE			0
				0
				0
				0
				0
2	Total number of independent contractors (including but not limited to those listed above) when more than \$100,000 of compensation from the organization	no received		
		- -	Form S	990 (2014)

Part VIII Statement of Revenue

		Check if Schedule O contains	a response	or n	ote to any line in	this Part VIII			
	Ý.			~ (Š		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Grants	1a b c	Federated campaigns Membership dues Fundraising events		1a 1b 1c	0		***	A PARTIE AND A PAR	
Contributions, Gifts, Grants and Other Similar Amounts	d e f	Related organizations Government grants (contributions All other contributions, gifts, gran	s) [1d 1e	0 175,170				
Contribu and Oth	g h	similar amounts not included about Noncash contributions included in literature. Add lines 1a-1f	_	1f \$	0 0 ►	175,170			
<u>.</u>					Business Code				
- E	2a	Programs and Events			561499	1,647,079	1,647,079	**************************************	any atomic and interesting and statements of the
ě	b	Membership Dues			561499	255,265			
9	•	Membership Dues			301433	233,203			
ž									·
S	a					0			
E	е					0			
Program Service Revenue	f	All other program service revenu	е			0			
	g	Total. Add lines 2a-2f			•	1,902,344			4831
	3	Investment income (including divother similar amounts)	idends, inter	est,	and ►	870			870
	4	Income from investment of tax-ex	xempt bond p	oroc	eeds >	0			
	5	Royalties			•	0			
		·	(ı) Real		(ıı) Personal			§ • ,	, ,
	6a	Gross rents	_						
		Less rental expenses				# 🔆	845	Ž58	
-	b		 			*			
- 1	C	Rental income or (loss)		0	0				1
	d	Net rental income or (loss)			·	0			7.5
	7a	Gross amount from sales of	(ı) Securities	-	(II) Other	, A	13:48 4 4		
		assets other than inventory		0	0			\$ ·	***
	b	Less cost or other basis						* '* '	1 1 1
		and sales expenses		ol	0				***
	С	Gain or (loss)		0	0				
	d	Net gain or (loss)			•	0		-1 2	
en.	a 8a	Gross income from fundraising							
Other Revenue		events (not including \$ of contributions reported on line See Part IV, line 18	0 1c)	а	0		, Y		
he	b	Less direct expenses		b	0			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
ō	c	Net income or (loss) from fundra	isina events	- 1		0	-		
		Gross income from gaming activ	•						
		See Part IV, line 19		a	0				·
	þ	Less direct expenses		b	0			·	
	С	Net income or (loss) from gaming	g activities		•	0			
	10a	Gross sales of inventory, less		j				, 4,7	**
		returns and allowances		а	0				
	b	Less cost of goods sold		ь	0]	1	٠ź×	.
	С	Net income or (loss) from sales of	of inventory		>	0			
		Miscellaneous Revenue			Business Code	<u>-</u>	<u> </u>		
	11a	Miscellaneous			561499	0			\
		IVII S CEII AI I E CUS			001400	 			
	b					0	 		
	С					0			
	d	All other revenue				0	 		
	е	Total. Add lines 11a-11d			•	0			
	12	Total revenue. See instructions			•	2 078 384	1 902 344	0	870

Part IX Statement of Functional Expenses

Secti	Check if Schedule O contains a response or note		-	complete column (A)	
	not include amounts reported on lines 6b, 7b, 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			CARLETTE !	
	domestic governments See Part IV, line 21	0			West Control
2	Grants and other assistance to domestic				
	individuals See Part IV, line 22	0			
3	Grants and other assistance to foreign	}			
	organizations, foreign governments, and foreign				#
	individuals See Part IV, lines 15 and 16	0		AND THE PARTY OF THE	MARCH CALL
4	Benefits paid to or for members	0		秦朝:武江下 177 美	
5	Compensation of current officers, directors,				
	trustees, and key employees	402,536			
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	0			<u> </u>
7	Other salaries and wages	208,170			
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	7,776			
9	Other employee benefits	27,345			
10	Payroll taxes	40,180			
11	Fees for services (non-employees)				
а	Management	0			
b	Legal	0			
С	Accounting .	16,480			
d	Lobbying	49,376	W / / / / / / / / / / / / / / / / / / /		
е	Professional fundraising services See Part IV, line 17	0	25 C 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Beginster to be	
f	Investment management fees	0	·		
g	Other (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O)	75,940			
12	Advertising and promotion	1,454			
13	Office expenses	12,277			
14	Information technology	8,478			
15	Royalties .	0			
16	Occupancy	13,140			
17	Travel	11,954			
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	0		ļ	
19	Conferences, conventions, and meetings	1,070,821			
20	Interest .	0			
21	Payments to affiliates	0		<u>-</u>	
22	Depreciation, depletion, and amortization	0	0	0	
23	Insurance	0	1797	V** 0.2 1.1 72.5	\$ 1. The state of the state of
24	Other expenses Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e If				1. (E. 1.)
	line 24e amount exceeds 10% of line 25, column				
_	(A) amount, list line 24e expenses on Schedule O)	7 7 7 7	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	** v & 2 % **	** * *
a	Bad debts expense	320		·	
b	Bank and credit card fees	16,924			
q	Dues and subscriptions	3,593			
d	All other expenses Miscellaneous	0			
e 25	Total functional expenses. Add lines 1 through 24e	4,781 1,971,545	0		
25 26	Joint costs. Complete this line only if the	1,871,045		0	
20	organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation Check here				
	following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

	·	Check if Schedule O contains a response or note to any line in this Part 2	<		
			(A)		(B)
			Beginning of year		End of year
	1	Cash—non-interest-bearing	63,365	1	92,935
	2	Savings and temporary cash investments	472,973	2	373,732
	3	Pledges and grants receivable, net	0	3	0
	4	Accounts receivable, net	72,958	4	290,180
	5	Loans and other receivables from current and former officers, directors,	a malika		
		trustees, key employees, and highest compensated employees			
		Complete Part II of Schedule L .	0	5	0
	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	1 1 2 2 3		
		sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary			
şţ		organizations (see instructions) Complete Part II of Schedule L	0	6	0
Assets	7	Notes and loans receivable, net .	0	7	0
⋖	8	Inventories for sale or use	0	8	0
	9	Prepaid expenses and deferred charges .	60,103	9	78,082
	10a	Land, buildings, and equipment cost or	•		
		other basis Complete Part VI of Schedule D 10a (<u> </u>		
	b	Less accumulated depreciation 10b (0		0
	11	Investments—publicly traded securities	0	11	0
	12	Investments—other securities See Part IV, line 11	0	12	0
	13	Investments—program-related See Part IV, line 11	0	13	0
	14	Intangible assets .	0	14	0
	15	Other assets See Part IV, line 11	0	15	0
	16	Total assets. Add lines 1 through 15 (must equal line 34)	669,399	16	834,929
	17	Accounts payable and accrued expenses	174,242	17	260,684
	18	Grants payable .	0	18	0
	19	Deferred revenue .	101,000	19	73,250
	20	Tax-exempt bond liabilities	0	20	0
	21	Escrow or custodial account liability Complete Part IV of Schedule D	0:	21	0
ties	22	Loans and other payables to current and former officers, directors,			
Ē		trustees, key employees, highest compensated employees, and			
Liabilities	22	disqualified persons Complete Part II of Schedule L	0	22 23	0
	23 24	Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties	0	23	0
	25	Other liabilities (including federal income tax, payables to related third		24	0
	23	parties, and other liabilities not included on lines 17-24) Complete			
]	Part X of Schedule D	0	25	0
	26	Total liabilities. Add lines 17 through 25	275,242	26	333,934
		Organizations that follow SFAS 117 (ASC 958), check here X and			38.6
es		complete lines 27 through 29, and lines 33 and 34.		,	
ũ	27	Unrestricted net assets	394,157	27	F00.00F
ala	27 28	Temporarily restricted net assets	394, 157	27 28	500,995
8	29	Permanently restricted net assets	0	29	0
Ē	23	·		25	
or Fund Balances		Organizations that do not follow SFAS 117 (ASC958), check here		* * * * * * * * * * * * * * * * * * *	
Š.	l	complete lines 30 through 34.			
set	30	Capital stock or trust principal, or current funds	0	30	0
Net Assets	31	Paid-in or capital surplus, or land, building, or equipment fund	0	31	0
<u>let</u>	32	Retained earnings, endowment, accumulated income, or other funds	0	32	0
Z	33	Total net assets or fund balances	394,157	33	500,995
	34	Total liabilities and net assets/fund balances	669,399	34	834,929

	Page 12
Total revenue (must equal Part VIII, column (A), line 12) Total expenses (must equal Part IX, column (A), line 25) Revenue less expenses Subtract line 2 from line 1 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) Net unrealized gains (losses) on investments Donated services and use of facilities Investment expenses Prior period adjustments Other changes in net assets or fund balances (explain in Schedule O)	
Total expenses (must equal Part IX, column (A), line 25) Revenue less expenses Subtract line 2 from line 1 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) Net unrealized gains (losses) on investments Donated services and use of facilities. Investment expenses Prior period adjustments Other changes in net assets or fund balances (explain in Schedule O)	X
Total expenses (must equal Part IX, column (A), line 25) Revenue less expenses Subtract line 2 from line 1 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) Net unrealized gains (losses) on investments Donated services and use of facilities Investment expenses Prior period adjustments Other changes in net assets or fund balances (explain in Schedule O)	,078,384
Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) Net unrealized gains (losses) on investments Donated services and use of facilities . Investment expenses Prior period adjustments Other changes in net assets or fund balances (explain in Schedule O) A	,971,545
Net unrealized gains (losses) on investments Donated services and use of facilities Investment expenses Prior period adjustments Other changes in net assets or fund balances (explain in Schedule O) Solution Sol	106,839
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	394,157
7 Investment expenses 8 Prior period adjustments 9 Other changes in net assets or fund balances (explain in Schedule O) 9	
8 Prior period adjustments	
9 Other changes in net assets or fund balances (explain in Schedule O) 9	
· · · · · · · · · · · · · · · · · · ·	
10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33.	-1
· · · · · · · · · · · · · · · · · · ·	
column (B))	500,995
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 Cash X Accrual 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? 2a	X
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or	
reviewed on a separate basis, consolidated basis, or both	
Separate basis Consolidated basis Both consolidated and separate basis	.
b Were the organization's financial statements audited by an independent accountant?	x
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	1 i
Separate basis X Consolidated basis Both consolidated and separate basis c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of	
the audit, review, or compilation of its financial statements and selection of an independent accountant?	x . #.l
Schedule O 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in	ابرلاد ،
the Single Audit Act and OMB Circular A-133?	×
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	+^
required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits 3b	

Form **990** (2014)

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ Complete if the organization is described below.
▶ Attach to Form 990 or Form 990-EZ. ▶ Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

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

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

Section 501(c)(4), (5), or (6) organizations Complete Part III

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

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

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

Greater Philadelphia Alliance for Capital & Technologies Part I-A Complete if the organization is exempt under section 501(c) or is a section 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV 2 Political expenditures	23-3036397
1 Provide a description of the organization's direct and indirect political campaign activities in Part IV	
· · · · · · · · · · · · · · · · · · ·	527 organization.
2 Political expanditures	
·	> \$
3 Volunteer hours .	
Part I-B Complete if the organization is exempt under section 501(c)(3).	
	\$
2 Enter the amount of any excise tax incurred by organization managers under section 4955	> \$
3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year?	Yes No
4a Was a correction made?	Yes No
b If "Yes," describe in Part IV	
Part I-C Complete if the organization is exempt under section 501(c), except section	501(c)(3).
1 Enter the amount directly expended by the filing organization for section 527 exempt function	
activities .	> \$
2 Enter the amount of the filing organization's funds contributed to other organizations	
for section 527 exempt function activities	> \$
3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL,	_
line 17b .	▶ \$0
4 Did the filing organization file Form 1120-POL for this year?	Yes No
5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organization made payments. For each organization listed, enter the amount paid from the filing organization.	izations to which the filing
the amount of political contributions received that were promptly and directly delivered to a separate p	
	olitical organization, such
as a separate segregated fund or a political action committee (PAC) If additional space is needed, pro	
as a separate segregated fund or a political action committee (PAC) If additional space is needed, pro	vide information in Part IV
as a separate segregated fund or a political action committee (PAC) If additional space is needed, pro-	(e) Amount of political contributions received and
as a separate segregated fund or a political action committee (PAC) If additional space is needed, pro-	(e) Amount of political contributions received and promptly and directly
as a separate segregated fund or a political action committee (PAC) If additional space is needed, pro-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization if
as a separate segregated fund or a political action committee (PAC) If additional space is needed, pro-	(e) Amount of political contributions received and promptly and directly delivered to a separate
as a separate segregated fund or a political action committee (PAC) If additional space is needed, pro-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization if
as a separate segregated fund or a political action committee (PAC) If additional space is needed, pro (a) Name (b) Address (c) EIN (d) Amount paid from filing organization's funds If none, enter -C (1)	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization if
as a separate segregated fund or a political action committee (PAC) If additional space is needed, pro (a) Name (b) Address (c) EIN (d) Amount paid from filing organization's funds If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization if
as a separate segregated fund or a political action committee (PAC) If additional space is needed, pro (a) Name (b) Address (c) EIN (d) Amount paid from filing organization's funds If none, enter -C (1)	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization if
as a separate segregated fund or a political action committee (PAC) If additional space is needed, pro (a) Name (b) Address (c) EIN (d) Amount paid from filing organization's funds If none, enter -0 (1) (2)	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization if
as a separate segregated fund or a political action committee (PAC) If additional space is needed, pro- (a) Name (b) Address (c) EIN (d) Amount paid from filing organization's funds If none, enter-0 (1) (2) (3) (4)	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization if
as a separate segregated fund or a political action committee (PAC) If additional space is needed, pro (a) Name (b) Address (c) EIN (d) Amount paid from filing organization's funds If none, enter -C (1) (2) (3)	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization if

Р	art II-A Complete if the organiz	ation is exempt	under section 5	01(c)(3) and filed	d Form 5768 (ele	ction
_	under section 501(h)).		CCI: -1 / -			
A	Check ► if the filing organization	-			•	up members
_	name, address, EIN, Check ▶ if the filing organization	•			•	
В				ioi provisions ap	ріу. 1	
	Limits on (The term "expenditure	Lobbying Expendit s" means amounts			(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence	e public opinion (gra	ss roots lobbying)			0
b	Total lobbying expenditures to influence	e a legislative body ((direct lobbying)			0
C	Total lobbying expenditures (add lines	1a and 1b)			0	0
d	Other exempt purpose expenditures	•				0
е	Total exempt purpose expenditures (ac	•			0	0
f	Lobbying nontaxable amount Enter the	e amount from the fo	ollowing table in bot	h		
ı	columns				0	0
	If the amount on line 1e, column (a) or (b) is: The lobbyir	ng nontaxable amou	ınt is:	\$ ** \$ **	
	Not over \$500,000		mount on line 1e			
	Over \$500,000 but not over \$1,000,000		us 15% of the excess			
	Over \$1,000,000 but not over \$1,500,000		us 10% of the excess			· · · · · · · · · · · · · · · · · · ·
	Over \$1,500,000 but not over \$17,000,000	\$225,000 pit \$1,000,000	us 5% of the excess of	over \$1,500,000		
	Over \$17,000,000				0	
g	Grassroots nontaxable amount (enter 2	•			0	0
h :	Subtract line 1g from line 1a If zero or Subtract line 1f from line 1c If zero or I				0	0
;	If there is an amount other than zero or		o 1, did the ergani	zation file Form 472		0
	section 4911 tax for this year?	n either line in or lin	e n, did the organiz	zauon ille Fonn 472	o reporting	Yes No
	(Some organizations that made			re to complete all c	of the five columns	below.
	Lo	bbying Expenditure	es During 4-Year A	veraging Period		
	Calendar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) Total
2a	Lobbying nontaxable amount	0	0	0	0	0
b	Lobbying ceiling amount (150% of line 2a, column(e))			v 4 v , ->		0
С	Total lobbying expenditures	0	0	0	0	0
d	Grassroots nontaxable amount	0	0	0	0	0
e	Grassroots ceiling amount (150% of line 2d, column (e))					0
f	Grassroots lobbying expenditures	0	0	0	0	0
					Schedule C (Fo	m 990 or 990-EZ) 2014

Par	t II-B Complete if the organization is exempt under section 501(c)(3) and has N (election under section 501(h)).	OT filed	l For	m 576	3	
For e	each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description	n	a)	<u> </u>	(b)	
	e lobbying activity.	Yes	No	A	moun	t
1	During the year, did the filing organization attempt to influence foreign, national, state or local				å.	
	legislation, including any attempt to influence public opinion on a legislative matter or		1 3	2		, , ,
	referendum, through the use of		2]	a francisă		ķ .
а	Volunteers?				,	
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				Son < wa	
С	Media advertisements?	-				
d	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities?					
j	Total Add lines 1c through 1i	12.7				(
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			2 🛭		
b	If "Yes," enter the amount of any tax incurred under section 4912		4.			
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912		ئىدىدۇ			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	,			.	
Part	III-A Complete if the organization is exempt under section 501(c)(4), section 5	01(c)(5)	, or s	ection		
	501(c)(6).					
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1		X
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		X
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3	Х	
 1	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No answered "Yes." Dues, assessments and similar amounts from members	," OR (I		τ III-A,		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of		1			5,265
_	political expenses for which the section 527(f) tax was paid).					
•	Current year .		5% ()		4	0 276
a	Carryover from last year		2a 2b		4	9,376
D	Total .	•	20 2c			0 276
с 3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues					9,376
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the		3	-		3,816
-	excess does the organization agree to carryover to the reasonable estimate of nondeductible					
	lobbying and political expenditure next year?		. 22			,
5	·		5			4 440
	Taxable amount of lobbying and political expenditures (see instructions)		_ 5			4,440
Part						
	de the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated gro	oup list), ł	art II-	A, lines	1 and	1
2 (see	e instructions), and Part II-B, line 1. Also, complete this part for any additional information					
						-
						
		· -	- -			
			-			

(Greate	er Philadelphia Alliance for Capital & Technologies m 990 or 990-E2) 2014		23-3036397
				Page 4
Part I	V	Supplemental Information (continued)		
·				
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· 	-			
				
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· 				
	- -			

SCHEDULE D (Form 990)

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► Attach to Form 990. Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. Open to Public Inspection

Name	of the organization			Employer identification number
Great	er Philadelphia Alliance for Capital & Techno	logies		23-3036397
Par		or Advised Funds or Othe	r Similar Fund	ds or Accounts.
	Complete if the organization ansi			
		(a) Donor advised funds		(b) Funds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			<u> </u>
3	Aggregate value of grants from (during year)			
4	Aggregate value of grants from (during year) Aggregate value at end of year			
5	Did the organization inform all donors and d	oper advisors in writing that the	ossoto bold in de	upor advisad
J				
•	funds are the organization's property, subject	-	•	Yes No
6	Did the organization inform all grantees, dor		-	
	used only for charitable purposes and not for		or advisor, or for	. — —
	purpose conferring impermissible private be			Yes No
Par				
	Complete if the organization ans	wered "Yes" to Form 990, Pa	art IV, line 7	
1	Purpose(s) of conservation easements held	by the organization (check all th	at apply)	
	Preservation of land for public use (e.g., red	creation or education)	Preservation of	a historically important land area
	Protection of natural habitat		Preservation of a	a certified historic structure
•	Preservation of open space	-t b-ld 6- d		the force of a second second
2	Complete lines 2a through 2d if the organiza	ation neid a qualified conservatio	n contribution in	(80 VC)((10 VC)
	easement on the last day of the tax year			Held at the End of the Tax Year
a	Total number of conservation easements			2a
b	Total acreage restricted by conservation eas			2b
С	Number of conservation easements on a ce		• •	2c
d	Number of conservation easements include		nd not on a	
	historic structure listed in the National Regis			2d
3	Number of conservation easements modifie	d, transferred, released, extingui	ished, or termina	ted by the organization
	during the tax year			
4	Number of states where property subject to			
5	Does the organization have a written policy		g, inspection, hai	
	violations, and enforcement of the conserva		•	Yes No
6	Staff and volunteer hours devoted to monitor	ring, inspecting, and enforcing c	onservation ease	ements during the year
_				
7	Amount of expenses incurred in monitoring,	inspecting, and enforcing conse	rvation easemer	its during the year
	\$			
8	Does each conservation easement reported	on line 2(d) above satisfy the re	quirements of se	ection
	170(h)(4)(B)(ı) and section 170(h)(4)(B)(ıı)?			☐ Yes ☐ No
9	In Part XIII, describe how the organization re			
	balance sheet, and include, if applicable, the	-	nization's financia	al statements that describes
	the organization's accounting for conservati			
Par				Other Similar Assets.
	Complete if the organization ans	wered "Yes" to Form 990, Pa	art IV, line 8.	
1a	If the organization elected, as permitted und	ler SFAS 116 (ASC 958), not to r	report in its rever	nue statement and balance sheet
	works of art, historical treasures, or other sil			
	of public service, provide, in Part XIII, the te	xt of the footnote to its financial s	statements that o	describes these items
b	If the organization elected, as permitted und			
	works of art, historical treasures, or other sil			
	of public service, provide the following amou			•
	(i) Revenue included in Form 990, Part VIII			▶ \$
	(ii) Assets included in Form 990, Part X	•		► \$
2	If the organization received or held works of	fart, historical treasures, or other	r sımılar assets fo	or financial gain, provide the
-	following amounts required to be reported u			
а	Revenue included in Form 990, Part VIII, lin	· · · · · · · · · · · · · · · · · · ·		▶ \$
b	Assets included in Form 990, Part X			► \$
				<u> </u>

Sched	ule D (Form 990) 2014 Greater Philadelphia A	lliance for Cap	ital & Tech	nologies			23-303	86397		Page 2
Part	III Organizations Maintaining Co	llections of	Art, Hist	orical Tr	easures, o	r Othe	r Similar Ass	ets (cor	tinue	d)
3	Using the organization's acquisition, acces	sion, and othe	r records,	check any	of the follow	ing that	are a significan	t		
	use of its collection items (check all that ar			•		Ū	J			
а	Public exhibition		d [Loan	or exchange	progran	ns			
b	Scholarly research		e 🗀	Other	_					
С	Preservation for future generations		•							
		sallastions on	سا میسامیم ا	ی در د داد در د		4				
4	Provide a description of the organization's Part XIII	collections and	a expiain n	low they it	artner the org	janizatio	n's exempt purp	ose in		
_			4							
5	During the year, did the organization solicit assets to be sold to raise funds rather than									1
			eu as pai	t of the or	yanızallon s (Jonecho			es L	No
Part				000 5						
	Complete if the organization an	swerea "Yes"	to Form	990, Par	TIV, line 9,	or repo	orted an amou	nt on Fo	rm	
	990, Part X, line 21									
1a	Is the organization an agent, trustee, custo	odian or other i	ntermediai	ry for conti	ributions or o	ther ass	ets not			1
	included on Form 990, Part X?							Y€	es	No
b	If "Yes," explain the arrangement in Part X	III and complet	e the follo	wing table						
								Amount		
С.	Beginning balance .			•		10				0
d	Additions during the year					10				
e	Distributions during the year	•				1e				
f	Ending balance					1f				0
2a	Did the organization include an amount on	Form 990, Pa	rt X, line 2	1, for escr	ow or custod	ial acco	unt liability?	Ye	es X	No
b	If "Yes," explain the arrangement in Part X	III Check here	if the expl	anation ha	as been prov	ided in F	Part XIII			
Part	V Endowment Funds.									
	Complete if the organization and	swered "Yes'	to Form	990. Par	t IV. line 10)				
		a) Current year		or year	(c) Two years		(d) Three years bac	k (e) Fo	ur years	back
1a	Beginning of year balance	C	+	0	, , ,	0	· · ·	0		
b	Contributions	·-						<u> </u>		
С	Net investment earnings, gains,									
	and losses									
d	Grants or scholarships		İ					1		
е	Other expenditures for facilities									
	and programs .									
f	Administrative expenses									
g	End of year balance	C		0		0	· -	0		0
2	Provide the estimated percentage of the cu	urrent year end	balance (line 1g, co	olumn (a)) he	ld as				
а	Board designated or quasi-endowment	•	%							
b	Permanent endowment	%								
С	Temporarily restricted endowment	%	<u>.</u>							
	The percentages in lines 2a, 2b, and 2c sh	ould equal 100)%							
3a	Are there endowment funds not in the poss	session of the	organizatio	on that are	held and ad	mınıster	ed for the			
	organization by								Yes	No
	(i) unrelated organizations							3a(i)		
	(ii) related organizations							3a(ii)		
b	If "Yes" to 3a(II), are the related organization		•					3b		L
4	Describe in Part XIII the intended uses of t		n's endowr	ment fund:	s					
Part										
	Complete if the organization and	swered "Yes"	to Form	990, Par	t IV, line 11	a See	Form 990, Pa	rt X, line	10.	
	Description of property	(a) Cost or o	ther basis	(b) Co	st or other	(c)	Accumulated	(d) B	ook valu	e
		(ınvestr	nent)	bası	s (other)		epreciation			
1a	Land		0		0		成款 () () ()			0
b	Buildings		0		0		0			0
С	Leasehold improvements		0		0		0			0
d	Equipment .	<u> </u>	0		0		0			0
e_	Other	_l	0	<u> </u>	0		0			0
Total	. Add lines 1a through 1e (Column (d) must	equal Form 9:	90, Part X,	column (l	B), line 10c)		▶			0

Schedule D (Form 990) 2014

Parț VII	Investments—Other Securitie Complete if the organization an		0, Part IV, line 11b See Form	n 990, Part X, line 12
(a) [Description of security or category (including name of security)	(b) Book value	(c) Method of va Cost or end-of-year i	luation
(1) Financial d	lerivatives	0		
	ld equity interests	0		
(A)				
(D)				
(C)				\
(D)				
(E)		- · · · - · - · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·
(F)				
(G)				
(H)				
	nust equal Form 990, Part X, col (B) line 12)	0	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	' / %^**, '
Part VIII	Investments—Program Relate	ed.		
	Complete if the organization an		0, Part IV, line 11c See Forn	n 990, Part X, line 13.
	(a) Description of investment	(b) Book value	(c) Method of va	
	(a) Description of investment	(b) book value	Cost or end-of-year r	
(1)				
(2)				
(3)				
(4)	<u>-</u>			
(5)				
(6)				
(8)				
(9)			* 9 2002 - 200	2.0000000000000000000000000000000000000
	nust equal Form 990, Part X, col (B) line 13)	0		
Part IX	Other Assets.		0 Deat N/ Eng 44 d 0 Franc	- 000 Dad V III - 45
	Complete if the organization an	Swered fes to Form 99 Description	u, Partiv, line 110 See Forn	(b) Book value
(1)		, , , , , , , , , , , , , , , , , , , ,		
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	n (b) must equal Form 990, Part X, coi	(B) line 15)	>	
Part X	Other Liabilities.			
	Complete if the organization an	swered "Yes" to Form 99	0, Part IV, line 11e or 11f Se	e Form 990, Part X,
	line 25	415	In 19 100 100 100 100 100 100 100 100 100	3 45 486° 0
1. (1) Fodoral II	(a) Description of liability	(b) Book value		
(1) Federal II	iiwiile taxes	0		
(2)		· · · · · · · · · · · · · · · · · · ·		
(3)				
(4)				
<u>(5)</u>				
(6) (7)		· · · · · · · · · · · · · · · · · · ·		
(8)				
			J * ` ; ` * *>	14. 44. 44

Total (Column (b) must equal Form 990, Part X, col (B) line 25)

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

X

(9)

Par	Reconciliation of Revenue per Audited Financial Statements With Revenue per Complete if the organization answered "Yes" to Form 990, Part IV, line 12a	er Return.	
1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains (losses) on investments	: '6, 🌡	
a b			
		- , ,	
C	Recoveries of prior year grants 2c		
d	Other (Describe in Part XIII) Add lines 2s theorieb 2d	 -∤ `	•
e	Add lines 2a through 2d .	2e	0
3	Subtract line 2e from line 1	3	0
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIII)		
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	0
Par	Reconciliation of Expenses per Audited Financial Statements With Expenses Complete if the organization answered "Yes" to Form 990, Part IV, line 12a	per Return.	
1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	/	
а	Donated services and use of facilities 2a		
b	Prior year adjustments 2b	7.	
C	Other losses 2c		
d	Other (Describe in Part XIII)		
е	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	0
4	Amounts included on Form 990, Part IX, line 25, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIII)	7 31	
С	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	0
Pari	XIII Supplemental Information.		
Provi	de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, F	Part V. line 4. Par	t X. line
	rt XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional infori		
	K Line 2 GPCC, Regional Foundation, PVLA and PACT (collectively known as "The		
- GI ()	VEHIC 2 OF OO, Tregional Foundation, I VEH and I HOT (confectively known as The	· • • • • • • • • • • • • • • • • • • •	
Chan	nber") qualify as tax-exempt organizations under the existing provisions of the		
nterr	nal Revenue Code and their income is not subject to state or federal income taxes		
The (Chamber files Federal Form 990 and, when necessary, Form 990-T The Chamber believes		
t is n	o longer subject to U.S. federa, state or local income tax examinations by tax		
autho	orities for years before 2011. It is difficult to predict the final timing and		
	-	· · · · · · · · · · · · · · · · · · ·	
esol	ution of any particular tax position Based on the Chamber's assessment of many		
acto	rs, including past experience and judgments about future events, the Chamber does not		
urre	ntly anticipate significant changes in its tax positions over the next 12 months		
.:::•	mily anticipate significant changes in its tax positions over the next 12 months		
 -			
-	•		

Schedule D (Form 990) 2014	Greater Philadelphia Alliance for Capital & Technologies	23-3036397 Page 5
Part XIII Supp	plemental Information (continued)	
·		
	*	
· · · · · · · · · · · · · · · · · · ·		
· • • • • • • • • • • • • • • • • • • •		
•••••••••		•
·		

SCHEDULE J (Form 990)

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

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

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

Greater Philadelphia Alliance for Capital & Technologies

Employer identification number 23-3036397

Par	t I Questions Regarding Compensation	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	-	
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items		X	
	First-class or charter travel Housing allowance or residence for personal use		* .	(C)
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to		302	
	explain .	1b	, 10 N	Ø., , ,
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all	322		اددا
2	directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2	X	i
	•	750,7		ing)
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the			
	organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a		. 677	
	related organization to establish compensation of the CEO/Executive Director, but explain in Part III	1	** Sale	
	Compensation committee Written employment contract			
	☐ Independent compensation consultant ☐ Compensation survey or study		2	
	Form 990 of other organizations X Approval by the board or compensation committee			
	Digweet the year did any pages hated in Farm CCC Part VIII. Contract A line 4.5 with respect to the file.			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization	ja ja		
а	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Х
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a–c, list the persons and provide the applicable amounts for each item in Part III			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5–9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the revenues of			
а	The organization?	<u>5a</u>		<u> </u>
b	Any related organization? . If "Yes" to line 5a or 5b, describe in Part III	5b	, så	8883.51
	II les to line 3a of 3b, describe in Fart III		130	
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the net earnings of			<u></u>
a	The organization?	6a		
b	Any related organization? If "Yes" to line 6a or 6b, describe in Part III	6b	9 *k.k	1. 1
	ii les to line da di db, describe iii Fart iii	- 1 N		
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed		A	ــــــــــــــــــــــــــــــــــــــ
	payments not described in lines 5 and 6? If "Yes," describe in Part III	7		
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was			
	subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe			
	ın Part III	8	25.	
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in		<u> K</u>	
•	Regulations section 53 4958-6(c)?	9		

Schedule J (Form 990) 2014

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed Part II

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

Mote: The sailt of columns (EAM) (iii) for each mote in the sailt of any of ML2	2	(B) Brookdown o	f W-2 and/or 1099-MISC compensation		200000000000000000000000000000000000000		- Announce of the market	
(A) Name and Title		(i) Base	(ii) Bonus & incentive	(iii) Other	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(ı)–(D)	(F) Compensation in column (B) reported as deferred in prior
		compensation	compensation	reportable				Form 990
Dean Miller	Ξ	154,273	51,312	0	7,532	32,519	245,636	0
1 Director and CEO	€	0		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	0	0		0
Andrea Allon	€	0	0			0	0	0
2 Director	(E)	198,199	64,650	64,395	95,334	10,214	432,792	60,153
	(i)							
3	(II)							
	€	1 1 2 2 3 3 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	1 1 2 2 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
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Schedule J (Form 990) 2014

Schedule J (Form 990) 2014 Greater Philadelphia Alliance for Capital & Technologies Part III Supplemental Information	23-3036397 Page 3
달월	art II. Also complete this part
Part II Line 1 Director Andrea Allon's compensation was provided by the Greater Philadelphia Chamber of Commerce, the sole member	,
of the Greater Philadelphia Alliance for Capital & Technologies, for her service as the Chief Operating Officer of the Greater	
Philadelphia Chamber of Commerce	
	1
	Schedule J (Form 990) 2014

SCHEDULE O (Form 990 or 990-EZ)

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.

2014

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or 990-EZ.
Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization Employer identification number Greater Philadelphia Alliance for Capital & Technologies 23-3036397 Form 990, Part I, Line 1 (continued from Form 990, page 1) clean technology and life sciences industries, manifesting in a competitive edge for the Greater Philadelphia region Form 990, Part III, Line 1 (continued from Form 990, page 2) corporations to network, develop relationships, pursue business opportunities, and market and promote their business to foster growth and innovation Form 990, Part VI, Section A, Line 2 Director Zachary Klehr has a business relationship with Director Michael Heller and Director Marc Lederman Form 990, Part VI, Section A, Line 2 Director Dean Miller has a business relationship with Director Jonathan Brassington Form 990, Part VI, Section A, Line 2 Director Nate Lentz has a business relationship with Director Philip Moyer and Director RoseAnn Rosenthal Form 990, Part VI, Section A, Line 2 Director Charles Robins has a business relationship with Director Philip Moyer Form 990, Part VI, Section A, Line 2 Director RoseAnn Rosenthal has a business relationship with Director Michael Heller, Director Bob Moul and Director Charles Robins Form 990, Part VI, Section B, Line 11 The organization's Form 990 is prepared and reviewed by the staff of the Greater Philadelphia Chamber of Commerce In addition it is reviewed by PACT's CEO and provided to the Board of Directors prior to filing Form 990, Part VI, Section B, Line 15 The compensation of the CEO is determined by the Executive Committee of the Board of Directors Form 990, Part VI, Section B, Line 19 No documents are made available to the public Form 990, Part XI, Line 9 Fraction of cents

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Greater Philadelphia Alliance for Capital & Technologies

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

Related Organizations and Unrelated Partnerships

Open to Public

OMB No 1545-0047

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

Employer identification number 23-3036397

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(1) Primary	(b) Primary activity Legal or fo	(c) Legal domicile (state or foreign country)	(d) Total income Enc	(e) End-of-year assets Dire	(f) Direct controlling entity	5)
(1)							
(2)							
(3)							
(4)							
(9)							
(9)							
Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had	ations Complete if the	e organization ar	Iswered "Yes" on	Form 990, Part	IV, line 34 because	e it had	
one or more related tax-exempt organizations during the tax year	uring the tax year						
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	b)(13)
						Yes	٩
(1) Greater Philadelphia Chamber of Commerce 23-0969030 200 South Broad Street, Suite 700 Philadelphia, PA 19102	Business League	PA	501 (c)(6)		A/N		· ×
(2) GPCC Resources, Inc 23-3097773 200 South Broad Street, Surte 700 Philadelphia, PA 19102	Promote trade and commerce	PA	501 (c)(6)		A/N		×
	Marketing Philadelphia region	PA	501 (c)(6)		₹ Ž		×
(4) GPCC Regional Foundation 23-2653189 200 South Broad Street, Suite 700 Philadelphia, PA 19102	Education and Cultural Development	PA	501 (c)(3)	11, Type 1	ΑN		×
(5) Philadelphia Volunteer Lawyers for the Arts 23-2066564 200 South Broad Street, Suite 700 Philadelphia, PA 19102	Legal referral services	PA	501 (c)(3)	2	GPCC Reg Found	×	
(6)							
(7)							
							Į

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

Schedule R (Form 990) 2014

Page 2

Greater Philadelphia Alliance for Capital & Technologies

Schedule R (Form 990) 2014

Part III

Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34

(i) Section 512(b)(13) controlled Percentage ownership ŝ 3 Yes Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part General or managing partner? Yes No Percentage ownership Code V—UBI amount in box 20 of Schedule K-1 (Form 1065) (g)
Share of
end-of-year assets (h)
Disproportionate
allocations? ŝ (f) Share of total Yes IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year Income Share of end-of-year assets (e)
Type of entity
(C ∞πp, S corp, or frust) because it had one or more related organizations treated as a partnership during the tax year Share of total income (d)
| Direct controlling entity tax under sections 512-514) Predominant income (related, excluded from unrelated, (c)
Legal domicile
(state or foreign country) (d)
Direct controlling 1 entity (b) Primary activity (c)
Legal
domicile
(state or
foreign
country) Primary activity (a)Name, address, and EIN of related organization Name, address, and EIN of related organization Part IV (E) 5 2 <u>ල</u> € 9 9 0 E 3 <u>ල</u> ₹ **©** 9

Schedule R (Form 990) 2014

23-3036397

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

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\ \ \							## ***						7				×		1	×		4			splo	(p)	ethod of determini amount involved							066 m
	*	1a	1b	10	1d	1e	1	=	19	ŧ	1i	1j		,	=	1m	1n	10	2	1p	10	**	+	18	thresh		Method of determining amount involved					į		R (For
	n Parts II–IV?																								ationships and transaction	(c)	Amount involved							Schedule R (Form 990) 2014
	ed organizations listed ir																٠						٠		ne, including covered rel	(q)	Transaction type (a–s)							
Make Complete Inc 4 is any author a licture in Date II II or IV of this school ila	our place ment in any end is used in raits in, in, or to or this soliced in During the tax year, did the organizations listed in Parts II–IV? During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II–IV?	a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	b Gift, grant, or capital contribution to related organization(s)	c Gift, grant, or capital contribution from related organization(s)	d Loans or loan guarantees to or for related organization(s)	e Loans or loan guarantees by related organization(s)		f Dividends from related organization(s)	g Sale of assets to related organization(s).	h Purchase of assets from related organization(s)	i Exchange of assets with related organization(s)	j Lease of facilities, equipment, or other assets to related organization(s)		k Lease of facilities, equipment, or other assets from related organization(s)	I Performance of services or membership or fundraising solicitations for related organization(s)	 Performance of services or membership or fundraising solicitations by related organization(s) 	n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	o Sharing of paid employees with related organization(s)		p Reimbursement paid to related organization(s) for expenses			 Other transfer of cash or property to related organization(s) 	s Other transfer of cash or property from related organization(s)	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	(a)	Name of related organization							
2	₹ -																								7			£	(2)	(3)	(4)	(5)	9	

23-3036397

Part VI

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

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

Schedule R (Form 990) 2014

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Part VII	Suppleme	ental Information		
	Provide ad	dditional information for responses to questions on Schedule R (see instruction	ns)	_
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