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### Form 990

### **Return of Organization Exempt From Income Tax**

OMB No 1545-0047

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

2015

Department of the Treasury Internal Revenue Service

HTA

Do not enter social security numbers on this form as it may be made public.

Information about Form 990 and its instructions is at <a href="https://www.irs.gov/form990">www.irs.gov/form990</a>.

Open to Public Inspection

-				C Name of acceptance DIDO I and I	5 1 16		naing		<del></del>	
. r	_	heck if app ddress cha		C Name of organization PIDC- Local Doing business as	Development Corporati	on	P E	mployer id	dentification nur	nber
	ᆜ^	daress cha	inge	Number and street (or P O box if mail is no	delivered to street address)	Room/suite	30-0	598934		
Ľ	N	iame chang	je	1500 Market Street	delivered to street address)	2600W		elephone r	number	
Ē	] In	nitral return		City or town	State	ZIP code		·		
Г	_ 			Philadelphia	PA	19102	215-	196-802	<u> </u>	
. L	Ξ	nal retum/ter		Foreign country name Foreign	province/state/county	Foreign posta	l code			
	_  ^	mended re	turn				G G	ross receir	ots \$	22,109,537
	A	pplication p	ending	F Name and address of principal officer			H(a) Is this a gro	up return for	subordinates?	Yes X No
_				John Grady 1500 Market Street- Sui	te 2600 West, Philadelpl	hia, PA 191	H(b) Are all su	bordinates	included?	Yes No
-	Ta	ex-exempt s	status		(insert no ) 4947(a)(1)		4 ' '		(see instructions	)
÷				w pidcphila com	(III) 4347(B)(1)	327	4			
-							H(c) Group ex			
,		orm of orga		X Corporation Trust Associ	ation Other ►	L Ye	ar of formation	1977	M State of lega	al domicile PA
	P	art l		mmary						
				lescribe the organization's mission or				ısters, a	s a subrecipie	ent of
	SE			of Philadelphia, various federally fund			s assist in	<b></b>		
	ž.			notion of economic development initia			<b></b>	<b>-</b>		
	Š			his box ▶ if the organization dis		or disposed	l of more thar	1 25% of	1	
	හ නේ			of voting members of the governing				<u> </u>	3	29
	Activities & Governance	4 N	umber	of independent voting members of the	e governing body Part	VI, line 1b)	•	-	4	29
	Ϋ́	5 T	otal nu	imber of individuals employed in cale	ndar year 2015 (Part V	1000 P		-	5	0
	ct			imber of volunteers (estimate if neces		S. S. S.	<b>&gt;</b>	· }	6	
	•				Form 990-T (b) 34	8 Z				
-		<del>- 5 - 1</del>	CCUIIIC	ciated business taxable income nom	SALVA C		Prior			
	as a	8 C	ontribu	utions and grants (Part VIII, line 1h)		17			0	
	ũ							12,228,	936	21,900,162
	Revenue	10 In	vestm	ent income (Part VIII, column (A), line	es 3, 4, and 7d)					
	ا تم	11 0	ther re	venue (Part VIII, column (A), lines 5,	6d, 8c, 9c, 10c, and 11e	y			0	0
		12 To	otal rev	enue—add lines 8 through 11 (must equ	ial Part VIII Column (A) th	19 12)		12,274,	613	
, –		<b>13</b> G	rants a	and similar amounts paid (Part IX, col	umn (A), lines (-3)	7		3,556,3	318	9,748,121
									0	0
	s l					s 5–10)        .			0	0
	sus					•			0	0
	Expenses					0	, ,			
	ם ו									
					•	<del>25)</del>				
-	- 2	19 K	evenue	e less expenses Subtract line 18 from	n line 12		Bannana of			
3	ance	20 T	otal ac	eats (Part Y June 16)						
	Bal				,	•				
3	Fund Balances			,	from line 20	•				
	Par			<del></del>			<u> </u>	00,002,		0111011001
					iding accompanying schedules	and statements	, and to the best	of my knov	wledge	
				ct, and complete Declaration of preparer (other	than officer) is based on all info					
ç	Sigi	n			cre			M	14118	
	ler		"	•				Date		
·		_			<del></del>	Seni	or Vice Presi	dent		
_			12		December 1				l na	CINI
-	<b>.</b>		Pnn	v type preparers name				Che		IN
	aic		Ru	isslee Armstrong	special limitions.		11/10/1	2	<u> </u>	00288383
		Net unrelated business revenue from Part VIII, column (A), line 34  Net unrelated business taxable income from Form 990-T/line 34  Contributions and grants (Part VIII, line 1h)  Prior Year  Contributions and grants (Part VIII, line 1h)  Program service revenue (Part VIII, line 2g)  10 Investment income (Part VIII, column (A), lines 3, fi, and/d)  10 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, Qc, and 1/gh, 0 0 0 0  12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), lines 4)  Benefits paid to or for members (Part IX, column (A), lines 4)  Benefits paid to or for members (Part IX, column (A), lines 4)  Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)  Total fundraising expenses (Part IX, column (A), line 1te)  Total fundraising expenses (Part IX, column (A), line 25)  Total expenses (Part IX, column (A), lines 13–17 (must equal Part IX, column (A), line 25)  Revenue less expenses Subtract line 18 from line 12  Total assets (Part X, line 16)  Net assets of fund balances Subtract line 18 from line 20  Signature Block  Proparer's signature  Proparer's signature								
•		Jiny	Firm	's address ► 2001 Market Street Suite	700, Philadelphia, PA 1	9103				
Λ.	/lav	the IRS							. X	Yes No
_	÷				<del></del>	,		<del>-</del> -		
-	or t	-aperwoi	rk Kedi	uction Act Notice. See the separate in	STRUCTIONS.					roim <b>330</b> (2015)

	90 (2015)	PIDC- Local Development Corporation	30-0598934	Page 2
_ Pa	rt III	Statement of Program Service Accomplishments		
_ 、		Check if Schedule O contains a response or note to any line in this Part III		
1	Briefly o	escribe the organization's mission		
		C administers, as a subrecipient of the City of Philadelphia, various federally		
		rant programs including Community Development Block Grants, Urban Action		<b></b>
		ment Grants, and Economic Development Administration grants These programs assist		
		omotion of economic development initiatives of the City Philadelphia		
2		organization undertake any significant program services during the year which were not listed on		
		Form 990 or 990-EZ?	Yes	X No
		describe these new services on Schedule O	٠٠٠ ليا	
3		organization cease conducting, or make significant changes in how it conducts, any program		
•	services		Yes	X No
	+	describe these changes on Schedule O.		<u></u>
4		the organization's program service accomplishments for each of its three largest program services	s as measured by	
•		s Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and all		
		expenses, and revenue, if any, for each program service reported		ı
	ino total	expenses, and revenue, if any, for each program service reported		
4a	(Code	) (Expenses \$ 7,389,892 including grants of \$ 529,617 ) (Revenue	ıe \$ 12,504	1704 \
74		arket Pate Londing. Provide subordinated debt with below market interest rates and		
		ant contail to projects that ratein and grow employment in the City of Philadelphia		
	mvesum			
	•			
				<b></b>
4b	(Code	) (Expenses \$ 12,745,513 including grants of \$ 9,218,504 ) (Revenue	e \$ 0.306	(458 )
7.5	•	Management Manage various loan and grant programs on behalf of the City of		/1100 /
		phia, Commonwealth of Pennsylvania, and/or federal agencies that serve to retain and grow		
		A SAME OF CONTRACT		
	Citibiofi	nent in the City of Philadelphia		
- <u>4c</u>	(Code:	) (Expenses \$ including grants of \$ ) (Revenue	ie \$	
	(0000.	/(Expended o// Notating grants of o// Notating		· /
		·		
4d	Other pr	ogram services (Describe in Schedule O )		
74	(Expens		0)	
4e		gram service expenses   20,135,405		<del></del> -
		<u> </u>		

		30-0598934	P	age 3
Part	IV Checklist of Required Schedules			,
`		<u></u>	Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
2	complete Schedule A  Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	1		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	1-2-		-^-
•	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)	1	<del> </del>	
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		[
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			ĺ
	Part III	5	İ _	Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	_6_		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,		j	}
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			)
	complete Schedule D, Part III .	8_		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt			
	negotiation services? If "Yes," complete Schedule D, Part IV	9_	<b>├</b> ──	_X_
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted	10	!	V
44	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	ş	X
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	*	1	
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete	1		•
а	Schedule D, Part VI	11a		х
ь	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			<del>- ^`</del>
_	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	116		X_
С	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		_ 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	<del></del>	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part	X 11e	X	<u> </u>
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			[
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	X	<b> </b>
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete the co			
_	Schedule D, Parts XI and XII	12a	<del> </del> -	X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Ye			1
40	and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional.	12b	X	<del>                                     </del>
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13 14a		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?.  Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	144		<del>  ^-</del> -
b	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	146		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	1.40		<del>  ^</del>
. •	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		х

16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other

on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on

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

assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV

Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II

If "Yes," complete Schedule G, Part III

16

17

18

Par	Checklist of Required Schedules (continued)			
`	<b>_</b>		Yes	No
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H.	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			ļ
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	_X_	
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		X
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	1 1		
	employees? If "Yes," complete Schedule J .	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	1 1		
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines			İ
	24b through 24d and complete Schedule K If "No," go to line 25a .	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	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		
	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		X
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		х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If "Yes," complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,	×	3	
	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	m 1 m 120	x
b	A family member of a current or former officer, director, trustee, or key employee? <i>If</i> "Yes," <i>complete</i>	100		<del>  ^`</del>
D	Schedule L, Part IV	28b		×
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	200		<del>  ^`</del> -
C	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		X
	Did the organization receive more than \$23,000 in non-cash contributions? In rest, complete schedule in			<del>  ^</del>
30	conservation contributions? If "Yes," complete Schedule M	30		х
24		30		<del>  ^-</del>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	31		X
20	Part I	131		<del>  ^</del> -
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?	22		_
22	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	22		
	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 24		
	III, or IV, and Part V, line 1	34	_ X	<del> </del>
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled	0.51		
	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		X
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	X	L
	<del></del>	Form	990	(2015)

Par	Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V	· ·	<u> </u>	$\sqcup$
			Yes	No
1a		3 ( )		\$ B
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  Did the accompanion and the latest with health and the forms with he	의 🧬	1	
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	4.7	1.4	123
2a	gaming (gambling) winnings to prize winners?  Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	1c	X see	1
20	Statements, filed for the calendar year ending with or within the year covered by this return  2a	0 .	1	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	* -	L
~	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	1	7	1, 1
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	1	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	$T^{-}$	
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			ſ
	account)?	4a		X
b	If "Yes," enter the name of the foreign country		3:4	12
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts			
	(FBAR)	,	******	, y y-
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	L	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	ļ	X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T? .	5c	ļ	ļ
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		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	۱	}	
-	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 and services provided to the payor?	7a	Se ~ oc.	
ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	1	$\vdash$
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	10	<del> </del>	<del> </del>
ŭ	required to file Form 8282?	7c		l
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d	\$ 17	8 3	, 5
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	, ,	A40 16361
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
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		$oxed{\mathbb{L}}$
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	3	74. 1	3
	sponsoring organization have excess business holdings at any time during the year?	8		<u> </u>
9	Sponsoring organizations maintaining donor advised funds.	1.1.	300	1 m
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a	<b> </b>	ļ
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		l
10	Section 501(c)(7) organizations. Enter	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
a	Initiation fees and capital contributions included on Part VIII, line 12		× 1	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . [10b]		2	
11	Section 501(c)(12) organizations. Enter			0.00
a	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	355		
120	against amounts due or received from them )  Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	35 F # 12	( day min
12a b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	120	335	¥ +3
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?	13a	1	V.3.8
a	Note. See the instructions for additional information the organization must report on Schedule O	****	12.7	14,
b	Enter the amount of reserves the organization is required to maintain by the states in which	ŝ		
~	the organization is licensed to issue qualified health plans	3, 1	123	1
С	Enter the amount of reserves on hand		* F	100
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	$L^{-}$	Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b		

	990 (2015) PIDC- Local Development Corporation	30-05			age 6
Par	Governance, Management, and Disclosure For each "Yes" response to lines 2 through				
•	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or change	ies in Schedule O. S	ee ins	tructio	
	Check if Schedule O contains a response or note to any line in this Part VI	<del> </del>	<u>· · · </u>	·	X
Sect	tion A. Governing Body and Management			T Van	No
12	Enter the number of voting members of the governing body at the end of the tax year	1a 29	<u>.                                    </u>	Yes	No
	If there are material differences in voting rights among members of the governing body, or		4		
	if the governing body delegated broad authority to an executive committee or similar				
	committee, explain in Schedule O			- 1 N2	6 18
b	Enter the number of voting members included in line 1a, above, who are independent	1b 29	) :-	V., ;	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relations	ship with	7.		12
	any other officer, director, trustee, or key employee?	•	2		X
3	Did the organization delegate control over management duties customarily performed by or under	the direct	1	)	
	supervision of officers, directors, or trustees, or key employees to a management company or other		3		X
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	assets? .	5		X
6	Did the organization have members or stockholders?		6	X	<b> </b>
7a	, , , , , , , , , , , , , , , , , , , ,	appoint	7.		
	one or more members of the governing body?		7a		×
b	, , , , , , , , , , , , , , , , , , , ,	•	7b	x	}
	stockholders, or persons other than the governing body?  Did the organization contemporaneously document the meetings held or written actions undertaken	n during	1 D	· · · · ·	
8	the year by the following	ii duning	antes ( a	<u>`</u> \$	×
а			8a	X	w. //a
b			8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be r	eached			
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9	i 	X
Sect	ction B. Policies (This Section B requests information about policies not required by the	Internal Revenue	Code	)	
				Yes	No
10a	· · · ·		10a	<u> </u>	<u>X</u>
b			405	ł	1
	affiliates, and branches to ensure their operations are consistent with the organization's exempt pu		10b	+	╁
11a		ore tiling the form?	11a	-	X
b 120			12a	x	
12a b		give rise to conflicts?	12b		X
c			1	ļ —	<del>                                     </del>
	describe in Schedule O how this was done	·	12c	X	
13	Did the organization have a written whistleblower policy?		13	X	
14	Did the organization have a written document retention and destruction policy?	• •	14	X	
15	Did the process for determining compensation of the following persons include a review and appro	val by	277		1
	independent persons, comparability data, and contemporaneous substantiation of the deliberation	and decision?	1	<u>ا</u> آنا	l bei
а	The organization's CEO, Executive Director, or top management official		15a	<b>↓</b>	<u>X</u>
þ		•	15b	7. 17.00	X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)				
16a		jement	4		3. C.
	with a taxable entity during the year?	into ito	16a	X   8000	g/-è∯a
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate the policy of procedure requiring the organization to evaluate the policy of procedure requiring the organization to evaluate the policy of procedure requiring the organization to evaluate the policy of procedure requiring the organization to evaluate the policy of procedure requiring the organization to evaluate the policy of procedure requiring the organization to evaluate the policy of procedure requiring the organization to evaluate the policy of procedure requiring the organization to evaluate the policy of procedure requiring the organization to evaluate the policy of procedure requiring the organization to evaluate the policy of procedure requiring the organization to evaluate the policy of				
	participation in joint venture arrangements under applicable federal tax law, and take steps to safe the organization's exempt status with respect to such arrangements?	guaru	16b	X	
Sect	ction C. Disclosure	<del></del>	1.00	<u> </u>	<u> </u>
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 99	0-T (Section 501(c)(3	3)s onl	y)	
	available for public inspection. Indicate how you made these available. Check all that apply				
	Own website Another's website X Upon request Other (ex	(plaın ın Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents,	conflict of interest po	lıcy, aı	nd	
	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 b		<b>&gt;</b>		
	Anthony Simonetta 1500 Market Street- Suite 2600 West, Philadelphia, PA 19102	215-496-8122			
	1000 Market Street Suite 2000 West, Filliadelphia, FA 13102				

Form 990 (2015)	PIDC- Local Development Corpora	tion								30-05989	34 Page <b>7</b>
Part VII	Compensation of Officers, Dire	ctors, Truste	es, K	ey	Em	plo	oyee:	s, ŀ	lighest Comp	ensated	
`	Employees, and Independent C		•	•		•	-		•		
	Check if Schedule O contains a re	esponse or no	te to	an	y lin	e ir	n this	Pa	art VII		🔲
Section A.	Officers, Directors, Trustees, Key E										
1a Complete t	his table for all persons required to be I									with or within the	
organization's	tax year	•									
	of the organization's current officers, di						luals o	or o	rganızatıons), re	gardless of amo	unt
	on. Enter -0- in columns (D), (E), and (i										
	of the organization's current key emplo										.voo)
	organization's five current highest con reportable compensation (Box 5 of Fori										yee)
	nd any related organizations	11 VV 2 alla/of Do	,,,,	,,,,	,,,,,	.00		,,	or more than \$1	00,000 110111 1110	
_	of the organization's <b>former</b> officers, ke	v emplovees, ar	nd hia	hes	t co	mpe	ensate	ed e	emplovees who r	eceived more th	an
	eportable compensation from the organ		_								
	of the organization's <b>former directors o</b>	•			•			ıtv a	as a former direc	tor or trustee of	the
	more than \$10,000 of reportable compe							-			
List persons in	the following order individual trustees	or directors, ins	titutio	nal	trus	tee	s, offic	cers	s, key employees	s, highest	
	employees, and former such persons									. •	
Check this	s box if neither the organization nor any	related organiz	ation	cor	npei	nsat	ted ar	у с	urrent officer, dir	ector, or trustee	
				-		C)		<del></del>	<u> </u>		
						ition					
	(A)	(B)			neck	more	than o		(D)	(E)	(F)
	Name and Title	Average hours per					ıs both or/truste		Reportable compensation	Reportable compensation	Estimated amount of
						·	<del></del>		from	from related	other
		hours for related	dire	Š	Officer	y er	hes	Former	the organization	organizations (W-2/1099-MISC)	compensation from the
		organizations below dotted	ctor	Institutional	1	Key employee	yee 8	•	(W-2/1099-MISC)	·	organization and related
		line)	Individual trustee or director	Į		yee	mpe				organizations
			ee	trustee			Highest compensated employee				
				Ĺ			8				
(1) M Walt	er D'Alessio	0 30									
Chairman		1 05	X	L	Х						
(2) Robert	C Wonderling	0 30		l							
Vice Chairman		0 45	X	L	X						
(3) Edward	H Morris	0 30									
Treasurer		1 05	X	-	X	<u> </u>					
(4) David E	Beavers	0 30	١.,								
Secretary		1 05	X	-	X	ļ					<del></del>
(5) Andrea	Allon	0 30									
Director		1 05		┢	-	-	_				
(6) Terry B	ooker	0 05 0 82									
Director (7) Craig C	ornaroli	0 30		╁╼	<del> </del>		-				
Director	ailiaioii	0 45	х	i							
(8) Fred Co	nean72	0 05	^			-					
Director	71301124	0 09	l x								
	ble Jannie Blackwell	0 30	<u> </u>					-			
Director	0.0000.00	0 45	l x						•		
(10) Michael	Brown	0 05		1	-						
Director		0 09	l .								
(11) Cristina	Cavalieri	0 05									
Director		0 09	×								
(12) Rob Du	bow	0 30			Г						
Director		0.45	I			L					
(13) Alan Gr	eenberger	0.30									
Director		0 45	Х		L.						

0.05 0.09

(14) Kenneth Lawrence
Director

Total from continuation sheets to Part VII, Section A    Total (add lines 1b and 1c)   0   2,238,690   494,122	P	Section A. Officers, Directors, Tru	ustees, Key Em	ploye	es,			ghes	t C	ompensated Em	ployees	continu	ued)		
Properties   Pro	•		Average hours per	box, office	unles er an	Pos neck ss pe d a d	more rson lirect	is both or/trust	an ee)	Reportable compensation	Reporta compens	ation		stimated nount o	
Director			hours for related organizations below dotted	ndividual trustee or director	nstitutional trustee	Officer	key employee	lighest compensated	ormer	the organization	organizat	tions	org an	pensat rom the anization d relate	n d
(16) Elizabeth Murphy	(15)	Leslie Anne Miller	0 05		T				-						
Director			<del></del>		<u> </u>	_	<b> </b>		_						
(17)   Rick Grimald			1	1	l		ł	ļ		1					
Director				X	<u> </u>		├-	├	<u> </u>	<del> </del>					
Complete this table for your five highest compensation from the organization of the Compensation from the organization of the Compensation from the organization of the Compensation from the organization of the Compensation from the organization of the Compensation from the organization of Report compensation from the organization of Report compensation from the organization of Report compensation from the organization Report compensation from the organization Report compensation from the organization Report compensation from the organization Report compensation from the organization from the organization Report compensation for the calendar year ending with or within the organization's tax year    A			<b>*</b> *		ı		1				į				
Director		Suzanno Mayon		<del>  ^-</del>		├─		<del> </del> -							
(19)   Bob Moul				×	ļ		)	]	ļ			}			
Director   0.09   X		D. I. M. J.	<del> </del>			1	1	-							
Director			1	×	]	)	}	<u> </u>		j	į	]			
Director	(20)	Richard Negrin	0 30					]							
Director   0.45   X	Direc	ctor	0 45												
Caste   Cast								ļ							
Director   0.45   X				X	<b>-</b>	<b>-</b>	-	<b>├</b>							
Case   Case			1		1			[	ĺ	[		ĺ			
Director   0.82   X		Thomas A. M. Oussess		_	-		-				ļ <del></del>				
C41   Shelley Smith   Director   0.45   X			<b>†</b>	1	Í			ĺ	İ			ĺ			
Director   0.45   X					<del>                                     </del>	1	$\vdash$								
Director			†		ł										
Director   19 Sub-total	(25)	Ahmeenah Young			Π		Г								
Total from continuation sheets to Part VII, Section A  Total (add lines 1b and 1c)  Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization  Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual  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? If "Yes," complete Schedule J for such individual  Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person  Section B. Independent Contractors  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  O  Compensation			0 45	X			<u> </u>			<u></u>					
Total (add lines 1b and 1c)  Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization   O  Tyes No  Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual  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? If "Yes," complete Schedule J for such individual  Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person  Section B. Independent Contractors  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  Description of services  Compensation  Compensation	1b	Sub-total .							•	0	ļ				
Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization    3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual  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? If "Yes," complete Schedule J for such individual  5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person  5 Section B. Independent Contractors  1 Complete his 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			ection A	•					<b>&gt;</b>						
reportable compensation from the organization    O		<del></del>				<del>.</del>	<u> </u>		_	<u> </u>		8,690		494	,122
Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual  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? If "Yes," complete Schedule J for such individual  Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person  Section B. Independent Contractors  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  (A)  Description of services  (A)  Description of services  O  O  O  O  O  O  O  O  O  O  O  O  O	2			stea a			wno	rece	ivec	more than \$100	וס טטט,נ				
Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual  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? If "Yes," complete Schedule J for such individual  Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person  Section B. Independent Contractors  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  Description of services  Compensation  Compensation		reportable compensation from the organization				<u> </u>								Yes	No
employee on line 1a? If "Yes," complete Schedule J for such individual  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? If "Yes," complete Schedule J for such individual  5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person  5 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  Compensation	3	Did the organization list any former officer, dire	ector, or trustee.	kev e	ame	love	e. c	r hia	hes	t compensated		ſ	*,	72	
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? If "Yes," complete Schedule J for such individual  5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person  5 X  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  Description of services  Compensation	-			-		•		J		•			3		
the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such Individual  5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person  5 X  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)  (B)  (C)  Compensation  (C)  Compensation	4	For any individual listed on line 1a, is the sum	of reportable con	npens	satio	on a	nd d	other	con	npensation from			, 6	3/1	, ,
Individual  Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person  Section B. Independent Contractors  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  Description of services  O  O  O  O  O  O  O  O  O  O  O  O  O	·										h			1.70	
for services rendered to the organization? If "Yes," complete Schedule J for such person  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)  (B)  (C)  Compensation  Compensation			•					•					4	X	
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)  (B)  (C)  Compensation  O  O  O  O  O  O  O  O  O  O  O  O  O	5		•			-			_		/idual		" [	32,5	· ,
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)  (B)  (C)  Name and business address  Description of services  Compensation  C  C  C  C  C  C  C  C  C  C  C  C  C	Sec		es, complete st	neac	ile J	101	Suc	n pei	301	<u> </u>	<del>'</del>				^
(A) Name and business address Description of services Compensation C C C C C C C C C C C C C C C C C C C		Complete this table for your five highest compe											ax		
Name and business address  Description of services  Compensation  C  C  C  C  C  C  C  C  C  C  C  C  C		<del></del>									<del></del>				
			ress						1		vices	c			
		Hame and pusiness add							-			<del></del>	Jperi		
			<del></del>						-						
									<del>                                     </del>						
		<del></del>							<u> </u>						
2 Total number of independent contractors (including but not limited to those listed above) who received															0
Total number of independent contractions (including but number to mose used above) who received	2			ed to	tho	se l	ıste	d abo	ve)	who received					

Form 990 (2015) PIDC-Local Development Corporation 30-0598934 Page 9 Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (B) (C) Unrelated (D) Related or Total revenue Revenue business exempt excluded from function revenue tax under sections revenue 512-514 1a Federated campaigns 0 1a Contributions, Gifts, Grants and Other Similar Amounts 1b Membership dues 0 Fundraising events 1c d Related organizations. 1d 0 Government grants (contributions) 1e All other contributions, gifts, grants, and similar amounts not included above 1f Noncash contributions included in lines 1a-1f \$ Total. Add lines 1a-1f **Business Code** Program Service Revenue 900099 12,504,704 2a Below Market Rate Lending 12,504,704 b Contract Management 900099 9,395,458 9,395,458 0 0 All other program service revenue Total. Add lines 2a-2f 21,900,162 Investment income (including dividends, interest, and other similar amounts) 44,962 44,962 4 Income from investment of tax-exempt bond proceeds 5 Royalties (ı) Real (II) Personal 6a Gross rents **b** Less rental expenses. 0 c Rental income or (loss) Net rental income or (loss). (i) Securities (II) Other 7a Gross amount from sales of assets other than inventory 164,413 b Less' cost or other basis and sales expenses 157,116 Gain or (loss) 7,297 Net gain or (loss) 7.297 Other Revenue 8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 b Less direct expenses b 0 c Net income or (loss) from fundraising events 9a Gross income from gaming activities See Part IV, line 19 0 b Less direct expenses 0 c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances b Less cost of goods sold Net income or (loss) from sales of inventory **Business Code** Miscellaneous Revenue 11a 0 0

All other revenue

Total. Add lines 11a-11d.

Total revenue. See instructions

0

0

21,900,162

21,952,421

### Form 990 (2015) Part IX Statement of Functional Expenses

	Check if Schedule O contains a response or note	to any line in this Pa	art IX		
	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		· · · · · · · · · · · · · · · · · · ·	, ,	2, 1, 2, 1, 2, 2, 2, 3, 4
	domestic governments See Part IV, line 21 .	9,748,121	9,748,121		3.1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.
2	Grants and other assistance to domestic				
•	individuals See Part IV, line 22	0		* * * *	* 355 5, \$ 1, 2
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
4	individuals See Part IV, lines 15 and 16 Benefits paid to or for members	0		3 \ "	* ''
5	Compensation of current officers, directors,			, , ,	
3	trustees, and key employees	ا		0	
6	Compensation not included above, to disqualified				
•	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	l ol			
7	Other salaries and wages .	0			
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	l ol			
9	Other employee benefits .	0			
10	Payroll taxes .	0			
11	Fees for services (non-employees)				
а	Management .	850,000	850,000		
b	Legal	0			
С	Accounting	0			
d	Lobbying	0			
е	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	0			
g	Other (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O)	0			<u> </u>
12	Advertising and promotion	0			
13	Office expenses	0			
14	Information technology	0			
15	Royalties	0			
16	Occupancy	0			
17	Travel	0	<del></del>		
18	Payments of travel or entertainment expenses				
19	for any federal, state, or local public officials	0			
20	Conferences, conventions, and meetings Interest	3,275,220	3,275,220		
21	Payments to affiliates	3,273,220	3,273,220		
22	Depreciation, depletion, and amortization .	76,612	76,612	0	0
23	Insurance .	4,368	4,368		
24	Other expenses Itemize expenses not covered	1,000	1,000		n 2 7,985 (cs. \$1
	above (List miscellaneous expenses in line 24e If	, "		*	
	line 24e amount exceeds 10% of line 25, column	* *	¥	. ,	* \$. \$ #
	(A) amount, list line 24e expenses on Schedule O)			¢	
а	Direct contract expense	2,740,141	2,740,141		
b	Provision (recovery) for loan losses	3,358,490	3,358,490		
С	Guaranteed loan provision	71,409	71,409		
d	Other expense	438		438	
е	All other expenses	11,044	11,044		
25	Total functional expenses. Add lines 1 through 24e	20,135,843	20,135,405	438	0
26	Joint costs. Complete this line only if the				
	organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation. Check here ► if				
	following SOP 98-2 (ASC 958-720)	ll			l .

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Part X	(		
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	6,458,104	1	13,196,978
	2	Savings and temporary cash investments .	49,629,051	2	54,614,117
	3	Pledges and grants receivable, net	0	3	0
	4	Accounts receivable, net	1,588,008	4	834,000
	5	Loans and other receivables from current and former officers, directors,		٠	* _ \$ _ \$ _ \$ _ \$
		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	等最多的"关系"	) "At	
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and	, x	7 1 1 mm.	
		sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary	2.2		
Assets		organizations (see instructions) Complete Part II of Schedule L		6	
(SS	7	Notes and loans receivable, net .	158,490,448	7	149,507,256
•	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 0			· · · · · · · · · · · · · · · · · · ·
	b	Less accumulated depreciation 10b 0		1	0
	11	Investments—publicly traded securities	0		0
	12	Investments—other securities See Part IV, line 11	0		0
	13	Investments—program-related See Part IV, line 11	1,015,703		1,355,899
	14	Intangible assets .	0	14	0
	15	Other assets See Part IV, line 11	17,437,418	15	16,726,296
	16	Total assets. Add lines 1 through 15 (must equal line 34)	234,775,848		236,234,546
	17	Accounts payable and accrued expenses	989,468	17	820,275
	18	Grants payable .	45.005.444	18	45,000,000
	19 20	Deferred revenue	15,605,111		15,332,996
	21	Tax-exempt bond liabilities		20_	
(D	22	Escrow or custodial account liability Complete Part IV of Schedule D	0	21	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
Liabilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and	, , *		
ΞĘ		disqualified persons Complete Part II of Schedule L	~ ^ **	. 22	* * * * * * * * * * * * * * * * * * * *
Ë	23	Secured mortgages and notes payable to unrelated third parties	94,337,738	23	86,848,387
	24	Unsecured notes and loans payable to unrelated third parties	94,337,730	24	00,040,307
	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	57,861,275	25	65,441,351
	26	Total liabilities. Add lines 17 through 25	168,793,592	26	168,443,009
		Organizations that follow SFAS 117 (ASC 958), check here   X and	4 3 4 4 3 2 3	经。身	Party Course
es		complete lines 27 through 29, and lines 33 and 34.			
2	27	Unrestricted net assets .	65 092 256	27	67.704.527
Sale	28	Temporarily restricted net assets	65,982,256	27 28	67,791,537
B	29	Permanently restricted net assets		29	
or Fund Balances	29			25	THE LOOK OF THE WAR AREA OF
<u>-</u>		Organizations that do not follow SFAS 117 (ASC958), check here		1 70.	
8		complete lines 30 through 34.		, ,	وه کا گار کا مستقد کا کسال سال
Net Assets	30	Capital stock or trust principal, or current funds		30	
As	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
let	32	Retained earnings, endowment, accumulated income, or other funds	05.000.050	32	07.704.507
-	33	Total net assets or fund balances .	65,982,256	33	67,791,537
	34	Total liabilities and net assets/fund balances	234,775,848	34	236,234,546

Form 9	990 (2015) PIDC- Local Development Corporation	30	-0598934	Page 1	<u>2</u>
Part	XI Reconciliation of Net Assets				_
•	Check if Schedule O contains a response or note to any line in this Part XI	<u></u>	<u> </u>		
1	Total revenue (must equal Part VIII, column (A), line 12)	1	21	,952,42	1
2	Total expenses (must equal Part IX, column (A), line 25)	2	20	,135,84	<u>.3</u>
3	Revenue less expenses Subtract line 2 from line 1	3	1	,816,57	8
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	65	,982,25	6
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			_
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	67	,798,83	,4
Part				<del></del>	ı
	Check if Schedule O contains a response or note to any line in this Part XII	<u> </u>		<u>.                                    </u>	
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	-		Yes No	
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			المَّارِّةِ الْمِنْ الْمُثَارِّةِ الْمُثَارِّةِ الْمُثَارِّةِ الْمُثَارِّةِ الْمُثَارِّةِ الْمُثَارِّةِ الْمُث المُنْ الْمُثَارِّةِ الْمُثَارِّةِ الْمُثَارِّةِ الْمُثَارِّةِ الْمُثَارِّةِ الْمُثَارِّةِ الْمُثَارِّةِ الْمُث	** {
	Separate basis Consolidated basis Both consolidated and separate basis		- 3.37		ر • ا ع
b	Were the organization's financial statements audited by an independent accountant?		2b	X	<i>.</i>
-	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				• '
	Separate basis X Consolidated basis Both consolidated and separate basis				
	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of		- (77,577)		5 54
С	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	X	-
	If the organization changed either its oversight process or selection process during the tax year, explain in	•	<del></del>	, , , , , , , , , , , , , , , , , , ,	<u>. ;</u>
	Schedule O			2	J }
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in		1 . 43%	Samuel .	ليخي
Ja	the Single Audit Act and OMB Circular A-133?		3a	x	
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	$_{X}$	
	Togation about of addition, explain may in contention of and decombe any crops taken to already outsit addition	<del></del>		990 (201	5)
				\	- •

### **Continuation Sheet for Form 990**

Name of the Organization En

Employer identification number

Page 1 of 1

PIDC- Local Development Corporation

30-0598934

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

/A\	(C)			,.				(6)	/5\	
(A) Name and title	(B)	Posit	tion (		C) k all	that ap	lvla	(D) Reportable	(E) Reportable	(F) Estimated
Name and tide	Average hours per week (list any hours for related organizations below dotted line)	nours per week (list any nours for related ganizations low dotted	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations					
(26) Kenneth Orris	0 05	T	<del> </del>		$\vdash$	<del>                                     </del>	-	<u></u>		
Director	0 09	Х			i					
(27) Angelo Perryman	0 05				Г		Γ			
Director	0 09	Х								
(28) William Sautter	0 05									
Director	0 09	X			ĺ	1			[	
(29) Joseph Weiss	0.05				<u> </u>					
Director	0 09	Х		L	L	L			<u>  _                                   </u>	
(30) John Grady	4 00									
President	33 50			Х		1			304,882	59,717
(31) Samuel Rhoads	4 00								i	
Executive Vice President	33 50			Х					222,642	36,528
(32) Anthony Simonetta	4 00									
Senior Vice President	33 50			Х					218,183	31,892
(33) William J Agate	1 00									
Senior Vice President	36 50	_		X					177,634	46,680
(34) Teresa DeMusis	4 00				İ	1				
Senior Vice President	33 50		L	X	<u> </u>	<u>L</u> .			165,471	27,354
(35) Paul J Deegan	1 00	1				1				
Senior Vice President	36 50			Х	L		_		160,987	40,185
(36) Anne Nevins	4 00						1			
Senior Vice President	33 50			X	_				187,438	43,475
(37) Thomas Dalfo	1 00					1				
Senior Vice President	36 50			X	L.	<u> </u>			159,710	49,422
(38) Ilene Burak	4 00				ł				1	
Senior Vice President	36 50			X	L	<u> </u>	<u> </u>		166,061	50,379
(39) Wanda Speight	4 00	1								
Senior Vice President	36 50		<u> </u>	X	ļ		<u> </u>		197,017	30,219
(40) Prema Gupta	1 00			1						
Senior Vice President	36_50		<u> </u>	Х	<u> </u>	ļ	<b> </b>		42,024	11,788
(41) Joseph Mee	4 00				İ					
Assistant Secretary	36 50		<u> </u>	Х	<u> </u>	ऻ	_		146,192	46,136
(42) Mary Corcoran	4 00			١.						
Assistant Secretary	36 50			X	<u> </u>		<del> </del>		90,449	20,347
(43)										
(44)							ļ			
(45)						<del>                                     </del>			-	
(46)	<del></del>	<del> </del>	-		$\vdash$	-	$\vdash$			

### **SCHEDULE D** (Form 990)

Supplemental Financial Statements

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Name	f the organization	· -	Employer identification number
PIDC	Local Development Corporation		30-0598934
Part	Organizations Maintaining Don	or Advised Funds or Other Similar F	unds or Accounts.
		vered "Yes" on Form 990, Part IV, line	
		(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 do	onor advisors in writing that the assets held in	n donor advised
	funds are the organization's property, subject		
6	Did the organization inform all grantees, don		
	used only for charitable purposes and not for		
	purpose conferring impermissible private ber		Yes No
Part			
UEIL		vered "Yes" on Form 990, Part IV, line	7
1	Purpose(s) of conservation easements held		<u></u>
•	<del>-</del>		of a historically important land area
	Preservation of land for public use (e g , rec	· =	
	Protection of natural habitat	Preservation	of a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organiza	tion held a qualified conservation contributio	n in the form of a conservation
	easement on the last day of the tax year		Held at the End of the Tax Year
а	Total number of conservation easements	•	. 2a
b	Total acreage restricted by conservation eas		2b
C	Number of conservation easements on a cer	tified historic structure included in (a)	2c
d	Number of conservation easements included	I in (c) acquired after 8/17/06, and not on a	
	historic structure listed in the National Regist		2d
3	Number of conservation easements modified	l, transferred, released, extinguished, or tern	ninated by the organization during
	the tax year		
4	Number of states where property subject to o		
5	Does the organization have a written policy r		
	violations, and enforcement of the conservat		Yes No
6	Staff and volunteer hours devoted to monitoring,	inspecting, handling of violations, and enforcing	conservation easements during the year
_	<u> </u>		
7	Amount of expenses incurred in monitoring, inspense	ecting, handling of violations, and enforcing cons	ervation easements during the year
_	<b>\$</b>		470(1)(4)(5)(1)
8	Does each conservation easement reported	on line 2(d) above satisfy the requirements of	
_	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization re		
	balance sheet, and include, if applicable, the		ancial statements that describes
	the organization's accounting for conservation	n easements	or Other Similar Assets
Pari		ections of Art, Historical Treasures,	
	Complete if the organization ansv	vered "Yes" on Form 990, Part IV, line	0
1a	If the organization elected, as permitted under		
	works of art, historical treasures, or other sin		
	of public service, provide, in Part XIII, the tex		
þ	If the organization elected, as permitted under		
	works of art, historical treasures, or other sin	nilar assets held for public exhibition, educat	ion, or research in furtherance
	of public service, provide the following amou	nts relating to these items	
	(i) Revenue included on Form 990, Part VIII	, line 1	. ► \$ - ► \$
	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of		
	following amounts required to be reported ur	nder SFAS 116 (ASC 958) relating to these if	tems
а	Revenue included on Form 990, Part VIII, lin		. ▶ \$
b	Assets included in Form 990, Part X	<u> </u>	<b>&gt;</b> \$

Part III   Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)	Schedu	ule D (Form 990) 2015 PIDC- Local Develo	opment Corporation		30-059	98934 Page <b>2</b>
collection terms (chock all that apply) a Public exhibition d Loan or exchange programs b Scholarly research e Other  Preservation for future generations 4 Provide a description of the organizations 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 VI Excove and Custodial Arrangements.  Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21 for expensive the present of the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21 for expensive the following table of Yes and Amount of Part XIII and complete the following table of Yes and Amount of Part XIII and complete the following table of Yes and Amount of Part XIII and Complete the following table of Yes and	Part	Organizations Maintaining	Collections of Art, Hist	orical Treasures, o	r Other Similar Ass	ets (continued)
a Public exhibition d Chan or exchange programs b Scholarly research e Other Chrowde a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.  Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.  During the year, did the organization's collections and explain how they further the organization's exempt purpose in Part XIII.  During the year, did the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part XIII the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part XIII the organization an egent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990 Part XIII and complete the following table  Beginning balance  Beginning balance  Beginning balance  Distributions during the year  Distributions during the year  Distributions during the year  Distributions during the year  Distributions during the year  Distributions during the year  Distributions during the year  Distributions during the year and the arrangement in Part XIII Check here if the explanation has been provided on Part XIII  Part Ves," explain the arrangement in Part XIII Check here if the explanation has been provided on Part XIII  Part Ves," explain the arrangement in Part XIII (check here if the explanation has been provided on Part XIII  Part Ves," explain the arrangement in Part XIII (check here if the explanation has been provided on Part XIII  Part Ves," explain the arrangement in Part XIII (check here if the explanation has been provided on Part XIII  Part Ves," explain the arrangement in Part XIII (check here if the explanation has been provided on Part XIII  Part Ves," explain the arrangement in Part XIII (check here if the explanation has been provided on Part XIII  Distribution the provided in the provided in the part XIII (check here if the explain the arrangement	3 ·	Using the organization's acquisition, ac	ccession, and other records, o	check any of the follow	ing that are a significan	t use of its
b Scholarly research o Cither   Preservation for future generations						
c Preservation for future generations 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's collections and explain how they further the organization's collection?	а	Public exhibition	d	Loan or exchange	programs	
Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.	b	Scholarly research	e	Other		
Sull	С	Preservation for future generation	ons			
During the year, did the organization solict 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? collection?	4	Provide a description of the organization	on's collections and explain he	ow they further the org	anization's exempt purp	oose in Part
Secrit   S		XIII.				
Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on 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 include on Form 990. Part X	5					
Complete if the organization answered "Yes" on 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?  If "Yes," explain the arrangement in Part XIII and complete the following table  C Beginning balance  C Beginning balance   16			than to be maintained as part	of the organization's o	collection? .	Yes No
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?  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 2 Distributions during the year f Ending balance b It grains arrangement in Part XIII Check here if the explanation has been provided on Part XIII    Part V	Part		angements.			
1a   Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?   No   If "Yes," explain the arrangement in Part XIII and complete the following table   Amount   It   It   It   It   It   It   It			answered "Yes" on Form	990, Part IV, line 9	, or reported an amo	unt on Form
No			<del></del>		<u> </u>	
b If "Yes," explain the arrangement in Part XIII and complete the following table  c Beginning balance	1a		ustodian or other intermediar	y for contributions or o	ther assets not	□ vac □ Na
c Beginning balance d Additions during the year. e Distributions during the year. f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes X No b If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided on Part XIII Yes Complete if the organization answered "Yes" on Form 990, Part IV, line 10.  Table Beginning of year balance Complete if the organization answered "Yes" on Form 990, Part IV, line 10.  Table Beginning of year balance Contributions Contribut	h		et VIII and complete the faller	una tabla	•	res No
C   Beginning balance   1c   0   1d   1d   1d   1d   1d   1d   1d	D	ii res, explain the arrangement in ra	int Ain and complete the follow	wing table		Amount
d Additions during the year   1	С	Beginning balance			1c	
e Distributions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes X No b if "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided on Part XIII  Part V Endowment Funds.  Complete if the organization answered "Yes" on Form 990, Part IV, line 10.  Beginning of year balance (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back.  Complete if the organization answered "Yes" on Form 990, Part IV, line 10.  Reginning of year balance (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back.  Reginning of year balance (a) Current year (e) Two years back (d) Three years back (e) Four years back.  Reginning of year balance (e) Current year (e) Two years back (e) Four years back.  Reginning of year balance (e) Current year (e) Two years back (e) Four years back.  Reginning of year balance (e) Current year (e) Two years back (e) Four years back.  Reginning of year balance (e) Four years back (e) Four years back.  Reginning of year balance (e) Four years back (e) Four years back.  Reginning of year balance (e) Four years back.  Reginning of year balance (e) Four years back.  Reginning of year balance (e) Four years back.  Reginning of year balance (e) Four years back.  Reginning of year balance (e) Four years back.  Reginning of year balance (e) Four years back.  Reginning of year balance (e) Four years back.  Reginning of year balance (e) Four years back.  Reginning of year balance (e) Four years back.  Reginning of year balance (e) Four years back.  Reginning of year balance (e) Four years back.  Reginning of year balance (e) Four years back.  Reginning of year balance (e) Four years back.  Reginning of year balance (e) Four years back.  Reginning of year balance (e) Four years back.  Reginning of year balance (e) Four years back.  Reginning of year balance (e) Four years back.  Reginning of year balance (e) Four y						
f Ending balance  Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  Yes X No  If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided on Part XIII  Endowment Funds.  Complete if the organization answered "Yes" on Form 990, Part IV, line 10.  Beginning of year balance  Contributions  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  O O O O O O O O O O  Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as  Board designated or quasi-endowment  Permanent endowment  Permanent endowment  Mether endowment funds not in the possession of the organization that are held and administered for the organization by  (i) unrelated organizations  (iii) related organizations  If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?  Part VI  Land, Buildings, and Equipment.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11a See Form 990, Part X, line 10  Describe in Part XIII the intended uses of the organization's endowment funds  O O O O O O O O O O O O O O O O O O O			•			
Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided on Part XIII  Endowment Funds.  Complete if the organization answered "Yes" on Form 990, Part IV, line 10.    Beginning of year balance	_		•			0
b If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided on Part XIII	2a		t on Form 990 Part X line 2	1 for escrow or custod	ial account liability?	Yes X No
Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.    (a) Current year   (b) Prior year   (c) Two years back   (d) Three years back   (e) Four years back	_	_				
Complete if the organization answered "Yes" on Form 990, Part IV, line 10.    Complete if the organization answered "Yes" on Form 990, Part IV, line 10.   Contributions		<u></u>	THE CALL THE CAPT	anation has been prov	1000 011 1 0117111	
(a) Current year   (b) Prior year   (c) Two years back   (d) Three years back   (e) Four years back   (e) Four years back   (d) Three years back   (e) Four years back   (e) Four years back   (d) Three years back   (e) Four years back   (d) Three years back   (e) Four years back   (e) Four years back   (d) Three years back   (e) Four years back   (e) Four years back   (e) Four years back   (e) Four years back   (d) Three years back   (e) Four years   (e) Four	rail		answered "Ves" on Form	990 Part IV line 1	0	
Beginning of year balance 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 O 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		Complete if the organization				ck (e) Four years back
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	1a	Beginning of year balance		(1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1		
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						
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						
e Other expenditures for facilities and programs  f Administrative expenses g End of year balance 0 0 0 0 0 0 0 0  2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as a Board designated or quasi-endowment						
e Other expenditures for facilities and programs  f Administrative expenses g End of year balance 0 0 0 0 0 0 0 0  2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as a Board designated or quasi-endowment	d	Grants or scholarships				
f Administrative expenses g End of year balance  O O O O O  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	е	•				
f Administrative expenses g End of year balance  O O O O O  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						
Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as Board designated or quasi-endowment	f	· -				
a Board designated or quasi-endowment b Permanent endowment	g	End of year balance	0	0	0	0 0
b Permanent endowment	2	Provide the estimated percentage of the	ne current year end balance (	line 1g, column (a)) he	ld as	
c Temporarily restricted endowment	а	Board designated or quasi-endowment	t ► %			
The percentages on lines 2a, 2b, and 2c should equal 100%  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" on line 3a(ii), are the related organizations listed as required on Schedule R?  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" on Form 990, Part IV, line 11a See Form 990, Part X, line 10  Description of property  (a) Cost or other basis (b) Cost or other basis (other)  (investment)  Description of property  (a) Cost or other basis (other)  Description of property  (b) Buildings  Description of property  (a) Cost or other basis (other)  Description of property  (a) Cost or other basis (other)  Description of property  (b) Cost or other basis (other)  Description of property  (a) Cost or other basis (other)  Description of property  (b) Cost or other basis (other)  Description of property  (a) Cost or other basis (other)  Description of property  (b) Cost or other basis (other)  Description of property  (c) Accumulated depreciation  (d) Book value  Description of property  Description of property  Description of property  (a) Cost or other basis (other)  Description of property  Descrip	b	Permanent endowment	%			
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 (iii) related organ	С	Temporarily restricted endowment	<b>&gt;</b> %			
Ves   No   Sa(i)   Unrelated organizations   Sa(i)		The percentages on lines 2a, 2b, and 2	2c should equal 100%			
(i) unrelated organizations (ii) related organizations b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?  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" on Form 990, Part IV, line 11a See Form 990, Part X, line 10  Description of property  (a) Cost or other basis (b) Cost or other basis (other) (investment)  1a Land 0 0 0 0 0 0 0  b Buildings 0 0 0 0 0 0  c Leasehold improvements 0 0 0 0 0 0  d Equipment 0 0 0 0 0  d Equipment 0 0 0 0 0  d O 0  d	3a	Are there endowment funds not in the	possession of the organization	n that are held and ad	ministered for the	
(iii) related organizations b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 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" on Form 990, Part IV, line 11a See Form 990, Part X, line 10  Description of property  (a) Cost or other basis (b) Cost or other basis (c) Accumulated depreciation  1a Land  0 0 0 0 0 0  b Buildings  0 0 0 0 0  c Leasehold improvements  0 0 0 0 0  c Equipment  0 0 0 0 0  0 0  0 0  0 0  0 0  0 0		organization by				
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?  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" on Form 990, Part IV, line 11a See Form 990, Part X, line 10  Description of property  (a) Cost or other basis (investment)  (investment		<ul><li>(i) unrelated organizations</li></ul>				
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" on Form 990, Part IV, line 11a See Form 990, Part X, line 10  Description of property  (a) Cost or other basis (investment)  (investment)  (b) Cost or other basis (other)  (c) Accumulated depreciation  (d) Book value  (d) Book value  (a) Book value  (d) Dook value  (d) Dook value  (d) Dook value  (d) Dook value  (d) Dook value  (d) Dook value  (d) Dook value  (d) Dook value  (d) Dook value  (d) Dook value  (d) Dook value  (d) Dook valu						
Part VI Land, Buildings, and Equipment.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11a See Form 990, Part X, line 10  Description of property  (a) Cost or other basis (investment)  (investment)  (b) Cost or other basis (other)  (c) Accumulated depreciation  (d) Book value  Description of property  (a) Cost or other basis (other)  0  0  0  0  0  0  0  0  0  0  0  0  0	þ	The state of the s	=			3b
Complete if the organization answered "Yes" on Form 990, Part IV, line 11a   See Form 990, Part X, line 10	4			ment funds		
Description of property   (a) Cost or other basis (investment)   (b) Cost or other basis (other)   (c) Accumulated depreciation	Part	VI Land, Buildings, and Equi		000 B 101 1	4- 0 5 000 5	and Villian 40
Column						
1a         Land         0         0         0           b         Buildings         0         0         0         0           c         Leasehold improvements         0         0         0         0         0           d         Equipment         0         0         0         0         0         0           e         Other         0         0         0         0         0         0		Description of property	1 ' '		, , ,	(d) Book value
b         Buildings         0         0         0         0           c         Leasehold improvements         0         0         0         0           d         Equipment         0         0         0         0           e         Other         0         0         0         0	4-	Lond				0
c         Leasehold improvements         0         0         0         0           d         Equipment         0         0         0         0         0           e         Other         0         0         0         0         0						
d         Equipment         0         0         0         0           e         Other         0         0         0         0		_				
e Other 0 0 0 0	_	•				
e Otilei						
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10c)						0

Schedule D (Form 990) 2015 PIDC- Local Developmen	nt Corporation		30-0598934	Page 3
Part VII Investments—Other Securiti	ies.			
Complete if the organization as	nswered "Yes" on Form 99	00, Part IV, line 11b. See Forr	n 990, Part X	, line 12
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of val Cost or end-of-year m		
(1) Financial derivatives	0			
(2) Closely-held equity interests	0			
(3) Other				
(A)				
(B)				
(C)				
(D)			<del></del>	
(E)				
(F) (G)				
(H)				
Total (Column (b) must equal Form 990, Part X, col. (B) line 12.)	0	, *.		185 3
Part VIII Investments—Program Rela		<u> </u>	<del></del>	<del></del>
Complete if the organization as		00. Part IV. line 11c See Forr	n 990. Part X	. line 13.
(a) Description of investment	(b) Book value	(c) Method of val		<u>,</u>
(a) Description of investment	(b) Book Value	Cost or end-of-year m		
(1)				
(2)			<del></del>	
(3)		<u> </u>	<del></del>	
(4)				
(5)				
(6)				
(7)				
(8)			<del></del>	
(9) Total (Column (b) must equal Form 990, Part X, col (B) line 13 )	0		<del>-</del>	·. · <u>A</u> :
Part IX Other Assets.	J		х	
Complete if the organization at	newered "Ves" on Form 99	0 Part IV line 11d See Form	n 990 Part X	line 15
	(a) Description	90,1 41114, 1110 114 2001011	(b) Book va	
(1) Due from related parties	(d) Dooripilon		<del></del>	5,781,698
(2) Accrued interest receivable				699,820
(3) Financing fees, net				244,778
(4) Due from affiliate entities				C
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, co	ol (B) line 15)	<u> </u>	16	6,726,296
Part X Other Liabilities.	100	00 Dart N. Pros. 44 444 Oc	5 000	D4 V
Complete if the organization at line 25.	nswered "Yes" on Form 98	90, Part IV, line The or Titl Se	e Form 990,	Part X,
1. (a) Description of liability	(b) Book value			
(1) Federal income taxes	0			
(2) Due to other agencies	62,124,953			1200
(3) Due to affilate entities	3,257,142			
(4) Other liabilities	59,256			
(5)				
(6)				1.3.3
(7)		,		******
	<del> </del>	<b>,</b>	All Jakes	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1

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.

Par	Reconciliation of Revenue per Audited Financial Statements With Revenue per Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	er Return.	
1	Total revenue, gains, and other support per audited financial statements	1 1	21,945,124
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		21,545,124
a	Net unrealized gains (losses) on investments	5(-3)	
b	Donated services and use of facilities	<b>─</b>  ;`.:	
c	Recoveries of prior year grants 2c		
d	Other (Describe in Part XIII.)	<del>  *</del> ;	
e	Add lines 2a through 2d		0
3	Subtract line 2e from line 1	3	21,945,124
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	-3-	21,545,124
a		'.	
b	Investment expenses not included on Form 990, Part VIII, line 7b  Other (Describe in Part XIII )  4a  4b		
C	Add lines 4a and 4b		0
5		4c 5	<u>~</u>
	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)  t XII Reconciliation of Expenses per Audited Financial Statements With Expenses		21,945,124
Par	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	per Ketur	
1	Total expenses and losses per audited financial statements	1	20,135,843
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		
С	Other losses 2c		
d	Other (Describe in Part XIII ) . 2d		
е	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	20,135,843
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 ) .		
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	20,135,843
Par	t XIII Supplemental Information.		
Prov	de 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, Pa	irt XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional info	mation	
Part	X Line 2 Philadelphia Industrial Development (PIDC) and its affiliates, which		
ınclu	des PIDC LDC, present combined financial statements. The combined financial		
state	ments include the assessment for Accounting for Uncertainty in Income Taxes, which		<b></b>
regui	res that a tax position be recognized or derecognized based on a "more likely than	<b>-</b>	
not" t	hreshold For tax positions meeting the more likely than not threshold, the amount	<del>-</del>	
recog	unized in the combined financial statements is the largest benefit that has a greater		
than	50 percent likelihood of being realized upon the ultimate settlement with the		
relev	ant taxing authority Management does not believe that there are any uncertain tax		
positi	ons for PIDC LDC, as such, no provision is recorded in the combined statements of		
	ties. PIDC LDC is required to file returns with the Internal Revenue Service (IRS)		
	And the second of the second o		
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rema	in open		

Schedule D (Form:		PIDC- Local Development Corporation	30-0598934	Page 5
Part XIII	Supple	emental Information (continued)		
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		······································		
	<b></b>			

SCHEDULEI (Form 990)

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

Complete if the organization answered "Yes" on 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.

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OMB No 1545-0047

30-0598934

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∑ Yes ∑

Employer identification number

General Information on Grants and Assistance the selection criteria used to award the grants or assistance? Part I

PIDC- Local Development Corporation

Department of the Treasury Internal Revenue Service Name of the organization

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and

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

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on 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 Part II

200, 1 01(10, 1110, 21	, tot ally recipi	ent urat received	obo, i arriv, mie 21, ior any recipient that received more than \$2,000 Farring by duplicated in additional space is needed	ait II cari pe uupiic	ated it additional spe	ce is rieeded	
1 (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
(1) ISS Management, LLC 1533 Skippack Pike, Suite 2 Blue Bell,	46-3775105		8,294,822		Book		economic developmen
(2) 60th Street Corndor, LP 11 Mayo Place Dresher, PA 19084	45-3507083		95,000		Book		economic developmen
(3) Hat Shop, LLC 1234 N 30th Street Philadelphia, PA 1	46-2778262		25,000		Воок		economic developmen
(4) Welcoming Center For New Penns 1617 John F. Kennedy Blvd. Philadelp	23-3001411	501c3	24,847		Book		economic developmen
(5) Andrew Kaplan 4950 Parkside Ave, Suite 100 Philade	27-2024604		24,000		Воок		economic developmen
(6) Jin Hwan Kim 600 Market Street Philadelphia, PA 19	112-xx-xxxx		18,000		Book		economic developmen
(7) M Grossman & Co Inc 206 Arch Street Philadelphia, PA 1910	23-1611893		15,000		Book		economic developmen
(8) Pike Graphics 1140 Bethlehem Pike Flourtown, PA 1	27-2780689		13,989		Book		economic developmen
(9) Global Food Group, LLC 4590 Main Street Philadelphia, PA 191	47-2114201		13,455		Book		economic developmen
(10) Little Spoon, LLC 1615 Rodman Street Philadelphia, PA	46-3518317		12,000		Book		economic developmen
(11) 1546 Frankford Ave Associates, L 910 Harvest Drive Blue Bell, PA 19422	61-1715024		12,000		Book		economic developmen
(12) Gold, Inc. 1648-52 E Passyunk Avenue Philadel 51-0266055	51-0266055		12,000		Book		economic developmen
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 3 Enter total number of other organizations listed in the line 1 table	501(c)(3) and go	overnment organiza	itions listed in the line 1	table			7
	2000						2

For Paperwork Reduction Act Notice, see the Instructions for Form 990.  $_{\mbox{\scriptsize HTA}}$ 

Schedule I (Form 990) (2015)

Schedule I (Form 990) (2015)

Part III

(f) Description of non-cash assistance Supplemental Information. Provide the Information required in Part I, line 2, Part III, column (b), and any other additional information Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22 (e) Method of valuation (book, FMV, appraisal, other) grant agreement. Management reviews the documentation provided by the grantees to ensure the request meets the criterial of the grant Part I Line 2 PIDC LDC has controls in place to ensure grant proceeds will be used and distributed in accordance with the terms of the Part I Line 1 Some applicants have given their social security number for grant information. For confidentiality purposes, the social non-cash assistance (d) Amount of security numbers have not been fully disclosed on the Form 990, but are available on request. (c) Amount of cash grant agreement If (and when) needed, management obtains approval from the funding agency Part III can be duplicated if additional space is needed (b) Number of recipients (a) Type of grant or assistance

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PIDC- Local Development Corporation						30-0598934	
Part II Continuation of Grants and Other Assistance	Other Assi		to Governments and Organizations in the United States	ganizations in th	he United States		
(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
(13) Green Park Properties Inc 793 South 2nd Street, Philadelphia, PA 19147 20	20-0991335		12,000		Book		economic development
(14) 3939 Lancaster Associates 1145 Forrest Street Conshohocken, PA 19428 45	45-2793739		12,000		Book		economic development
(15) Samuel B. Stern 1 Edgemoor Road Cheltenham, PA 19012	175-xx-xxx		12,000		Book		economic development
(16) Ralph Sposato Irrevocable Trust 16 R. Shawmont Avenue Philadelphia, PA 191 27.	27-7023203		10,000		Book		economic development
	20-0935470		10,000		Book		economic development
(18) Roxborough Development Corp 6111 Ridge Avenue Philadelphia, PA 19128 23	23-2705347		10,000		Book		economic development
	166-xx-xxx		10,000		Book		economic development
- 0	173-xx-xxx		10,000		Book		economic development
	170-xx-xxx		10,000		Book		economic development
;	23-1352630	501c3	10,000		Book		economic development
(23) Neil Patterson & Walnut Tree Constructed 2034 Fairmount Avenue Philadelphia, PA 1911 23	23-2954751		10,000		Book		economic development
	176-xx-xxx		10,000		Book		economic development
(25) Shift Space Design, LLC 3060 W Jefferson St Philadelphia, PA 19121	27-1461907		10,000		Book		economic development
(26) Evergreen Old City. 2127 Spruce Street Philadelphia, PA 19103 46	46-1152320		10,000		Book		economic development
(27) F&F Real Estate Partners Nar, LP 34 Oakland Terrace Bala Cyndwd, PA 19004 46	46-5109143		10,000		Book		economic development
	449-xx-xxx		10,000		Book		economic development
(29) Mt Airy, USA 6703 Germantown Avenue, Suite 200 Philadel 22	22-2526396	501c3	10,000		Book		economic development

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Name of the organization						1 Section of the sect	o control of the control
PIDC- Local Development Corporation						30-0598934	
Part 1 Continuation of Grants and Other Assistance to Governments and Organizations in the United States	nd Other Ass	istance to Gov	ernments and Or	nanizations in t	he United States	10000	
Name	(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,	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(30) Joseph Napolitano Jr 1842 E. Passyunk Avenue Philadelphia, PA 19	159-xx-xxx		10.000		Book		economic development
(31) Jeffrey David Glen 5224 Ridge Ave Philadelpha, PA 19128	006-xxxx		8.613		Book		economic development
(32) Asian Spice Food, Inc 4211 Chestnut Street Philadelphia, PA 19014	26-2014875		8,550		Book		economic development
(33) Kevin E Gillen 770 S 6th Street Philadelphia, PA 19147	139-xx-xxx		8,000		Book		economic development
(34) Alphabet Academy, Inc 1508 E. Passyunk Avenue Philadelphia, PA 15	23-2931756		8,000		Book		economic development
(35) Jones & Piner Real Estate Group, LLC 5042 Baltimore Ave Philadelphia, PA 19143	46-4686188		8,000		Book		economic development
(36) Jung Kim 313 Gribbel Rd Wyncote, PA 19102	556-xx-xxx		6,995		Book		economic development
(37) SAS Winstar Alley, LP 1521 Locust Street, Suite 400 Philadelphia, PA	20-2111226		0,650		Book		economic development
(38) LPPASSYUNK, LLC. 1934 E Passyunk Avenue Philadelphia, PA 19	47-1438963		6,530		Book		economic development
(39) African People's Education and Defense 1245 18th Avenue South St Peterson, FL 3370	59-3252727	501c3	6,075		Book		economic development
(40) SAS Third Street, L.P. 1521 Locust Street, Suite 400 Philadelphia, PA	01-0572330		6,065		Book		economic development
(41) 5815 Wayne, Ave, LLC 5815 Wayne Avenue Philadelphia, PA 19144	46-4446845	:	5,950		Book		economic development
(42) Mico's Wonderland Daycare 4405 Ridge Ave , Apt 6207 Philadelphia, PA 1	80-0590922		5,880		Book		economic development
(43) Wynnefield Overbrok Revitalization Corp 5600 City Avenue-Bala Place Philadelphia, PA	83-0444104	501c3	5,153		Book		economic development
(44) Guy Laren 426 S 44th Street Philadelphia, PA 19104	20-3647345		5,000		Book		economic development
(45) South Bank Street Properties, L.P. 1521 Locust Street, Suite 400 Philadelphia, PA	23-2912467		5,000		Book		economic development
(46) Sino American Buddist Association 1015 Cherry Street Philadelphia PA 19107	57-1201200	501c3	2.000		Book		economic development

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Name of the organization						Employer identification number	cation number
PIDC- Local Development Corporation						30-0598934	•
Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States	nd Other Ass	istance to Gove	ernments and Or	ganizations in th	ne United States		
(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
(47) Leroy Simmons 404 W Chelten Ave Philadelphia, PA 19144	170-xx-xxxx		5,000		Book		economic development
(48) White & Wong Bakery, 313 LLC 2420 E Boston Street Philadelphia, PA 19125	47-2036969		5,000		Book		economic development
(49) James Weber 626 S 4th Street Philadelphia, PA 19147	23-2790419		5,000		Book		economic development
(so) Philip Chapline 8022 Germantown Avenue Philadelphia, PA 1	203-xx-xxx		5,000		Book		economic development
(51) Ann Marie Muldoon Avenue Chiropractic 6233 Frankford Ave Philadelphia, PA 19135	23-2816527		5,000		Book		economic development
(52) Amelia's Bark Shop 1544 E Passyunk Avenue Philadelphia, PA 19	578-xx-xxx		5,000		Book		economic development
(53) Congreso de Latinos Unidos, Inc 2798 N. Amencan Street Philadelphia, PA 191	23-2051143	501c3	0	305,382	Book		economic development/forgiven
(54) Erin Murray 1524 Frankford Ave Philadelphia, PA 19125	161-xx-xxx		6,257		Book		economic development
(55) Easter Edge Realty 829 S 48th Street Philadelphia, PA 19143	45-5266782		6,000		Book		economic development
(99)							
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		Continuation	Continuation Sheet for Schedule I (Form 990)	schedule I (F	orm 990)	Page 1 of 1
Name of the organization	janization					tification number
Part III	Part III Continuation of Grants and Other Assistance to Individuals in the United States	Assistance to Inc	dividuals in the Un	ited States		30-0598934
	(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
80						
6						
10						
11						
12						
13						
14						
15		-				
16						
17						
18						
19						
20						
21						
22						
23						
24						
25						
26						

### 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. ► Attach to Form 990.

OMB No 1545-0047

Open to Public Inspection

Employer identification number

30-0598934

Department of the Treasury Internal Revenue Service Name of the organization

PIDC- Local Development Corporation

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

Part 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 on Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax indemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) 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 explain -1983 2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a? 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 related organization to establish compensation of the CEO/Executive Director, but explain in Part III Compensation committee Written employment contract Compensation survey or study Independent compensation consultant Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization Receive a severance payment or change-of-control payment? 4a Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b Participate in, or receive payment from, an equity-based compensation arrangement? 4c 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 on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of The organization? Any related organization?. If "Yes" to line 5a or 5b, describe in Part III 6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of The organization? 6a Any related organization? 6b If "Yes" on line 6a or 6b, describe in Part III 7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described on lines 5 and 6? If "Yes," describe in Part III 8 Were any amounts reported on 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 in Part III. 8 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?

30-0598934

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

Note: The sum of columns (B)(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

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)	listed	ndividual must equal t	of W-2 and/or 1099-MISC compensation	SC compensation	lon A, line 1a, applica	ole column (D) and (c	c) amounts for that individua	dividual
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(I)–(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
John Grady	€						0	
1 President	<b>E</b>	238,885	000'09	5,997	23,850	35,867	364,599	; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;
Samuel Rhoads	Ξ						0	11 11 11 11 11 11 11 11 11 11 11 11 11
2 Executive Vice President	(ii)	197,308	25,000	334	13,996	22,532	259,170	•
Anthony Simonetta	Θ						0	
3 Senior Vice President	Ξ	192,116	25,000	1,067	19,450	12,442	250,075	
William J Agate	ε						0	
4 Senior Vice President	(ii)	170,582	6,500	552	15,937	30,743	224,314	
Teresa DeMusis	Ξ						0	
5 Senior Vice President	Ξ	158,279	7,000	192	14,875	12,479	192,825	
Paul J Deegan	Θ				1		0	
6 Senior Vice President	(ii)	155,712	5,000	275	14,293	25,892	201,172	
Anne Nevins	ε					1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1	
7 Senior Vice President	(ii)	174,296	12,500	642	16,812	26,663	230,913	
Thomas Dalfo	Θ						0	
8 Senior Vice President	(ii)	152,439	7,000	271	13,637	35,785		
llene Burak	€						0	
9 Senior Vice President	Œ	155,308	7,000	3,753	14,608	35,771	216,440	
Wanda Speight	Θ							
10 Senior Vice President	Ξ	182,757	14,000	260	17,708	12,511	227,236	
Joseph Mee	(1)						0	
11 Assistant Secretary	€	139,050	6,500	642	13,099	33,037	192,328	
	Ξ							1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
12	€							
_	Ξ			1		1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1
13	Ξ							
	Ξ	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
14	€							
	€	1		1				
15	€							
	€			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
16	⊜							
							Sche	Schedule J (Form 990) 2015

### Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part Part II Line C (continued) The Form 990 requires management to report as deferred compensation the annual increase or decrease in thorough process to ensure that the executive compensation it pays to its top management officials is reasonable given the market the benefit is based upon a participant's service and compensation as of December 31, 2014, and expressed in the form of a fixed Part I Line 3 PIDC- LDC does not have any paid employees, all compensation to officers reported on Part VII of the Form 990 was in which it operates The related organization checks the following boxes on its Form 990 Question 3- Compensation Committee, participants' accrued benefits were frozen, and no new participants were allowed into the Plan. As a result of the Plan's freeze, paid by a related organization, Philadelphia Industrial Development Corporation (PIDC) The related organization undertakes a eligible to receive retirement benefits the first month on or the next following attainment of age 60 and completion of 5 years of does not correspond to the actual benefit due to the Plan participants and the Plan was frozen effective December 31, 2014, vesting service from the date they become eligible participants of the Plan Effective December 31, 2014, the Plan's existing contributions to the 457B Non-Qualified Retirement Plan, a self-funded deferred compensation plan for eligible individuals Part II Line C Defined benefit plan PIDC offers a defined benefit plan (the "Plan") to its employees Participants become Part II Line C (continued) The values that are disclosed in Part II (C) include employer 401K contributions and individual actuanal value, if any, of a defined benefit plan. As the change in the present value of the defined benefit plan's liability monthly benefit for his/her life commencing at normal retirement management did not report a value within Part II (C) Approval by the Board or Compensation Committee Supplemental Information for any additional information Part III

### 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.

► Attach to Form 990 or 990-EZ.

Department of the Treasury
Internal Revenue Service
Name of the organization

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

OMB No 1545-0047
2015
Open to Public Inspection

Employer identification number

PIDC- Local Development Corporation 30-0598934 Form 990, Part VI, Section A, Line 3 Philadelphia Industrial Development Corporation (PIDC) provides the staff and facilities for PIDC- LDC to perform its work PIDC- LDC, itself, has no employees Form 990, Part VI, Section A, Line 6 MEMBERS/STOCKHOLDERS The members of PIDC-LDC are the persons who are the Directors of the Corporation. The business and affairs of the Corporation are managed by the Directors. The organization has three classes of directors. 1) 7 City Directors consisting of seven officers of the City of Philadelphia, the Mayor of the City of Philadelphia, the Director of Commerce, the President of the City Council, the Chairman of the Planning Commission, the City Solicitor, the Managing Director, and the Director of Finance 2) 8 Chamber of Commerce Directors nominated by the President of the Greater Philadelphia Chamber of Commerce 3) 15 public directors as nominated jointly by the President of the Greater Philadelphia Chamber of Commerce and the Director of Commerce of the City of Philadelphia Form 990, Part VI, Section A, Line 6 continued- The seat of the Director of Commerce and the Planning Commissioner is held by one person. Form 990, Part VI, Section A, Line 7B DECISIONS SUBJECT TO APPROVAL The Board of Directors (comprised of the 30 members as defined above) is authorized to approve by appropriate resolution the purchase, sale, lease, mortgage pledge, or other disposal of real estate and the borrowing of money for that purpose The decisions of the Board regarding certain loan programs are subject to approval by external parties. In addition, between the times of the Board of Directors meetings, the Executive Committee has the right to exercise the authority of the Board of Directors The Executive Committee consists of 15 Directors including the seven (7) City Directors and eight (8) Chamber Directors The Chairman of the Board of Directors is also the Chairman of the Executive Committee Form 990, Part VI, Section A, Line 11B FORM 990 REVIEW PROCESS PIDC's Vice President of

Financial Reporting assembles the Form 990, which is subsequently reviewed by PIDC's Senior

information technology and technology fields in Philadelphia

Schedule O (Form 990 or 990-EZ) (2015)	Page 2
Name of the organization	Employer identification number
PIDC- Local Development Corporation	30-0598934
Form 990, Part VI, Section C, Line 18 HOW DOCUMENTS ARE MADE AVAILABLE TO THE PU	BLIC· PIDC-
LDC makes its Form 990 available to the public by retaining a copy at its place of business.	
Form 990, Part VI, Section C, Line 19 HOW DOCUMENTS ARE MADE AVAILABLE TO THE PU	BLIC PIDC-
LDC financial statements and governing documents (including the conflict of interest policy)	
are not ordinarily made available to the public	
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SCHEDULE R (Form 990)

# Related Organizations and Unrelated Partnerships

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

► Attach to Form 990

Open to Public

OMB No 1545-0047

Employer identification number

30-0598934

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

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

PIDC- Local Development Corporation

Part

Department of the Treasury Internal Revenue Service Name of the organization (f)
Direct controlling
entity Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had 0 PIDC-LDC 0 PIDC-LDC (e) End-of-year assets (d) Total income (c)
Legal domicile (state
or foreign country) А Ā Econ Development Econ Development Primary activity (a) Name, address, and EIN (if applicable) of disregarded entity 1500 Market Street Philadelphia, PA 19102 1500 Market Street Philadelphia, PA 19012 (2) PIDC LDC SB GP LLC 27-4386207 (1) PIDC LDC SB LLC 27-3124182 Part II (3) 9 € 3

one or more related tax-exempt organizations d	during the tax year.						
(e)	(q)	(c)	(p)	(e)	(J)	(6)	
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign country)	Exempt Code section	Public chanty status (if section 501(c)(3))	Direct controlling entity	Section 512(b)(13) controlled entity?	2(b)(13) illed y?
						Yes	No
(1) Philadelphia Industrial Development Corporation 23-6050858	Econ Development						
1500 Market Street Philadelphia, PA 19102		PA	501c4		N/A		×
(2) PIDC- Penn Venture Fund 27-1585341	Econ Development						
1500 Market Street Philadelphia, PA 19102		PA	501c4		N/A		×
(3) PIDC- Development Management Corporation 23-2176818	Econ Development						
1500 Market Street Philadelphia, PA 19102		PA	501c4		N/A		×
(4) PIDC- Financing Corporation 36-4665239	Econ Development						
1500 Market Street Philadelphia, PA 19102		PA	501c4		N/A		×
(5) Food Distribution Center 23-1475639	Econ Development		; ;				i
1500 Market Street Philadelphia, PA 19102		РА	115		N/A		×
(9)			i	:	i I		ı
			!				
(1)							

For Paperwork Reduction Act Notice, see the Instructions for Form 990.  $_{\rm HTA}$ 

Schedule R (Form 990) 2015

30-0598934

Part III

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

(a) Name, address, and EIN of related organization	(a) (b) (c) (d) (d) (e) (d) (e) (f) (d) (e) (f) (f) (f) (f) (f) (f) (f) (f) (f) (f	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	Predo income exclud tax tax tax	Predominant income (related, unrelated, excluded from tax under sections 512-514)	(n) Share of total income	(g) Share of end-of- year assets	(h) Disproportionate allocations?	Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(l) General or managing partner?		(k) ' Percentage ownership
(1) STARTUPPHL SEED FUN Investments	Investments	ב		00		735	121845	Kes No	U N	Yes	န န	7000
(2) DREAMIT FUND II 38-3878 Investments 815-A Brazos Street Austin. TX 7	Investments	<b>₹</b>		Related			304,647				×	3 82%
(6)											-	
(4)												
(5)												
(9)												
(1)								<u> </u>				
Part IV Identification of I	Identification of Related Organizations Tax IV, line 34 because it had one or more related	is Taxable elated orga	able as a Corporation or Trust Complete if the organization answorganizations treated as a corporation or trust during the tax year.	oration or eated as a	Trust Com	plete if the	organization	n answer k year.	able as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part organizations treated as a corporation or trust during the tax year.	orm 990,	Part	
(a) Name, address and EIN of related organization	ed organization		Lec (state or	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp. S corp. or trust)	entity Sh.	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership		(t) Section 512(b)(13) controlled entity?
											Yes	ν
(1)												
(2)											,	
(3)												
(4)												
(5)												
(9)												
(7)					<b>i</b>   							
						}			S	Schedule R (Form 990) 2015	Form 9	90) 2015

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

Note	Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule				Yes	ĝ
-	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?	izations listed in Parts II-	-۱۸۶		,	
Ø	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		•	19		$\times$
Ω	Gift, grant, or capital contribution to related organization(s)			1 <sub>b</sub>		$\times$
Ų	Gift, grant, or capital contribution from related organization(s)			10	×	
ס	Loans or loan guarantees to or for related organization(s)			1d		×
٩	Loans or loan guarantees by related organization(s)			- <del>-</del>	×	
•						
-	Dividends from related organization(s)		•	=		×
5	Sale of assets to related organization(s).			19		×
	Purchase of assets from related organization(s)			1h		×
	Exchange of assets with related organization(s)			1i		×
	Lease of facilities, equipment, or other assets to related organization(s)			į		×
د				<del></del>		×
- ۲	Performance of services or membership or fundraising solicitations for related organization(s)		•	=		×
. 8	Deformance of sequence or membership or fundration		•	13		×
2	Sharing of facilities equipment mailing lists or other as			Ę		×
: (				10		×
0	Shallig of paid employees with related of gallization(s)					
Ω	Reimbursement paid to related organization(s) for expenses			1p	×	
٠ .	Dombureament paid by related organization(e) for expenses			10	×	
T	relitionisettiett para by refated organization(s) for expenses	•				
-	Other transfer of cash or property to related organization(s)			1-		×
S	Other transfer of cash or property from related organization(s)			18		$\times$
7	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	ding covered relationship	os and transaction	thresho	spic	
	(a)	(q)	(2)	_	(g	
	Name of related organization	ction 3-s)	ivolved	Method of determining amount involved	determi	guing Pg
Ξ						
(2)						
(3)						
(4)						
(2)						ĺ
9		<del>,</del>				
		į.	Schodule P (Form 990) 2015	P /For	000	2015

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

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

Schedule R (For		PIDC- Local Development Corporation	30-0598934	Page 5
Part VII	Supplem	ental Information		
•	Provide a	dditional information for responses to questions on Schedule R (see in	istructions).	
		•••••••••••••••••••••••••••••••••••••••		
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