DLN: 93493318034589 OMB No 1545-0047 Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public Open to Public Department of the ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Treasury Inspection Internal Revenue Service For the 2019 calendar year, or tax year beginning 01-01-2018 , and ending 12-31-2018 D Employer identification number B Check if applicable FUND FOR PHILADELPHIA □ Address change 23-2174863 % ASHLEY DEL BIANCO ☐ Name change Doing business as THE MAYOR'S FUND FOR PHILA INC ☐ Initial return ☐ Final return/terminated Number and street (or P O box if mail is not delivered to street address) Room/suite CITY HALL NO 708 E Telephone number ☐ Amended return ☐ Application pending (215) 686-0321 City or town, state or province, country, and ZIP or foreign postal code PHILADELPHIA, PA $\,$ 19107 G Gross receipts \$ 16,640,812 Name and address of principal officer H(a) Is this a group return for ASHLEY DEL BIANCO ☐Yes **☑**No subordinates? CITY HALL NO 708 H(b) Are all subordinates PHILADELPHIA, PA ☐ Yes ☐No ıncluded? 4947(a)(1) or If "No," attach a list (see instructions) **H(c)** Group exemption number ▶ Website: ► WWW MAYORSFUNDPHILA ORG L Year of formation 1981 M State of legal domicile PA K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶ Summary 1 Briefly describe the organization's mission or most significant activities SEE ATTACHED SCHEDULE O Activities & Governance 2 Check this box ► ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a) . 10 10 4 4 Number of independent voting members of the governing body (Part VI, line 1b) . Total number of individuals employed in calendar year 2018 (Part V, line 2a) 5 2 **6** Total number of volunteers (estimate if necessary) 6 10 Total unrelated business revenue from Part VIII, column (C), line 12 303,734 **b** Net unrelated business taxable income from Form 990-T, line 34 302,734 **Prior Year Current Year** 8 Contributions and grants (Part VIII, line 1h) . 11,036,114 9,177,548 Ravenua 7,254,781 7,448,631 9 Program service revenue (Part VIII, line 2g) . 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 8,151 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 10,453 6,482 18,301,715 16,640,812 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 898,214 1,979,202 **14** Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 358,237 199,736 Expenses **16a** Professional fundraising fees (Part IX, column (A), line 11e) . . **b** Total fundraising expenses (Part IX, column (D), line 25) ▶0 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 14,109,799 12,869,038 15,366,250 15,047,976 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) Revenue less expenses Subtract line 18 from line 12 . 2,935,465 1,592,836 Net Assets or Fund Balances Beginning of Current Year End of Year 20,810,110 22,115,945 20 Total assets (Part X, line 16) . 21 Total liabilities (Part X, line 26) . 6,384,148 6,112,703 22 Net assets or fund balances Subtract line 21 from line 20 . 14,425,962 16,003,242 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge 2019-11-13 Signature of officer Sign Here ASHLEY DEL BIANCO EXECUTIVE DIRECTOR Type or print name and title Print/Type preparer's name Preparer's signature Check | If 2019-11-13 P00991844 Paid self-employed Firm's name WITHUMSMITHBROWN PC Firm's EIN ▶ Preparer Use Only Firm's address ► TWO LOGAN SQ STE 2001 18THARCH ST Phone no (215) 546-2140 PHILADELPHIA, PA 191032726 ✓ Yes □ No May the IRS discuss this return with the preparer shown above? (see instructions) . For Paperwork Reduction Act Notice, see the separate instructions. Cat No 11282Y Form 990 (2018)

Form	990 (2018)					Page 2
Pa	rt III Staten	nent of Program Ser	vice Accomplisi	hments		
	Check If	f Schedule O contains a re	sponse or note to a	any line in this Part III .		🗹
1		the organization's mission		·		
SEE :	SCHEDULE O					
_	5 1.1					
2	-	ation undertake any signi	, ,	rices during the year whith	ch were not listed on	
	the prior Form	☐ Yes 🗹 No				
	•	be these new services on				
3	Did the organiz	ation cease conducting, o	r make significant o	changes in how it conduc	ts, any program	
4	services? .					. 🗌 Yes 🗹 No
	If "Yes," descri	be these changes on Sche	dule O			
4	Section 501(c)		ations are required	to report the amount of	rgest program services, as m grants and allocations to othe	
4a	(Code	900,099) (Expenses \$	4,942,576	ıncludıng grants of \$	705,680) (Revenue \$	3,565,915)
	See Additional Da	ata				_
4b	(Code	900,099) (Expenses \$	4,265,735	ıncludıng grants of \$	327,450) (Revenue \$	3,855,867)
	See Additional Da	ata				
4c	(Code	900,099) (Expenses \$	1,300,000	ıncludıng grants of \$) (Revenue \$)
	See Additional Da	ata				
4d	Other program	services (Describe in Sch	edule O)			
	(Expenses \$	4,059,563	including grants of	\$ 946,07	2) (Revenue \$	110,369)
4e	Total progran	n service expenses 🕨	14,567,8	74		
						Form 990 (2018)

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Pa	tIV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 2	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		No
5	Is the organization a section $501(c)(4)$, $501(c)(5)$, or $501(c)(6)$ organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I 2	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 2	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🔁	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX or X as applicable	,		
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 2	11b		No
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		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 2	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 2	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year?			

12a

12b

13

14a

14b

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16

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20a

20b

21

Yes

Yes

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Yes

Nο

No

No

No

Nο

Nο

No

Nο

Nο

Nο

If "Yes," complete Schedule D, Parts XI and XII 🛸 .

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b Was the organization included in consolidated, independent audited financial statements for the tax year?

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

foreign organization? If "Yes," complete Schedule F, Parts II and IV

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

14a Did the organization maintain an office, employees, or agents outside of the United States? . . .

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

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

column (A), line 2? If "Yes," complete Schedule I, Parts I and III

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

If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🕏

Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments

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

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

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

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

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

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic

orm	990 (2018)			Page 4
Pa	Checklist of Required Schedules (continued)			
			Yes	No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a		No
Ь	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		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Ves."			

		270		
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		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No

	to defease any tax-exempt bonds?	24c	
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b	No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or		

a	Did the organization act as an on behalf or issuer for bonds outstanding at any time during the year?	24d	
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a	No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b	No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26	No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member	27	No

28a

28b

28c

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35a

35b

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Yes

Yes

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Yes

Nο

A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV

within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . .

is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

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

Statements Regarding Other IRS Filings and Tax Compliance

1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable .

Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable

Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

instructions for applicable filing thresholds, conditions, and exceptions)

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

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Part V

Part V, line 1 . . .

Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note.

c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M .

13a

14a

14b

15

No

No

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13b

13c

a Is the organization licensed to issue qualified health plans in more than one state?

Enter the amount of reserves the organization is required to maintain by the states in

Note. See the instructions for additional information the organization must report on Schedule O

14a Did the organization receive any payments for indoor tanning services during the tax year?

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.

Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess

parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N

Is the organization an educational institution subject to the section 4968 excise tax on net investment income?

Part VI

Par					or a "No	" resp	onse to	lines
	8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions Check if Schedule O contains a response or note to any line in this Part VI						✓	
Se	ction A. Governing Body and Management							
							Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a			10			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O							
L	Enter the number of veting members included in line 1s, shows who are independent						l	

1a	Enter the number of voting members of the governing body at the end of the tax year	1a	10		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O				
b	Enter the number of voting members included in line 1a, above, who are independent	1b	10		
2	Did any officer, director, trustee, or key employee have a family relationship or a busine officer, director, trustee, or key employee?			2	No
3	Did the organization delegate control over management duties customarily performed by of officers, directors or trustees, or key employees to a management company or other			3	No
4	Did the organization make any significant changes to its governing documents since the	prior F	orm 990 was filed? .	4	No
_			, 1		

	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O					
b	Enter the number of voting members included in line 1a, above, who are independent	1 b		10		
2	Did any officer, director, trustee, or key employee have a family relationship or a busines officer, director, trustee, or key employee?				2	No
3	Did the organization delegate control over management duties customarily performed by of officers, directors or trustees, or key employees to a management company or other p			t supervision	3	No
4	Did the organization make any significant changes to its governing documents since the	prior F	orm 990 was	s filed? .	4	No
5	Did the organization become aware during the year of a significant diversion of the organ	nizatio	n's assets?		5	No
6	Did the organization have members or stockholders?				6	No
7a	Did the organization have members, stockholders, or other persons who had the power tembers of the governing body?				7a	No
b	Are any governance decisions of the organization reserved to (or subject to approval by) persons other than the governing body?				7 b	No

2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			ĺ
2	officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? •	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7 b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8 a	Yes	
Ь	Each committee with authority to act on behalf of the governing body?	8 b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	a		No

7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
Ь	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7 b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8 b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule O</i>	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue	e Code	e.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
Ь	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
Ь	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe in Schedule O how this was done</i>	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		No
Ь	Other officers or key employees of the organization	15b		No
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16-	Did the annual transfer in cash in a	l l		

b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
Ь	Each committee with authority to act on behalf of the governing body?	8 b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule O</i>	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenu	e Code	e.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
Ь	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		No
Ь	Other officers or key employees of the organization	15b		No
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt			

٠	Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		No
Ь	Other officers or key employees of the organization	15b		No
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ction C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed▶ PA			
18	Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply			
	☑ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest			

ь	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?			
	-	16b		
_Se	ection C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed▶ PA			
18	Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply			
	☑ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year			
20	State the name, address, and telephone number of the person who possesses the organization's books and records ►ASHLEY DEL BIANCO CITY HALL ROOM 708 PHILADELPHIA, PA 19107 (215) 686-0321			
		Fo	orm 990 (20	018)

year

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII . Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

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

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations • List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the
- organization, more than \$10,000 of reportable compensation from the organization and any related organizations List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

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

(A) Name and Title	(B) Average hours per week (list any hours for related	Position than one is be	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and						
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	MISC)	related organizations
(1) RICHARD LEVINS CHAIR OF BOARD	2 0	Х		x				0	0	0
(2) MARLENE OLSHAN VICE CHAIR	1 0	Х		×				0	0	0
(3) SIDNEY HARGRO TREASURER	2 0	Х		×				0	0	0
(4) ASHLEY DEL BIANCO EXECUTIVE DIRECTOR/SECRETA	10 0	Х		×				0	0	0
(5) TUMAR ALEXANDER BOARD MEMBER	1 0	Х						0	0	0
(6) COUNCILMAN BOBBY HENON BOARD MEMBER	1 0 0 0	Х						0	0	0
(7) GARRETT SNIDER BOARD MEMBER	1 0 0 0	Х						0	0	0
(8) LAURA SOLOMON BOARD MEMBER	1 0 0 0	Х						0	0	0
(9) VAUGHN ROSS BOARD MEMBER	1 0 0 0	Х						0	0	0
(10) ELLEN KAPLAN EX-OFFICIO	1 0	Х						0	0	0
										Form 990 (2018)

1b Sub-Total		>				
c Total from continuation sheets to Pa	art VII , Section	▶∟				

1b Sub-Total				•			
c Total from continuation sheets to Pa	rt VII , Section	Α		▶		<u> </u>	

1b Sub-Total					l	<u> </u>				
c Total from continuation sheets to Pa	rt VII , Section	Α				▶				
d Total (add lines 1b and 1c)						▶		0	0	0
2 Total number of individuals (including	but not limited	to those	e liste	ed al	bove	≘) who	rece	eived more than \$	100,000	

Lb Sub-Total			 	>			
c Total from continuation sheets to Pa	art VII , Section	Α		▶□			
d Total (add lines 1b and 1c)				>	0	0	0

1b Sub-Total						▶					•
c Total from continuation sheets to Pa	rt VII , Section	Α				▶[_
d Total (add lines 1b and 1c)						>		0	0	()
2 Total number of individuals (including			e liste	ed al	bove	∍) who	o recen	ved more than	\$100,000		_

TΩ	Sub-Total .			•	•	•	•		•									<u> </u>	
C	Total from co	ntinuat	ion sl	neets	to	Part	VII, S	ecti	on i	Α.					•				
d	Total (add line	es 1b a	nd 1c) .				<u></u>		<u></u>					•	0	0	0	
2	Total number of reportable										iose	liste	ed a	bove)	wh	o received more than	\$100,000		

			Yes	No
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			N-
		3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the			

4

5

MARATHON CREW

MARATHON CONSULTANT

MARATHON SECURITY

MARATHON SCORING

Nο

Nο

244,850

129,018

123,752

120,444

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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 (C) Compensation

from the organization. Report compensation for the calcular year charing with or within the c	organización o tax year
(A)	(B)
Name and business address	Description of services

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of

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 .

individual .

Section B. Independent Contractors

5

1

CHRIS TATREAU,

1813 97TH ST NW BRADENTON, FL 34209 ALL FITNESS EVENTS LLC,

1029 WELSH AYRES WAY DOWNINGTOWN, PA 19335

OPS SECURITY GROUP COSTA SECURITY S,

compensation from the organization ▶ 4

1500 S CHRISTOPHER BLVD STE 6 PHILADELPHIA, PA 19147 DAVID O SIMMS,

3900 E MEXICO AVE STE 1350 DENVER, CO 80210

Part '		(2018) Statement of	Revenue								Page 9
		Check if Schedul	e O contains	a respo	onse or note to a	((A) revenue	(B Relate exen funct rever	d or npt	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
v	18	a Federated campaigr	ns	1a				10001	iuc		312 314
ants		b Membership dues .		1 b		_					
	,	c Fundraising events		1c		_					
ĦS, FA,	,	d Related organization	ns	1 d		_					
5 <u>E</u>	,	e Government grants (co	ontributions)	1e	808,66	5					
Contributions, Gifts, Grants and Other Similar Amounts	1	 All other contributions, and similar amounts no above 		1f	8,368,88	3_					
Contrib and Oth		g Noncash contribution in lines 1a - 1f \$			<u>,931</u>						
<u>ة د</u>		h Total. Add lines 1a-	1f	•	>		9,177,548				
<u> 1</u>						ss Code	2.46	22.205	2 170	561 203	3,734
۲.		BIKE SHARE MEMBERSH				900099		82,395 55,867	3,178,6		5,734
å	_	PHILADELPHIA MARATHO SPONSORSHI	ON REGISTRAT.	IONS AN	ND .	900099					
Program Service Revenue	С	OTHER				900099	1.	10,369	110,:	509	
3	d			_							
ram	е			_	-						
Togi	f	All other program se	vice revenue		<u> </u>	l 7,448,631					1
<u> </u>		Total. Add lines 2a–2			<u> </u>						
		Investment income (ir similar amounts) .	ncluding divid		nterest, and other	er	8,151		T		8,151
		Income from investme			ond proceeds	•					1
		Royalties				▶	(
			(ı) Rea		(II) Personal						
	6a	Gross rents									
	b	Less rental expenses									
	c	Rental income or (loss)		0		0					
	ď	Net rental income oi	r (loss)			_	C				
	Ī	- Net rental income of	(ı) Securit		(II) Other	·					
	7a	Gross amount from sales of assets other	(1)		(,						
	b	Less cost or other basis and				_					
		sales expenses Gain or (loss) Net gain or (loss)				\exists	C				
		Gross income from fu			•	<u> </u>					
Other Revenue			d on line 1c)	of		0					
Re	b	Less direct expenses		b		0					
er	c	: Net income or (loss)	from fundrais	sing ev	ents 🕨	' 	C				
Oth	9a	Gross income from g See Part IV, line 19		es							
		,		а	1	0					
	b	Less direct expenses		b		0					
		: Net income or (loss)		activit	ies >		(
	10	Gross sales of invent returns and allowanc		a		0					
	Ь	Less cost of goods s	old	b		0					
		Net income or (loss)		ınvent	ory		C				
[Miscellaneous	Revenue		Business Code						
	11	a ADMINISTRATIVE FE	EES		900	099	6,482	2	6,482		
	b)									
	c	:									
		All other recent									
		I All other revenue . Total. Add lines 11a-									
							6,482	2			
	12	Total revenue. See	INSTRUCTIONS	• •	•		16,640,812	2	7,151,379	303,73	8,151 Form 990 (2018)

Form 990 (2018)				Page 10
Part IX Statement of Functional Expenses				
Section $501(c)(3)$ and $501(c)(4)$ organizations must complete all co	_	·		-
Check if Schedule O contains a response or note to any	line in this Part IX .			🔽
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	1,890,210	1,890,210		
Grants and other assistance to domestic individuals. See Part IV, line 22	88,992	88,992		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15 and 16	0			
4 Benefits paid to or for members	0			_
5 Compensation of current officers, directors, trustees, and key employees	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)	0			
7 Other salaries and wages	149,654		149,654	
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	8,583		8,583	
9 Other employee benefits	29,348		29,348	
10 Payroll taxes	12,151		12,151	
11 Fees for services (non-employees)				
a Management	0			
b Legal	132,771		132,771	
c Accounting	72,603		72,603	
d Lobbying	0			
e 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)	5,959,740	5,959,740		
12 Advertising and promotion	737,232	730,872	6,360	
13 Office expenses	74,918	72,978	1,940	
14 Information technology	0			
15 Royalties	0			
16 Occupancy	88,341	88,341		
17 Travel	80,829	80,780	49	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials .	0	·		
19 Conferences, conventions, and meetings	4,185	3,425	760	
20 Interest	24,375		24,375	
21 Payments to affiliates	0			
22 Depreciation, depletion, and amortization	821		821	
23 Insurance	63,346	54,528	8,818	
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a UBI TAXES	63,574	63,574		
b EQUIPMENT	937,681	915,884	21,797	
c CITY SERVICES	633,049	633,049		
d EVENT SUPPORT AND PARTICIPATIO	456,044	456,044		
e All other expenses	3,539,529	3,529,457	10,072	
25 Total functional expenses. Add lines 1 through 24e	15,047,976	14,567,874	480,102	0

Form **990** (2018)

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)

Form	990 ((2018)					Page 11
Pa	art X	Balance Sheet					
		Check if Schedule O contains a response or not	e to any	line in this Part IX		<u> </u>	<u> 🗆 </u>
					(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing			0	1	0
	2	Savings and temporary cash investments .		[18,272,161	2	18,974,866
	3	Pledges and grants receivable, net		. [1,631,900	3	2,163,836
	4	Accounts receivable, net		[384,580	4	149,219
	5	Loans and other receivables from current and for trustees, key employees, and highest compensar Part II of Schedule L	loyees Complete	0	5	0	
its	6 7	Loans and other receivables from other disquality section 4958(f)(1)), persons described in section contributing employers and sponsoring organization voluntary employees' beneficiary organizations. Part II of Schedule L	n 4958(d ations of (see inst	s)(3)(B), and section 501(c)(9) ructions) Complete	0 16,069	6	6,903
ssets	8	Inventories for sale or use			0	8	0
Ä	9	Prepaid expenses and deferred charges	6,105	9	271,338		
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	10,909			
	ь	Less accumulated depreciation	10b	2,354	4,387	10 c	8,555
	11	Investments—publicly traded securities .	0	11	0		
	12	Investments—other securities See Part IV, line	0	12	0		
	13	Investments—program-related See Part IV, line	0	13	0		
	14	Intangible assets	0	14	0		
	15	Other assets See Part IV, line 11		[494,908	15	541,228
	16	Total assets.Add lines 1 through 15 (must equ	20,810,110	16	22,115,945		
	17	Accounts payable and accrued expenses			1,876,830	17	2,382,719
	18	Grants payable			0	18	0
	19	Deferred revenue			1,761,272	19	1,060,677
	20	Tax-exempt bond liabilities			0	20	0
S	21	Escrow or custodial account liability Complete F	Part IV of	Schedule D	0	21	0
Liabilities	22	Loans and other payables to current and former key employees, highest compensated employee	officers, s, and d	directors, trustees, squalified			
ia E		persons Complete Part II of Schedule L			0	22	0
	23	Secured mortgages and notes payable to unrela	ited third	parties	0	23	0
	24	Unsecured notes and loans payable to unrelated	d third pa	arties	500,000	24	500,000
	25	Other liabilities (including federal income tax, pa and other liabilities not included on lines 17 - 24 Complete Part X of Schedule D		o related third parties,	2,246,046	25	2,169,307
	26	Total liabilities. Add lines 17 through 25	1		6,384,148	26	6,112,703
Balances	27	Organizations that follow SFAS 117 (ASC 9 complete lines 27 through 29, and lines 33 Unrestricted net assets			1,605,538	27	1,434,796
Ba	28	Temporarily restricted net assets		[12,820,424	28	14,568,446
Fund	29	Permanently restricted net assets			0	29	0
ᆵ		Organizations that do not follow SFAS 117					

30

31

32

33

34

16,003,242

22,115,945

Form **990** (2018)

14,425,962

20,810,110

30

31

32

33

34

check here ▶ □ and complete lines 30 through 34. Capital stock or trust principal, or current funds

Total net assets or fund balances .

Total liabilities and net assets/fund balances

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? 3a No b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required

3b

Form 990 (2018)

audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Additional Data

Software ID:

Software Version: **EIN:** 23-2174863

Name: FUND FOR PHILADELPHIA

Form 990 (2018)

PHILADELPHIA AND ENABLE COORDINATION WITH NATIONAL EQUITABLE TRANSIT EFFORTS

Form 990, Part III, Line 4a: BIKE SHARE MEMBERSHIPS AND SPONSORSHIPS THE INDEGO BIKE SHARE PROGRAM IS IN ITS THIRD YEAR AS THE BETTER BIKE SHARE PARTNERSHIP. A COLLECTIVE EFFORT AMONG THE CITY OF PHILADELPHIA, LOCAL AND NATIONAL FUNDERS, AND COMMUNITY ORGANIZATIONS WHO MANAGE MAINTAIN AND PROVIDE OUTREACH AND TRAINING SERVICES TO DIVERSE COMMUNITIES THE PARTNERSHIP FOCUSES ON BUILDING AN EQUITABLE AND ACCESSIBLE BIKE SHARE TRANSPORTATION SYSTEM THAT REACHES TRADITIONALLY UNDERSERVED NEIGHBORHOODS MULTI-YEAR GRANTS FROM PRIVATE PHILANTHROPIES SUPPORT THE COLLABORATIVE PROGRAM IN

Form 990, Part III, Line 4b: PHILADELPHIA MARATHON REGISTRATIONS AND SPONSORSHIPS THE PHILADELPHIA MARATHON IS UNIQUE AS A RUNNING EVENT SERIES THAT IS PRODUCED AND OPERATED BY THE CITY OF PHILADELPHIA. THE CITY HOSTS THE INTERNTATIONAL RUNNING COMMUNITY FOR A MARATHON AND ASSOCIATED RACES (AN EXPOSITION AND HALF MARATHON) OVER THE COURSE OF A WEEKEND IN RECENT YEARS, ANNUAL TOTAL PARTICIPATION HAS AVERAGED 31,000 PEOPLE THE PHILADELPHIA

MARATHON CELEBRATES ITS 50 YEAR ANNIVERSARY IN 2018

REBUILD REBUILDING COMMUNITY INFRASTRUCTURE (REBUILD) IS A PROGRAM THAT WILL INVEST AN ANTICIPATED \$500 MILLION TO REVITALIZE PHILADELPHIA'S NEIGHBORHOOD PARKS, RECREATION CENTERS, PLAYGROUNDS AND LIBRARIES REBUILD WILL BE FUNDED THROUGH A COMBINATION OF PUBLIC AND PRIVATE RESOURCES THERE ARE THREE MAHOR GOALS OF THIS INVESTMENT REVITALIZING COMMUNITY SPACES, ENGAGING AND EMPOWERING COMMUNITIES, AND

PROMOTING ECONOMIC OPPORTUNITY. THE MAYOR'S FUND RECEIVED A PRIVATE PHILANTHROPIC GRANT TO MANAGE ON BEHALF OF THE CITY OF PHILADELPHIA IN

Form 990, Part III, Line 4c:

SUPPORT OF PROGRAM START-UP AND ADMINISTRATIVE COSTS

efile	efile GRAPHIC print - DO NOT PROCE			S As Filed Data -	DLN: 9	DLN: 93493318034589		
SCI	HED	ULE A	Dublic	Charity Statu	s and Dul	nlic Sunn	ort	OMB No 1545-0047
	m 99			organization is a sect 4947(a)(1) nonexe Attach to Form	ion 501(c)(3) empt charitable	organization of trust.		2018
•		the Treasury	► Go t	to <u>www.irs.gov/Form</u>	990 for the late	st information	•	Open to Public Inspection
Nam	e of th	nie Service ne organiza HILADELPHIA	tion				Employer identific	cation number
							23-2174863	
	rt I		for Public Charity Sta a private foundation becau				See instructions.	
1			onvention of churches, or	•	•		(Δ)(i)	
2		•	scribed in section 170(b					
3			or a cooperative hospital s		,			
4		·	esearch organization oper	-			•	nter the hospital's
•	Ш	name, city,		ated in conjunction with	a nospital descri	Ded III Section	170(b)(1)(A)(III). L	inter the hospitars
5			ation operated for the bendition (Complete Part II)	efit of a college or unive	rsity owned or op	perated by a gov	ernmental unit descr	bed in section 170
6			tate, or local government	or governmental unit de	escribed in sectio	on 170(b)(1)(A	A)(v).	
7	\checkmark		ation that normally receive $\mathbf{0(b)(1)(A)(vi)}$. (Comple		s support from a	governmental ι	ınıt or from the gener	al public described in
8		A communi	ty trust described in secti	on 170(b)(1)(A)(vi)	(Complete Part I	I)		
9			ural research organization ant college of agriculture					lege or university or a
10		An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III)						
11		An organiza	ation organized and operat	ed exclusively to test fo	r public safety S	ee section 509	(a)(4).	
12		more public	ation organized and operat ly supported organization through 12d that describ	s described in section 5	09(a)(1) or sec	ction 509(a)(2). See section 509 (a	
a		Type I. A s organizatio	supporting organization op n(s) the power to regularly Part IV, Sections A and	erated, supervised, or c y appoint or elect a majo	ontrolled by its s	upported organi	zation(s), typically by	
b		manageme	supporting organization s nt of the supporting organ plete Part IV, Sections A	ization vested in the sar			- · · · ·	_
c			unctionally integrated. Appropriate in the propriet in the pro					ated with, its
d		Type III n	on-functionally integra integrated The organizate You must complete P	ted. A supporting organ tion generally must satis	Ization operated fy a distribution	in connection wi	th its supported orga	1. 4.
e		Check this	box if the organization rec or Type III non-functiona	eived a written determir	nation from the I		pe I, Type II, Type II	I functionally
f	Enter	-	of supported organization					
g	Provi	de the follow	ing information about the	supported organization(s)			
	(i) N	lame of supp organization		(iii) Type of organization (described on lines 1- 10 above (see instructions))	n in your governing document? moi ines see (se		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
					Yes	No		
			,					
Tat-	1							
Tota		work Padua	tion Act Notice, see the	Instructions for	Cat No 11285	I SE	 	90 or 990-EZ) 2018

Ŀ	Support Schedule for	Organizations	Described in S	ections 170(b))(1)(A)(iv), 17	'0(b)(1)(A)(vi)	, and 170
	(b)(1)(A)(ix)	socked the herr	n line E 7 0	. O of Doub T out of	the erganization	n faile -	الحم مينماند	under Dart
	(Complete only if you ch III. If the organization fo						to quality	under Part
_		alls to quality un	ider the tests list	ed below, pleas	e complete Part	111.)		
_	Section A. Public Support Calendar year							
	(or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e)	2018	(f) Total
1	Gifts, grants, contributions, and							
	membership fees received (Do not	7,906,237	8,455,748	5,937,228	11,036,114		9,177,548	42,512,875
_	include any "unusual grant ")						+	
2	Tax revenues levied for the organization's benefit and either paid							
	to or expended on its behalf							0
3	The value of services or facilities							
	furnished by a governmental unit to	109,212	34,126	15,556	15,556		15,556	190,006
4	the organization without charge Total. Add lines 1 through 3	8,015,449	8,489,874	5,952,784	11,051,670		9,193,104	42,702,881
5	The portion of total contributions by	0,013,443	0,403,074	3,332,704	11,031,070		3,133,104	42,702,001
•	each person (other than a							
	governmental unit or publicly							
	supported organization) included on							0
	line 1 that exceeds 2% of the							
	amount shown on line 11, column (f)							
6	Public support. Subtract line 5 from line 4							42,702,881
_	Section B. Total Support	L			L			
	Calendar year	(a)2014	(b) 2015	(c)2016	(d)2017	(0)	2018	(f)Total
	(or fiscal year beginning in) ▶		` '	• •	` '			
7	Amounts from line 4	8,015,449	8,489,874	5,952,784	11,051,670		9,193,104	42,702,881
8	Gross income from interest,							
	dividends, payments received on securities loans, rents, royalties and	41	108	123	367		8,151	8,790
	income from similar sources							
9	Net income from unrelated business							
	activities, whether or not the		35,659	99,562	120,348	302,734		558,303
	business is regularly carried on							
10	Other income Do not include gain or loss from the sale of capital	31,770	22,396	24,618	10,453		643,002	732,239
	assets (Explain in Part VI)	31,770	22,390	24,010	10,455		043,002	752,259
11								44 002 212
	10							44,002,213
	Gross receipts from related activities,					12		30,460,867
13	First five years. If the Form 990 is for	-			•			nization,
	check this box and stop here						<u>▶⊔</u>	
	Section C. Computation of Publi							
14			•	olumn (f))		14		97 047 %
15	Public support percentage for 2017 Sc	hedule A, Part II,	line 14			15		86 050 %
16a	33 1/3% support test—2018. If the	e organization did i	not check the box o	on line 13, and line	e 14 is 33 1/3% or	more, c	:heck this b	_
	and stop here. The organization qual							▶ ✓
Ŀ	33 1/3% support test—2017. If the	ne organization did	not check a box or	n line 13 or 16a, a	nd line 15 is 33 1/	3% or n	nore, check	this
	box and stop here. The organization							▶□
17 a	10%-facts-and-circumstances tes							
	is 10% or more, and if the organization							
	in Part VI how the organization meets	the facts-and-cir	cumstances test	rne organization q	lualines as a public	ly supp	orteu	►□
	organization 10%-facts-and-circumstances te	ct2017 If the e	raanization did aat	check a boy or li-	no 13 165 166 5	r 17	nd line	▶□
b	15 is 10% or more, and if the organi		-				na iiie	
	Explain in Part VI how the organization						ıcly	
	supported organization			-	•	•	•	▶□
18	man in a contract of	on did not check a	box on line 13, 16	sa, 16b, 17a, or 17	7b, check this box	and see	<u>:</u>	
	instructions		,					ightharpoons

Page 2

Р	Support Schedule for						
	(Complete only if you c						ler Part II. If
- C	the organization fails to ection A. Public Support	quality under t	ne tests listed	pelow, please co	omplete Part II.)	
30	Calendar year		43.554.5		413.004-		(0) =
	(or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not include any "unusual grants")						
2	Gross receipts from admissions,						
_	merchandise sold or services						
	performed, or facilities furnished in						
	any activity that is related to the						
_	organization's tax-exempt purpose Gross receipts from activities that are						
3	not an unrelated trade or business						
	under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
_	to or expended on its behalf The value of services or facilities						
5	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and						
_	3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified						
	persons that exceed the greater of						
	\$5,000 or 1% of the amount on line						
	13 for the year						
C	Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
	from line 6)						
36	ection B. Total Support Calendar year			I	1		1
	(or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and						
b	income from similar sources Unrelated business taxable income						
D	(less section 511 taxes) from						
	businesses acquired after June 30,						
	1975						
C	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is						
	regularly carried on						
12							
	loss from the sale of capital assets						
	(Explain in Part VI)						
13	Total support. (Add lines 9, 10c, 11, and 12)						
14	First five years. If the Form 990 is fo	r the organization	ı 's fırst, second, tl	nird, fourth, or fift	:h tax vear as a se	ction 501(c)(3) c	rganization.
	check this box and stop here	,	, ,	, ,	,	(), ()	• □
Se	ection C. Computation of Public	Support Perce	ntage				<u> </u>
15	Public support percentage for 2018 (lin			column (f))		15	
16	Public support percentage from 2017 S					16	
	ection D. Computation of Investi					1 1	
<u> </u>	Investment income percentage for 201			line 13, column (f	·))	17	
18	Investment income percentage from 2	•		,	• •	18	
	331/3% support tests—2018. If the		·	on line 14 and lin	ne 15 is more than		ne 17 is not
							_
	more than 33 1/3%, check this box and s						
b	33 1/3% support tests—2017. If the	-			•		_
	not more than 33 1/3%, check this box	and stop here.	The organization	qualifies as a publ	icly supported org	anization	▶⊔_
20	Private foundation. If the organization	on did not check a	box on line 14, 1	.9a, or 19b, check	this box and see	instructions	▶ □

Schedule A (Form 990 or 990-EZ) 2018 Page 4 Part IV Supporting Organizations (Complete only if you checked a box on line 12 of Part I If you checked 12a of Part I, complete Sections A and B If you checked 12b of

Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V) Section A. All Supporting Organizations

Yes No Are all of the organization's supported organizations listed by name in the organization's governing documents? 1 If "No," describe in Part VI how the supported organizations are designated If designated by class or purpose, describe the designation If historic and continuing relationship, explain 1 Did the organization have any supported organization that does not have an IRS determination of status under section 509

(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2)2 Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below

3а Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the

determination 3b Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use 3с Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you

checked 12a or 12b in Part I, answer (b) and (c) below 4a Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or 4b supervised by or in connection with its supported organizations

Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes 4c Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported

organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by 5a

amendment to the organizing document) Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the

organization's organizing document? Substitutions only. Was the substitution the result of an event beyond the organization's control?

5b 5c Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other

than (1) its supported organizations. (ii) individuals that are part of the charitable class benefited by one or more of its

6

7

8

answer line 10b below

the organization had excess business holdings)

supported organizations, or (III) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI. 6

Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in

section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)

7 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"

complete Part I of Schedule L (Form 990 or 990-EZ)

8 Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"

provide detail in Part VI.

9a Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting

organization had an interest? If "Yes," provide detail in Part VI.

Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

9b which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

9с

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

10a certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

10a

10b

Schedule A (Form 990 or 990-EZ) 2018

>cn	edule A (Form 990 or 990-E2) 2018		F	age 5
Pa	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the			
	governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
C	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI	11 c		
S	ection B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting	2		
	organization	-		
S	ection C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of			
	each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1		
_	<u> </u>			
	ection D. All Type III Supporting Organizations		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		103	-140
		1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s)			
		2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard	3		
S	ection E. Type III Functionally-Integrated Supporting Organizations		l	
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction)	ions)		
	The organization satisfied the Activities Test Complete line 2 below	•		
	b			
	The organization supported a governmental entity Describe in Part VI how you supported a government entity (see	instru	ctions)	
2	Activities Test Answer (a) and (b) below.	į	Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities	2a		
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement			
,		2b		
3	Parent of Supported Organizations Answer (a) and (b) below.	_		
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.	3a		
	b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in Part VI. the role played by the organization in this regard	3h		

Sched	lule A (Form 990 or 990-EZ) 2018			Page 6
Pai	t V Type III Non-Functionally Integrated 509(a)(3) Supporting O	rgani	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying truinstructions. All other Type III non-functionally integrated supporting organizations.			
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1 b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
	Section C - Distributable Amount		_	Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functionally-instructions)	ntegrat	ed Type III supporting or	ganızatıon (see

5 Remaining underdistributions for years prior to 2018, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI

See instructions

6 Remaining underdistributions for 2018 Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI See instructions

7 Excess distributions carryover to 2019. Add lines 31 and 4c

8 Breakdown of line 7 a Excess from 2014.

b Excess from 2015. c Excess from 2016.

d Excess from 2017. e Excess from 2018.

Schedule A (Form 990 or 990-EZ) (2018)

Additional Data

Software ID:

Software Version: **EIN:** 23-2174863

Name: FUND FOR PHILADELPHIA

Page 8

Schedule A (Form 990 or 990-EZ) 2018 Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, Part VI

Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1, Part V, Section B, line 1e, Part V Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional information (See instructions)

Facts And Circumstances Test

SCHEDULE D

(Form 990)

Department of the Treasury

Internal Revenue Service

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.

▶ Go to www.irs.gov/Form990 for the latest information.

DLN: 93493318034589 OMB No 1545-0047

Open to Public Inspection

	me of the organization ID FOR PHILADELPHIA		Employer identification number
	TON HILDDELI HIA		23-2174863
Pa	Organizations Maintaining Donor Advi		r Accounts.
	Complete if the organization answered "Ye		(h)Condo and other possunts
	Total number at and of year	(a) Donor advised funds	(b)Funds and other accounts
	Total number at end of year		
	Aggregate value of contributions to (during year)		
	Aggregate value of grants from (during year)		
ļ	Aggregate value at end of year		
•	Did the organization inform all donors and donor advisor organization's property, subject to the organization's ex		vised funds are the
i	Did the organization inform all grantees, donors, and do charitable purposes and not for the benefit of the donor private benefit?		
Pai	rt II Conservation Easements. Complete if the	ne organization answered "Yes" on Forn	n 990, Part IV, line 7.
	Purpose(s) of conservation easements held by the orga	nızatıon (check all that apply)	
	Preservation of land for public use (e g , recreation	n or education) \Box Preservation of an	historically important land area
	Protection of natural habitat	☐ Preservation of a c	certified historic structure
	☐ Preservation of open space		
<u>.</u>	Complete lines 2a through 2d if the organization held a	qualified conservation contribution in the for	rm of a conservation
	easement on the last day of the tax year		Held at the End of the Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified histori	ıc structure ıncluded ın (a)	2c
d	Number of conservation easements included in (c) acqu structure listed in the National Register	red after 7/25/06, and not on a historic	2d
3	Number of conservation easements modified, transferre tax year ▶	ed, released, extinguished, or terminated by	the organization during the
ı	Number of states where property subject to conservation	on easement is located >	
•	Does the organization have a written policy regarding the and enforcement of the conservation easements it holds		of violations, Yes No
•	Staff and volunteer hours devoted to monitoring, inspec	cting, handling of violations, and enforcing co	onservation easements during the year
,	Amount of expenses incurred in monitoring, inspecting, \$ \\$	handling of violations, and enforcing conser	vation easements during the year
3	Does each conservation easement reported on line 2(d) and section $170(h)(4)(B)(II)^2$) above satisfy the requirements of section 1	70(h)(4)(B)(ı)
)	In Part XIII, describe how the organization reports cons balance sheet, and include, if applicable, the text of the the organization's accounting for conservation easemen	footnote to the organization's financial state	nse statement, and
ar	Organizations Maintaining Collections Complete if the organization answered "Ye	of Art, Historical Treasures, or Oth	er Similar Assets.
.a	If the organization elected, as permitted under SFAS 11 art, historical treasures, or other similar assets held for provide, in Part XIII, the text of the footnote to its finar	L6 (ASC 958), not to report in its revenue sta public exhibition, education, or research in f	
b	If the organization elected, as permitted under SFAS 11 historical treasures, or other similar assets held for pub following amounts 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 art, histori following amounts required to be reported under SFAS		
а	Revenue included on Form 990, Part VIII, line 1	, , , , , , , , , , , , , , , , , , , ,	▶ \$
	Assets included in Form 990, Part X		→ \$
_			· +

Par	31111	Organizations Maintaining	Collections of	of Art,	Histori	ical T	reas	ures, or	Other	Similar As	sets ((continued)
3	Using items	the organization's acquisition, access (check all that apply)	ssion, and othei	r records	, check	any of	the fo	ollowing t	hat are a	sıgnıfıcant u	ise of it	s collection
а		Public exhibition			d		Loar	or excha	ange prog	grams		
b		Scholarly research			e		Othe	er				
С		Preservation for future generations										
4	Provid Part >	de a description of the organization's KIII	collections and	d explain	how the	ey furt	her th	ie organiz	ation's e	xempt purpo	se in	
5		g the year, did the organization solic s to be sold to raise funds rather tha								nılar	□ Y	es 🗌 No
Pai	rt IV	Escrow and Custodial Arran		." on Fo	OOO	\ Dowt	. T\ /			-d		Form 000 Port
		Complete if the organization a X, line 21.	nswered res	on Fo	1111 990	, Part	. IV, I	ine 9, oi	reporte	eu an amou	.nc on	FORM 990, Part
1a		e organization an agent, trustee, cust ded on Form 990, Part X?	todian or other	ınterme	diary for	contri	bution	ns or othe	er assets	not	□ Y	es 🗌 No
b	If "Y∈	es," explain the arrangement in Part	XIII and comple	ete the f	ollowing	table				A	mount	
c		ining balance	•		_				1c			
d	Addıt	ions during the year							1d			
е	Dıstrı	butions during the year							1e			
f	Endın	ig balance							1f			
2a	Did th	ne organization include an amount or	n Form 990, Pa	rt X, lıne	21, for	escrov	v or cı	ustodial a	ccount li	ability?	□ Y	es 🗆 No
Ь		es," explain the arrangement in Part :										
Pa	rt V	Endowment Funds. Complet										
		<u>'</u>	(a)Currer			rior yea				(d)Three yea		(e)Four years back
1 a	Beginn	ing of year balance										
b	Contrib	outions										
С	Net inv	estment earnings, gains, and losses										
d	Grants	or scholarships										
e		expenditures for facilities ograms										
f	Admını	strative expenses										
g	End of	year balance										
2	Provid	de the estimated percentage of the c	urrent year end	d balance	e (line 1	g, colu	mn (a	a)) held a	s			
а	Board	d designated or quasi-endowment 🟲										
b	Perm	anent endowment 🟲										
С	Temp	orarily restricted endowment >										
		percentages on lines 2a, 2b, and 2c s										
3а	orgar	here endowment funds not in the pos nization by nrelated organizations		organıza	tion tha	t are h	eld ar	nd admini	stered fo	r the	Γ -	Yes No
	• •	elated organizations			• •	•						a(ii)
b		es" on 3a(II), are the related organiza		required	on Sche	dule R	۲,	• •				3b
4	Descr	ribe in Part XIII the intended uses of	the organization	n's endo	wment	funds						
Pai	rt VI	Land, Buildings, and Equipr	nent.									
		Complete if the organization a										
	Descri		r other basis stment)	(b) Cos	t or other	basis (other)	(c) Acc	umulated (depreciation		(d) Book value
1a	Land											
b	Buildin	gs										
c	Leaseh	old improvements										
d	Equipn	nent					10,909			2,354		8,55
Tota	ıl. Add	lines 1a through 1e (Column (d) mus	st equal Form 9	990, Part	X, colui	$mn \overline{(B)}$, line	10(c)		>		8,55

Part VII	Investments—Other Securities. Complete if the	organıza	tion ansv	wered "Yes" on Form	990, Part IV, line 11b.
	See Form 990, Part X, line 12. (a) Description of security or category (including name of security)		(b) Book value		thod of valuation -of-year market value
(1) Financia					
(2) Closely- (3)Other	held equity interests	· ·			
(A)					
(B)					
(C)					
(D)					
(E)					
(F)					
(G)					
(H)					
	n (b) must equal Form 990, Part X, col (B) line 12)	Þ			
Part VIII	Investments—Program Related. Complete if the organization answered 'Yes' on For	m 990, i	Part IV, lı	ne 11c. See Form 99	0, Part X, line 13.
	(a) Description of investment	(b) B	ook value	(c) Mei Cost or end	thod of valuation -of-year market value
(1)					,
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
Total. (Colum	n (b) must equal Form 990, Part X, col (B) line 13)	•			
Part IX	Other Assets. Complete if the organization answered 'Y (a) Description	'es' on For	rm 990, Pa	art IV, line 11d See Form	m 990, Part X, line 15 (b) Book value
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
					•
Part X	Other Liabilities. Complete if the organization and See Form 990, Part X, line 25.	swered 'Y	'es' on Fo	orm 990, Part IV, line	11e or 11f.
1. (1) Federal I	(a) Description of liability		(b) B	look value	
DUE TO AGE				0 2,169,307	
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)		+			
(9)					
	n (b) must equal Form 990, Part X, col (B) line 25)	<u> </u>		2,169,307	
2. Liability fo	or uncertain tax positions In Part XIII, provide the text of th	ne footnot		rganization's financial st	_
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 🔽

1

2

а

b

3

4

4

5

Part XIII

a b

Schedule D (Form 990) 2018

Total revenue, gains, and other support per audited financial statements . . .

Amounts included on line 1 but not on Form 990, Part VIII, line 12

Amounts included on Form 990, Part VIII, line 12, but not on line 1

Amounts included on Form 990, Part IX, line 25, but not on line 1:

Investment expenses not included on Form 990, Part VIII, line 7b.

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information

Other (Describe in Part XIII)

Supplemental Information

Add lines 4a and 4b . .

Return Reference

Investment expenses not included on Form 990, Part VIII, line 7b .

Net unrealized gains (losses) on investments .

Other (Describe in Part XIII)

Donated services and use of facilities . .

Recoveries of prior year grants . . .

Other (Describe in Part XIII) . . .

Add lines 2a through 2d . .

Subtract line 2e from line 1 . . .

16,640,812

2e 3

4c

5

Page 4

С	Add lines 4a and 4b	4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	16,640,812
Par	Reconciliation of Expenses per Audited Financial Statements With Expenses per Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.	Retur	n.
1	Total expenses and losses per audited financial statements	1	15,063,532
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
c	Other losses	6	
d	Other (Describe in Part XIII) 2d		
е	Add lines 2a through 2d	2e	15,556
3	Subtract line 2e from line 1	3	15,047,976

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part

Explanation

2a

2b

2с

2d

4a

4b

15,047,976

Schedule D (Fo	orm 990) 2018	Page 5	
Part XIII	Supplemental Info	rmation <i>(continued)</i>	
Return Reference		Explanation	
			Schedule D (Form 990) 2018

DLN: 93493318034589 Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. OMB No 1545-0047 Schedule I **Grants and Other Assistance to Organizations**, (Form 990) Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Open to Public ▶ Attach to Form 990. Department of the Inspection ▶ Go to www.irs.gov/Form990 for the latest information. Treasury Internal Revenue Service Name of the organization Employer identification number FUND FOR PHILADELPHIA 23-2174863 Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and 1 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 (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant (if applicable) organization (book, FMV, appraisal, noncash assistance or assistance grant cash or government assistance other) (1) See Additional Data (4)(5)(6)(7)(8)(9)(10)(11)(12)Enter total number of section 501(c)(3) and government organizations listed in the line 1 table For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50055P Schedule I (Form 990) 2018

Schedule I (Form 990) 2018						Page 2			
Part IIII Grants and Other Ass Part III can be duplicat				anization answered "Yes"	" on Form 990, Part IV, line 22				
(a) Type of grant or assista	ance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance			
See Additional Data Table		· · · · · · · · · · · · · · · · · · ·	·	<u>. </u>					
(1)			1						
(2)									
(3)			1						
(4)			1						
(5)									
(6)			1						
(7)			1						
Part IV Supplemental I	Information	on. Provide the in	formation required in !	Part I, line 2; Part III	I, column (b); and any other a	dditional information.			
Return Reference	Explanation	Explanation							
·	THE NUMBER AND SIZE OF AWARDS GIVEN EACH YEAR WILL VARY DEPENDING ON THE FUNDS RAISED BY THE MARATHON FUNDING REQUESTS ARE ACCEPTED ON A ROLLING BASIS AND DECISIONS ARE MADE AT EACH OF THE BOARD MEETINGS. THE GRANT COMMITTEE REVIEWS THE APPLICATIONS AND MAKES RECOMMENDATIONS TO THE FUND'S BOARD FINAL DECISIONS ARE MADE AT EACH BOARD MEETING. THERE ARE FOUR BOARD MEETINGS A YEAR GRANTEES ARE REQUIRED TO PREPARE AND SUBMIT BOTH A FINANCIAL AND NARRATIVE REPORT FOR ANY GRANTS THE FUND ISSUES THAT ARE RESTRICTED TO A SPECIFIC PROGRAM REPORTS ARE REVIEWED BY THE EXECUTIVE DIRECTOR AS WELL AS THE DEPUTY DIRECTOR								

Schedule I (Form 990) 2018

Additional Data

PHILADELPHIA, PA 19143

ASIAN AMERICANS UNITED

1023 CALLOWHILL STREET

PHILADELPHIA, PA 19123

Software ID: **Software Version:**

22-2981076

EIN: 23-2174863

Name: FUND FOR PHILADELPHIA

rorm 990,5chedule 1, Part 11, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(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		
AFRICAN CULTURAL ALLIANCE	23-3062024	501(C)(3)	15,000				WORK READY PROGRAM		

25,000

DIGITAL LITERACY

ALLIANCE

organization or government		if applicable	grant	assı
AFRICAN CULTURAL ALLIANCE OF NORTH AMERICA 5530 CHESTER AVE	23-3062024	501(C)(3)	15,000	

501(C)(3)

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 52-1693162 501(C)(3) 136.371 BEECH INTERPLEX INC IEMPOWERMENT ZONE 1510 CECI B MOORE AVE GRANT

PHILADELPHIA, PA 19121

BICYCLE COALITION OF 23-2586631 501(C)(3) 114,500

BETTER BIKESHARE PARTNERSHIP PARTNERSHIP Partnership

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

PHILADELPHIA, PA 19102

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 23-2835751 501(C)(3) 6.500 BLACKHAWKS ATHLETIC CLUB PHILLY CHAMPIONS 12112 RANIER ROAD GRANT

PHILADELPHIA, PA 19154

CAREER WARDROBE 23-2900156 501(C)(3) 100,000

1822 SPRING GARDEN STREET SIDE 3

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

PHILADELPHIA, PA 19130

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance CETRA 22 2722702 E01(C)(2) 20.000 IMPRINTED AND

ICOMMUNITY SCHOOLS

174 DIAMOND ST PHILADELPHIA, PA 19122	23-2/32/63	501(C)(3)	20,000		IMMIGRANT ASSET BUILDING PROGRA
CENTER FOR GRIEVING	23-3026275	501(C)(3)	12,500		GRIEF SUPPORT FO

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

CEINTER LOK GKTEATING CHILDREN.

3300 HENRY AVENUE STE 110 PHILADELPHIA, PA 19129

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance CENTER FOR LITERACY 23-7043544 501(C)(3) 18.333 DIGITAL LITERACY

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

1800 JFK BLVD STE 300 PHILADELPHIA, PA 19143

399 MARKET ST PHILADELPHIA, PA 19106		, , ,	·		ALLIANCE
CENTER FOR RETURNING	37-1705920	501(c)(3)	10,000		REENTRY INITIATIVE

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 90-0686577 501(C)(3) 78.100 CENTER FOR SOCIAL BETTER BIKESHARE INCLUSION PARTNERSHIP 150 BROADWAY STE 303

PFD-TV PROJECT

7.500

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

GOVERNMENT

NEW YORK, NY 10038

CITY OF PHILADELPHIA
PHILADELPHIA FIRE
DEPARTMENT
1401 JFK BLVD

PHILADELPHIA, PA 19107

23-6003047

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government other) assistance 23-6003047 43.933 CITY OF PHILADELPHIA GOVERNMENT HIGH HEAT DISPARITY MANAGING DIRECTOR'S PROJECT OFFICE

1401 JFK BLVD- STE 1630 PHILADELPHIA, PA 19102 7,500 CITY OF PHILADELPHIA 23-6003047 GOVERNMENT STRATEGIC BUSINESS MANAGING DIRECTOR'S PLAN SUPPORT OFFICE

1401 JFK BLVD - STE 1630 PHILADELPHIA, PA 19102

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 23-6003047 GOVERNMENT 15.000 CITY OF PHILADELPHIA IMPLEMENTATION AND SUSTAINING - PHILLY MANGING DIRECTOR'S OFFICE

1401 JFK BLVD - STE 1630 PHILADELPHIA, PA 19102						FREE STREETS
CITY OF PHILADELPHIA MANAGING DIRECTOR'S OFFICE 1401 JFK BLVD - STE 1630	23-6003047	GOVERNMENT	78,750		1	GRANT MANAGER SALARY

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

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance 23-6003047 57.719 CITY OF PHILADELPHIA OFFICE GOVERNMENT ENGAGEMENT & OF TRANSPORTATION PROJECT 1401 JFK BLVD - 14TH FLOOR PRIORITIZATION PHILADELPHIA, PA 19106 FRAMEWORK ngagement & Project Prioritization Framework

ngagement & ProPrioritization Fran

CITY OF PHILADELPHIA OFFICE 23-6003047 GOVERNMENT 15,000

OF PUBLIC HEALTH
1101 MARKET STREET STE
1320

NETWORK OF
NEIGHBORS
RESPONDING TO
VIOLENCE

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

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 23-2051143 501(C)(3) 18.333 DIGITAL LITERACY CONGRESO DE LATINOS UNIDOS INC ALLIANCE 216 W SOMERSET STREET PHILADELPHIA PA 19133 KEYSPOT TRAINING

23-1365980 501(C)(3) 19.041 DIVERSIFIED COMMUNITY

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

SERVICES

1529 S 22ND STREET PHILADELPHIA, PA 19146

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance FUNDS FOR THE SCHOOL 20-0153451 501(C)(3) 40.700 IDIGITAL LITERACY ALLIANCE

DISTRICT OF PHILADELPHIA 30 S 17TH STREET PHILADELPHIA. PA 19103 FUNDS FOR THE SCHOOL 20-0153451 501(C)(3) 15.000

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

PHILADELPHIA, PA 19103

PUBLIC SCHOOLS DISTRICT OF PHILADELPHIA SCIENCE LENDING 30 S 17TH STREET LIBRARY

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 31-1672565 501(C)(3) 10.000 GENERATIONS ON LINE DIGITAL LITERACY 3637 CHESTNUT ST ALLIANCE

PHILADELPHIA, PA 19104 IMPACT SERVICES 23-2087348 501(C)(3) 9.500

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

PHILADELPHIA, PA 19134

HEALTHY PEOPLE AND CORPORATION IPLACES INITIATIVE 1952 E ALLEGHENY AVE

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 90-0502551 501(C)(3) 10.000 BUSINESS LANCASTER AVENUE 21ST CENTURY BUSINESS DEVELOPMENT

ASSOCIATION 3500 LANCASTER AVENUE PHILADELPHIA, PA 19104					TRAINING
LUTHERAN SETTLEMENT	23-1352365	501(C)(3)	10,000		DIGITAL LI

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

PHILADELPHIA, PA 19125

LITERACY HOUSE ALLIANCE 1340 FRANKFORD AVE

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance MATERIALS CONSERVATION 20-3598744 24 775 BUSINESS EXPANSION

BREASTFEEDING AND

DOULA PROGRAM

COLLABORATIVE 1714 N MASCHER STREET PHILADELPHIA, PA 19122			,,,,,		
MATERNITY CARE COALITION	23-2200410	501(C)(3)	10,000		COMMUNITY

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

2000 HAMILTON ST STE 205

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applicable grant cash non-cash assistance or assistance other) or government assistance MODER PATSHALA 61-1595884 501(C)(3) 10.000 DIGITAL LITERACY

4416 MARKET STREET PHILADELPHIA, PA 19104		, ,, ,	,		ALLIANCE
NATIONAL ASSOCIATION OF CITY TRANSPORTATION	20-1874085	501(C)(3)	210,200		BETTER BIKESHARE PARTNERSHIP

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

120 PARK AVE 20TH FLOOR NEW YORK, NY 10017

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance 23-2136595 501(C)(3) 6.000 PHILLY CHAMPIONS NORTHWEST RAIDERS

ATHLETIC ASSOCIATION GRANT 1100 F CHELTEN AVENUE PHILADELPHIA PA 19138

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

100 W DUNCANNON AVE PHILADELPHIA, PA 19120

OLNEY CHARTER HIGH 45-2040612 501(C)(3) 10.000 DRUM CORPS ACADEMY SCHOOL COHORT

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 38-3663310 501(C)(3) 10.000 OPERATION WARM INC WARM WELCOME TO LIBRARY

6 DICKINSON DRIVE STE 314 CHADDS FORD, PA 19317 OXFORD CIRCLE ATHLETIC 23-2884166 501(C)(3) 6.000 IPHILLY CHAMPIONS ASSOCIATION GRANT

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

1104 STRAHLE STREET

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 23-2017882 501(C)(3) 18.333 PEOPLE'S EMERGENCY CENTER DIGITAL LITERACY 325 N 39TH STREET ALLIANCE

| ALLIANCE | PHILADELPHIA, PA 19104 | PEOPLEFORBIKES | 20-4306888 | 501(C)(3) | 209,180 | BETTER BIKESHARE | PONDATION | PO BOX 2359 4TH FLOOR

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

BOULDER, CO 80306

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance DUIT A DEL DUITA ETCLIT 22 2625024 E01(C)(2) 20 222 DICITAL LITERACY

FANCY BRIGADE FINALE

PHILADELPHIA FIGHT	23-2023934	301(C)(3)] 30,333		DIGITAL LITERACT
1233 LOCUST STREET 3RD					ALLIANCE
FLOOR					1
PHILADELPHIA, PA 19107					

23-2057395 501(C)(3) 10.000 MUMMERSFEST AND PHILADELPHIA MUMMERS

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

BRIGADE ASSOCIATION

PHILADELPHIA, PA 19148

PO BOX 37541

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 23-2876470 501(C)(3) 15.000 PHILADELPHIA MURAL ARTS IEMPOWERMENT ZONE ADVOCATES GRANT

1727-29 MOUNT VERNON ST
PHILADELPHIA, PA 19130

PHILADELPHIA PARKS 23-2250610 501(C)(3) 25,000

DIGITAL MEDIA TRAINING

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

5070 PARKSIDE AVE 3500A PHILADELPHIA, PA 19131

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 23-2474075 501(C)(3) 15.000 FREE LIBRARY PHILADEL PHIA YOUNG PLAYWRIGHTS RESIDENCY PROGRAM

COMMUNITY

ENGAGEMENT AND

CAPACITY BUILDING

29.610

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

GOVERNMENT

1219 VINE STREET FLOOR 3
PHILADELPHIA, PA 19107
SCHOOL DISTRICT OF 23-6004102

PHILADELPHIA

440 N BROAD STREET

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance 22-2541120 501(C)(3) 10.000 DIGITAL LITERACY SOUTHEAST ASIAN MUTUAL ASSISTANCE ASSOCIATIONS ALLIANCE 1711 SOUTH BROAD STREET

1711 SOUTH BROAD STREET
PHILADELPHIA, PA 19148

SUPPORTIVE OLDER WOMEN'S
NETWORK
4100 MAIN STREET SUITE 403

DIGITAL LITERACY
ALLIANCE

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

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

PHILADELPHIA GOES TO

COLLEGE ACADEMY

TEAM UP PHILLY	20-3977499	501(C)(3)	10,000		OPERATING SUPPORT
111 FOREST AVE 3RD FLOOR					
PHILADELPHIA, PA 19072					

8.000

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

501(C)(3)

27-2246880

TEENSHARP

1200 N FRENCH STREET

WILMINGTON, DE 19801

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance IRISING AWARENESS

23-1365971 501(C)(3) 7.500 TEMPLE UNIVERSITY 1801 N BROAD STREET PHILADELPHIA, PA 19122

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

427 S 61ST STREET PHILADELPHIA, PA 19143

IABOUT SEXUAL ABUSE AND CONSENT TURNING THE TIDE 23-3090635 501(C)(3) 23.442 KEYSPOT TRAINING

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance E04/63/33 7 500 CTURING

4500 WORTH STREET PHILADELPHIA, PA 19124	27-2461497	501(C)(3)	7,500		I	PROGRAM
WE RYAN CO INC 2325 NORTH AMERICAN	23-1583525		25,000			BUSINESS EXPANSION

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

STREET

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 47-5617041 501(C)(3) 175.000 **IEMPOWERMENT ZONE** CAMPAIGN FOR WORKING

IGRANT

VILLAGE ARTS O LILIMANITTIES	22 2045210	E01(C)(2)	22.472		EMPONIERMENT 70
FAMILIES 1415 N BROAD STREET SUITE 221A PHILADELPHIA, PA 19122					GRANT

IEMPOWERMENT ZONE VILLAGE ARTS & HUMANITIES 22-3045318 501(C)(3) 33,4731

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

2544 GERMANTOWN AVE

recipients cash grant non-cash assistance FMV, appraisal, other)

EMPOWERMENT ZONE GRANTS

1 7,879

(d)Amount of

(e)Method of valuation (book,

(f)Description of non-cash assistance

	_	.,		
EMPOWERMENT ZONE SCHOLARSHIPS	3	4,535		
JOAN MARKMAN AWARD	1	1,000		

1,600 2,200

(c)Amount of

Form 990, Schedule I, Part III, Grants and Other Assistance to Domestic Individuals.

(b)Number of

(a)Type of grant or assistance

ASIAN AMERICAN HERITAGE ARTISTS

MAYOR'S COMMISSION ON LITERACY

(a)Type of grant or assistance (b)Number of (c)Amount of (d)Amount of (e)Method of valuation (book, (f)Description of non-cash assistance recipients cash grant non-cash assistance FMV, appraisal, other) 20 62 700 MADATHON DDIZEC

MAKATHON PRIZES	39	62,700		
ART IN CITY HALL AWARDS	33	6,545		
US 2020 AWARD	1	533		

F0/

OOD POLICY PRIZES	2	500		
HIMMED TODG FINANCIAL EDUCATION	2	1 500		

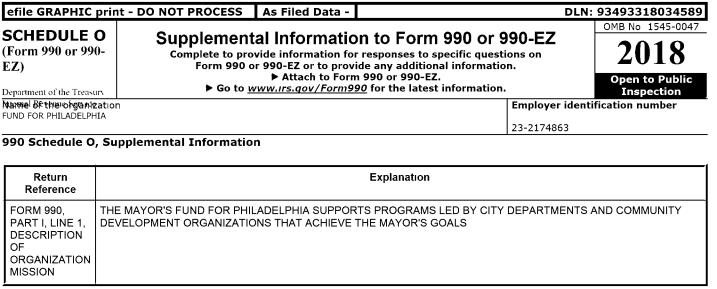
Form 990, Schedule I, Part III, Grants and Other Assistance to Domestic Individuals.

COURSE

FOOD POLICY PRIZES	2	500		
SUMMER JOBS FINANCIAL EDUCATION	3	1,500		

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493318034589 SCHEDULE M OMB No 1545-0047 **Noncash Contributions** (Form 990) ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ▶ Attach to Form 990. ▶Go to www.irs.gov/Form990 for the latest information. Open to Public Department of the Treasury Internal Revenue Service Inspection Name of the organization Employer identification number FUND FOR PHILADELPHIA 23-2174863 Part I Types of Property (b) (a) (c) (d) Check if Number of contributions or Noncash contribution Method of determining applicable items contributed amounts reported on noncash contribution amounts Form 990, Part VIII, line 1g 1 Art-Works of art . . Art—Historical treasures 3 Art—Fractional interests 4 Books and publications Clothing and household goods Cars and other vehicles **7** Boats and planes . . 8 Intellectual property . . . Securities-Publicly traded . 10 Securities—Closely held stock . 11 Securities—Partnership, LLC, or trust interests 12 Securities—Miscellaneous . . 13 Qualified conservation contribution—Historic structures Qualified conservation contribution—Other . Real estate—Residential . Real estate—Commercial . Real estate—Other . . 18 Collectibles 19 Food inventory . . . 20 Drugs and medical supplies . 21 Taxidermy 22 Historical artifacts . 23 Scientific specimens . . 24 Archeological artifacts . . 25 Other ▶ (_____ Other ▶ (______) 26 27 Other ▶ (______) Number of Forms 8283 received by the organization during the tax year for contributions 29 for which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt 30a Nο b If "Yes," describe the arrangement in Part II Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 31 Nο 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a No b If "Yes," describe in Part II If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, Schedule M (Form 990) (2018) For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 51227J

Schedule M (Form 990) (2018) Page 2				
Part II Supplemental Info				
Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.				
Return Reference	Explanation			
	Schedule M (Form 990) (2018)			



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

Return Explanation
Reference
FORM 990, SEE FORM 990, PART III, LINE 4C & 4D

PART III, LINE 4C & 4D

LINE 2, NEW

PROGRAM

SERVICES

Return Reference	Explanation
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES	OST LITERACY EXPENSES \$644,688 INCLUDING GRANTS OF \$0 REVENUE \$0 MAYOR'S COMMISSION ON LITERACY EXPENSES \$331,134 INCLUDING GRANTS OF \$122,122 REVENUE \$0 NORTH CENTRAL EMPOWE RMENT ZONE EXPENSES \$273,094 INCLUDING GRANTS OF \$273,094 REVENUE \$0 ITALIAN FESTIVITIE \$ EXPENSES \$257.850 INCLUDING GRANTS OF \$0 REVENUE \$0 PRE-K EXPENSES \$202,832 INCLUDIN G GRANTS OF \$0 REVENUE \$0 OST QUALITY GRANT EXPENSES \$192,150 INCLUDING GRANTS OF \$0 REVENUE \$0 COMCAST DIGITAL ALLIANCE EXPENSES \$190,731 INCLUDING GRANTS OF \$185,700 REVEN UE \$0 PHL PARTICAPATORY DESIGN LAB EXPENSES \$169,677 INCLUDING GRANTS OF \$0 REVENUE \$0 CIVIC ENGAGEMENT VOLUNTEERS EXPENSES \$164,860 INCLUDING GRANTS OF \$0 REVENUE \$0 PHILAD ELPHIA A MODEL EMPLOYER EXPENSES \$164,860 INCLUDING GRANTS OF \$0 REVENUE \$0 PHILAD ELPHIA A MODEL EMPLOYER EXPENSES \$164,087 INCLUDING GRANTS OF \$0 REVENUE \$0 PHILAD ELPHIA A MODEL EMPLOYER EXPENSES \$164,087 INCLUDING GRANTS OF \$0 REVENUE \$0 ON AMERICAN STREET EMPOWERMENT ZO NE EXPENSES \$110,4960 INCLUDING GRANTS OF \$0 REVENUE \$0 HISTORIC PRESERVATION EXPENSES \$85,016 INCLUDING GRANTS OF \$0 REVENUE \$0 HISTORIC PRESERVATION EXPENSES \$85,016 INCLUDING GRANTS OF \$0 REVENUE \$0 PHILLY FREE STREETS EXPENSES \$383,604 INCLUDING GRANTS OF \$23,000 REVENUE \$0 COLLEGE AND CAREER READINESS EXPENSES \$78,721 INCLU DING GRANTS OF \$0 REVENUE \$0 OPERATIONS BROTHERLY LOVE CARNIVAL EXPENSES \$74,110 INCLUDING GRANTS OF \$0 REVENUE \$0 MAYOR'S BOX EXPENSES \$69,444 INCLUDING GRANTS OF \$0 REVENUE \$10,000 HOLIDAY PARTY EXPENSES \$58,290 INCLUDING GRANTS OF \$0 REVENUE \$0 TRANSP ORTATION ACTION PLAN EXPENSES \$57,171 INCLUDING GRANTS OF \$0 REVENUE \$0 MEST PHILA DELPHIA EMPOWERMENT ZONE EXPENSES \$58,799 INCLUDING GRANTS OF \$0 REVENUE \$0 TRANSP ORTATION ACTION PLAN EXPENSES \$57,719 INCLUDING GRANTS OF \$0 REVENUE \$0 GREENWORKS EQUITY PROGRAM EXPENSES \$31,646 INCLUDING GRANTS OF \$0 REVENUE \$0 GREENWORKS EQUITY PROGRAM EXPENSES \$31,650 INCLUDING GRANTS OF \$0 REVENUE \$0 OMBINITY SCHOOLS EXPENSES \$32,292 INCLUDING GRANTS OF \$0 REVENUE \$0 ONLUDING GRANTS OF \$0 REVE

Return Reference	Explanation
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES	ION EXPENSES \$13,810 INCLUDING GRANTS OF \$0 REVENUE \$0 CAREER EXPLORATION FOR YOUTH EXP ENSES \$12,813 INCLUDING GRANTS OF \$0 REVENUE \$0 CEO - MEALS AND MORE EXPENSES \$11,362 INCLUDING GRANTS OF \$11,250 REVENUE \$0 REGIONAL HEALTH NEEDS ASSESSMENT EXPENSES \$11,210 INCLUDING GRANTS OF \$0 REVENUE \$0 DOUGHBOY STATUE EXPENSES \$10,267 INCLUDING GRANTS OF \$0 REVENUE \$0 JPAL EXPENSES \$8,979 INCLUDING GRANTS OF \$0 REVENUE \$0 LGBT EXPENSES \$8,973 INCLUDING GRANTS OF \$0 REVENUE \$0 ACCE CIVIC PRACTICE EXPENSES \$7,644 INCLUDI ING GRANTS OF \$0 REVENUE \$0 ART IN CITY HALL EXPENSES \$7,500 INCLUDING GRANTS OF \$6,545 REVENUE \$0 EARLY CHILDHOOD EXPENSES \$5,724 INCLUDING GRANTS OF \$0 REVENUE \$0 DIGITAL SKILLS - BICYCLE THRILLS EXPENSES \$5,5692 INCLUDING GRANTS OF \$6,545 REVENUE \$0 PIRATE S IGNAGE EXPENSES \$5,252 INCLUDING GRANTS OF \$5,645 REVENUE \$0 PIRATE S IGNAGE EXPENSES \$5,252 INCLUDING GRANTS OF \$0 REVENUE \$0 CEO - PARENTAL ENGAGEMENT EXPENSES \$5,382 INCLUDING GRANTS OF \$0 REVENUE \$0 PHILLY RISING EXPENSES \$5,325 INCLUDING GRANTS OF \$0 REVENUE \$0 EMPOWERMENT ZONE CATERING AND PROFESSIONAL SERVICES EXPENSES \$4,928 INCLUDING GRANTS OF \$0 REVENUE \$0 EMPOWERMENT ZONE CATERING AND PROFESSIONAL SERVICES EXPENSES \$4,920 INCLUDING GRANTS OF \$0 REVENUE \$0 PHILLY PLAY EXPENSES \$4,613 INCLUDING GRANTS OF \$0 REVENUE \$0 KIVA EXPENSES \$4,613 INCLUDING GRANTS OF \$0 REVENUE \$0 KIVA EXPENSES \$4,613 INCLUDING GRANTS OF \$0 REVENUE \$0 COMMUNITY ENGAGEMENT PROGRAM EXPENSES \$3,265 INCLUDING GRANTS OF \$0 REVENUE \$0 COMMUNITY ENGAGEMENT PROGRAM EXPENSES \$3,265 INCLUDING GRANTS OF \$0 REVENUE \$0 COMMUNITY ENGAGEMENT PROGRAM EXPENSES \$3,365 INCLUDING GRANTS OF \$0 REVENUE \$0 COMMUNITY ENGAGEMENT PROGRAM EXPENSES \$3,365 INCLUDING GRANTS OF \$0 REVENUE \$0 NEIGHBORS HELPING NEIGHBORS EXPENSES \$1,690 INCLUDING GRANTS OF \$0 REVENUE \$0 NEIGHBORS HELPING NEIGHBORS EXPENSES \$1,690 INCLUDING GRANTS OF \$0 REVENUE \$0 NEIGHBORS HELPING NEIGHBORS EXPENSES \$1,690 INCLUDING GRANTS OF \$0 REVENUE \$0 OFFICE OF SUSTAINABILITY EXPENSES \$1,100 INCLUDING GRANTS OF \$0 REVENUE \$

Return Explanation

FORM 990,	F \$0 REVENUE \$0 WALLACE SUSTAINABILITY EXPENSES \$45 INCLUDING GRANTS OF \$0 REVENUE \$0
PART III,	
LINE 4D,	
OTHER	
PROGRAM	
SERVICES	

990 Schedule O, Supplemental Information

Return

LINE 11B

Reference	
FORM 990,	THE ORGANIZATION PROVIDES A COPY OF THE FORM 990 TO EACH VOTING BOARD MEMBER BEFORE IT HAS BEEN

Explanation

PART VI, FILED THE EXECUTIVE DIRECTOR OF THE ORGANIZATION REVIEWS THE FORM 990 AND ATTACHMENTS PRIOR TO SECTION B. SUBMITTING IT TO ALL VOTING BOARD MEMBERS THE BOARD CHAIRPERSON AND BOARD TREASURER REVIEW AND

SIGN THE FORM AND THE DOCUMENT IS THEN DISCUSSED AT THE NEXT REGULAR BOARD MEETING.

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

Return Explanation

FORM 990, PART VI, SECTION C, LINE 18

990 Schedule O, Supplemental Information

Return Explanation

Pafaranca

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

Return Reference	Explanation
FORM 990, PART IX, LINE 11G, OTHER FEES	ANTI-GRAFFITI NETWORK CONSULTANTS PROGRAM SERVICE EXPENSES 363 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 363 ART IN CITY HALL NAP CONSULTANTS PROGRA M SERVICE EXPENSES 955 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 0 TOTAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 0 TOTAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 0 FUNDRAISING EXPENSES 0 FUNDRAISING EXPENSES 0 FUNDRAISIN

990	Schedule	0,	Supplementa	l Information

Return Reference	Explanation
FORM 990, PART IX, LINE 11G, OTHER FEES	XPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 25.128 ENDING STREET HOMELESS CONSULTANTS PROGRAM SERVICE EXPENSES 964 MANAGEMENT AND GENERAL EXPENSES 0 TUNDRAISING EXPENSES 0 TOTAL EXPENSES 964 DHS CONSULTANTS PROGRAM SERVICE EXPENSES 4.700 MANAGEMENT AND GENERAL EXP ENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 4.700 FOOD POLICY ADVISORY COUNCIL CONSULTANTS PROGRAM SERVICE EXPENSES 18.824 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 18.824 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 18.824 FOSTER GRANDPARENTS CONSULTANTS PROGRAM SERVICE EXPENSES 3.115 M ANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 200 GREENWORKS EQUITY PROGRAM CONSULTANTS PROGRAM SERVICE EXPENSES 1,715 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 FUNDRAISIN

990	Schedule	ο,	Supplemental	Information

OTHER FEES CONTINUED EXPENSES 7,500 OACCE MARKETING & RESEARCH CONSULTANTS PROGRAM SERVICE EXPENSES 34 7 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 347 OFFICE OF SU STAINABILITY CONSULTANTS PROGRAM SERVICE EXPENSES 2,567 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 2,567 OFFICE OF IMMIGRANT AFFAIRS CONSULTANTS PROGRAM SERVICE EXPENSES 33 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXP ENSES 3: OPERATION BROTHERLY LOVE CARNIVAL CONSULTANTS PROGRAM SERVICE EXPENSES 74,110 MA NAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 609,227 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 609,227 OST - OUT OF SCHOOL TIME CONSULTANTS PROGRAM SERVICE EXPENSE 180 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 180 OST QUALITY GRANT CONSULTANTS PROGRAM SERVICE EXPENSES 192,150 MANAGEMENT AND GE NERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 192,150 PARKWAY ACTIVATION PILOT PR OJECT CONSULTANTS	Return Reference	Explanation
EXPENSES 300 PHILADELPHIA 2035 WPF98-10 CONSULTANTS PROGRAM SERVICE EXPENSES 6,772 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 6,772 PHILADELPHIA 2035 DISTRICT PLAN & ZONE REV CONSULTANTS PROGRAM SERVICE EXPENSES 208 MA NAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 10 TOTAL EXPENSES 208 PHILADELPHIA A M ODEL EMPLOYER CONSULTANTS PROGRAM SERVICE EXPENSES 123,147 MANAGEMENT AND GENERAL EXPENSE S 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 123,147 PHILADELPHIA INVESTOR CONF CONSULTANTS PROGRAM SERVICE EXPENSES 22,650 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 0 FUNDRAISING EXPENSES 0 FUNDRAISING EXPENSES 0 FUNDRAISING EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 25,371 PHILLY PLAY CON SULTANTS PROGRAM SERVICE EXPENSES 1,819 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 1,819 PHILLY RISING CONSULTANTS PROGRAM SERVICE EXPENSES 5,700 MAN AGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 FUNDRAISING EXPENSES 15,400 MANAGEMENT	PART IX, LINE 11G, OTHER FEES	ERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 2,500 OACCE CIVIL PRACTICE CONSULTAN TS PROGRAM SERVICE EXPENSES 7,500 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 7,500 OACCE MARKETING & RESEARCH CONSULTANTS PROGRAM SERVICE EXPENSES 34 7 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 34 7 OFFICE OF SU STAINABILITY CONSULTANTS PROGRAM SERVICE EXPENSES 0 TOTAL EXPENSES 347 OFFICE OF SU STAINABILITY CONSULTANTS PROGRAM SERVICE EXPENSES 2,567 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 5 TOTAL EXPENSES 2,567 OFFICE OF IMMIGRANT AFFAIRS CONSULTANTS PROGRAM SERVICE EXPENSES 33 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 33 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 33 OPERATION BROTHERLY LOVE CARNIVAL CONSULTANTS PROGRAM SERVICE EXPENSES 74,110 MA NAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 74,110 OST - LITERAC Y PROGRAM CONSULTANTS PROGRAM SERVICE EXPENSES 0 FUNDRAISING EXPENSES 74,110 OST - LITERAC Y PROGRAM CONSULTANTS PROGRAM SERVICE EXPENSES 609,227 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 0 FUNDRAISING EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 0 FUNDRAISING EXPENSES 0 FUNDRAI

Return

Reference

FORM 990,	RAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 1,300,000 ASSESSMENT CONSULTANTS PRO GRAM
PART IX,	SERVICE EXPENSES 11,210 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTA L
LINE 11G,	EXPENSES 11,210 SAFE INJECTION PROGRAM CONSULTANTS PROGRAM SERVICE EXPENSES 36,301 MANA GEMENT 📗
OTHER	AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 36,301 STRATEGIC PLAN - PARKS & REC
FEES	CONSULTANTS PROGRAM SERVICE EXPENSES 64 MANAGEMENT AND GENERAL EXPENSES 0 F UNDRAISING
CONTINUED	EXPENSES 0 TOTAL EXPENSES 64 TALENT FUND CONSULTANTS PROGRAM SERVICE EXPENSES 108,867
	MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 108,867 US 2020
	CONSULTANTS PROGRAM SERVICE EXPENSES 20,218 MANAGEMENT AND GENERAL EXPENSES 0 FUNDR AISING
	EXPENSES 0 TOTAL EXPENSES 20,218 WALLACE SUSTAINABILITY CONSULTANTS PROGRAM SERVIC E EXPENSES 46
	MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 46 W OMEN'S COMMISSION
	CONSULTANTS PROGRAM SERVICE EXPENSES 7.707 MANAGEMENT AND GENERAL EXPEN SES 0 FUNDRAISING

EXPENSES 0 TOTAL EXPENSES 7,707 TOTAL OTHER FEES ON FORM 990, PART IX, L INE 11G, COL A \$5,959,740

Explanation

Return Explanation
Reference

FORM 990
PART IX
LINE 11G

DESCRIPTION CONSULTANTS TOTAL FEES 5959740

Return Explanation
Reference

FORM 990 DESCRIPTION TRAINING AND PROFESSIONAL DEVE TOTAL EXPENSES 8635 PROGRAM SERVICES 8635

PART IX

LINE 24
OTHER

EXPENSES

Return Explanation
Reference

	DESCRIPTION DUES AND FEES TOTAL EXPENSES 26647 PROGRAM SERVICES 25328 MANAGEMENT AND
PART IX	GENERAL 1319
LINE 24 -	
OTHER	
EXPENSES	

990 Schedule O, Supplemental Information

Return Explanation

Pafaranca

Reference	
FORM 990	DESCRIPTION BANK AND MERCHANT CHARGES TOTAL EXPENSES 11300 PROGRAM SERVICES 2547 MANAGEMENT
PART IX	AND GENERAL 8753
LINE 24 -	
OTHER	
EXPENSES	

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Return Explanation

Reference

FORM 990	DESCRIPTION BIKE SHARE OPERATIONS TOTAL EXPENSES 3492947 PROGRAM SERVICES 3492947 FUNDRAISING
PART IX	
LINE 24 -	
OTHER	
EXPENSES	