Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

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

OMB No. 1545-0047

2019

Open to Public Inspection

A For the 2019 calendar year, or tax year beginning 01-01-2019 , and ending 12-31-2019

B Check if applicable:
☐ Address change
☐ Name change
☐ Initial return
☐ Final return/terminated
☐ Amended return
☐ Application pending

C Name of organization
ALLEGHENY CONFERENCE ON COMMUNITY DEVELOPMENT

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) Room/suite
11 STANWIX STREET 17TH FLOOR

City or town, state or province, country, and ZIP or foreign postal code
PITTSBURGH, PA 15222

D Employer identification number
25-0965213

E Telephone number
(412) 281-4783

G Gross receipts $ 10,110,482

F Name and address of principal officer:
STEFANI PASHMAN
11 STANWIX STREET 17TH FLOOR
PITTSBURGH, PA 15222

H(a) Is this a group return for subordinates? ☐ Yes ☑ No
H(b) Are all subordinates included? ☐ Yes ☐ No
If "No," attach a list. (see instructions)
H(c) Group exemption number ▶

I Tax-exempt status: ☑ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ WWW.ALLEGHENYCONFERENCE.ORG

K Form of organization: ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation: 1944 **M** State of legal domicile: PA

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities:
TO STIMULATE ECONOMIC GROWTH AND IMPROVE THE QUALITY OF LIFE THROUGHOUT SOUTHWESTERN PENNSYLVANIA.

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)	3	56
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	55
5	Total number of individuals employed in calendar year 2019 (Part V, line 2a)	5	48
6	Total number of volunteers (estimate if necessary)	6	153
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	30,000
b	Net unrelated business taxable income from Form 990-T, line 39	7b	-67,781

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	7,478,016	7,180,106
	9	Program service revenue (Part VIII, line 2g)	2,496,083	2,859,471
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	34,702	60,905
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	10,000	10,000
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	10,018,801	10,110,482
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	6,174,827	4,412,914
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	5,677,540	5,469,008
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶93,229		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	-1,909,019	-233,925
	18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	9,943,348	9,647,997
	19	Revenue less expenses. Subtract line 18 from line 12	75,453	462,485

			Beginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	14,064,688	14,296,676
	21	Total liabilities (Part X, line 26)	1,730,401	1,499,904
	22	Net assets or fund balances. Subtract line 21 from line 20	12,334,287	12,796,772

Part II Signature Block

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

Sign Here

****** 2020-11-05
Signature of officer Date

JANEL SKELLEY CHIEF FINANCIAL OFFICER
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN P00341397
Firm's name ▶ SCHNEIDER DOWNS & CO INC			Firm's EIN ▶ 25-1408703	
Firm's address ▶ ONE PPG PLACE SUITE 1700 PITTSBURGH, PA 15222			Phone no. (412) 261-3644	

May the IRS discuss this return with the preparer shown above? (see instructions) ☑ Yes ☐ No

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

THE ALLEGHENY CONFERENCE ON COMMUNITY DEVELOPMENT (ACCD) AND AFFILIATES - THE GREATER PITTSBURGH CHAMBER OF COMMERCE (CHAMBER), THE PENNSYLVANIA ECONOMY LEAGUE OF GREATER PITTSBURGH(PELGP) AND THE PITTSBURGH REGIONAL ALLIANCE (PRA) - WORK IN COLLABORATION WITH PUBLIC AND PRIVATE SECTOR PARTNERS TO STIMULATE ECONOMIC GROWTH AND IMPROVE THE QUALITY OF LIFE IN SOUTHWESTERN PENNSYLVANIA.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? . . . . ☐ **Yes** ☑ **No**

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? . . . . ☐ **Yes** ☑ **No**

If "Yes," describe these changes on Schedule O.

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

4a (Code:) (Expenses $ 3,527,155 including grants of $ 2,432,713) (Revenue $ 1,338,109)

See Additional Data

4b (Code:) (Expenses $ 1,575,090 including grants of $ 1,064,843) (Revenue $ 448,609)

See Additional Data

4c (Code:) (Expenses $ 540,713 including grants of $ 263,698) (Revenue $ 272,643)

See Additional Data

(Code:) (Expenses $ 2,564,979 including grants of $ 651,660) (Revenue $ 770,110)

OUR NEXT 75 AND OTHER:AS WE ADVANCED OUR PROGRAM TO IMPROVE THE ECONOMY AND QUALITY OF LIFE ACROSS ALL TEN COUNTIES OF SOUTHWESTERN PENNSYLVANIA, WE ENGAGED IN AN AMBITIOUS, YEAR-LONG INITIATIVE TO DEVELOP A STRATEGIC PLAN TO ASSURE REGIONAL VITALITY FOR THE DECADE TO COME. WE REACHED OUT TO MORE THAN 1,000 STAKEHOLDERS FROM ACROSS THE 10-COUNTY REGION TO LISTEN TO ASPIRATIONS FOR THE FUTURE. WE CALLED THIS YEARLONG ENDEAVOR OUR NEXT 75 OUR MOST AMBITIOUS AND COMPREHENSIVE EFFORT TO DATE FOR COLLECTING AND ANALYZING INFORMATION THAT WILL DEFINE THE NEXT DECADE OF PROGRESS IN OUR COMMUNITY, OUR ASSETS AND ECONOMIC DEVELOPMENT.BEGINNING WITH A SERIES OF THREE REGIONAL SESSIONS IN BUTLER, WASHINGTON AND WESTMORELAND COUNTIES, AND CULMINATING IN A 1,000-PERSON SUMMIT IN DOWNTOWN PITTSBURGH DURING THE SUMMER OF 2019, WE SOUGHT TO UNDERSTAND THE AMBITIONS OF CORPORATIONS AND ENTREPRENEURS, ACADEMICS AND POLICYMAKERS, NONPROFITS AND CIVIC LEADERS FROM OUR 10 COUNTIES. SOME WERE INTERACTING WITH US FOR THE FIRST TIME, OFFERING MUCH-NEEDED FRESH PERSPECTIVES. EQUALLY DIVIDED AMONG TRANSPLANTS, BOOMERANGS, AND THOSE WHO WERE BORN AND RAISED HERE, WHAT UNIVERSALLY CHARACTERIZED THESE PARTICIPANTS WAS A COMMITMENT TO CONTRIBUTING TOWARD THIS REGION'S VISION OF ITS OWN FUTURE.THE 35-MEMBER STEERING COMMITTEE THAT LED THIS PROCESS REPRESENTED A SIMILAR ARRAY OF DIVERSE PROFESSIONAL BACKGROUNDS, ETHNICITIES, AGES, AND GENDERS, GUIDING AN ENDEAVOR THAT WAS PURPOSEFULLY INCLUSIVE AND COMMUNITY FOCUSED. THE RESULT WAS A REMARKABLY ROBUST INPUT OF PEOPLE DEBATING ISSUES IN REAL TIME, WITHIN THE SAME CONTEXT AND PARAMETERS A WEALTH OF INFORMATION THAT GIVES US CONFIDENCE IN OUR FINDINGS. THE DATA GATHERED IN THIS COMPREHENSIVE, YEAR-LONG PROCESS WAS OVERWHELMINGLY CLEAR: WHAT THE PITTSBURGH REGION WANTS AND, MORE IMPORTANTLY, WHAT IT NEEDS IS A VITAL, GLOBALLY COMPETITIVE REGION THAT DELIVERS A NEXT-GENERATION ECONOMY FOR ALL. THESE ASPIRATIONS HAVE BECOME THE BASIS OF OUR TEN YEAR STRATEGIC PLAN, 2020-2030 NEXT IS NOW: A 10-YEAR VISION OF VITALITY FOR THE PITTSBURGH REGION, WHICH WAS RELEASED IN DECEMBER 2019. THIS PLAN CENTERED ON THREE AMBITIOUS GOALS: IMPROVING THE STANDARD OF LIVING OF ALL POPULATIONS IN THE REGION BY 25%; REDUCING GREENHOUSE GAS EMISSIONS TO MEET PARIS ACCORD TARGETS AND IMPLEMENTING STRATEGIES TOWARD U. N. SUSTAINABLE DEVELOPMENT GOALS; AND DOUBLING THE REGION'S PROJECTED JOB GROWTH RESULTING IN 75,000 NEW JOBS - OVER A 10-YEAR PERIOD.

4d Other program services (Describe in Schedule O.)
(Expenses $ 2,564,979 including grants of $ 651,660) (Revenue $ 770,110)

4e **Total program service expenses ▶** 8,207,937

Part IV **Checklist of Required Schedules**

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	**1**	Yes	
2	Is the organization required to complete *Schedule B, Schedule of Contributors* (see instructions)?	**2**	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	**3**		No
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	**4**	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? *If "Yes," complete Schedule C, Part III*	**5**		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D,*Part I	**6**		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*	**7**		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D,* Part III	**8**		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	**9**		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? *If "Yes," complete Schedule D, Part V*	**10**		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D,* Part VI.	**11a**	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII*	**11b**		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII*	**11c**	Yes	
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX*	**11d**		No
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	**11e**		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X*	**11f**	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	**12a**		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional*	**12b**	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	**13**		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	**14a**		No
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If "Yes," complete Schedule F, Parts I and IV*	**14b**		No
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or other assistance to or for any foreign organization? *If "Yes," complete Schedule F, Parts II and IV*	**15**		No
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or other assistance to or for foreign individuals? *If "Yes," complete Schedule F, Parts III and IV*	**16**		No
17	Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I*(see instructions)	**17**		No
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	**18**		No
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	**19**		No
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	**20a**		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	**20b**		
21	Did the organization report more than $5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	**21**	Yes	

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
22	Did the organization report more than $5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a*	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	**Section 501(c)(3), 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 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? *If "Yes," complete Schedule L, Part II*	26		No
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? *If "Yes," complete Schedule L,*Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? *If "Yes," complete Schedule L, Part IV*	28a		No
b	A family member of any individual described in line 28a? *If "Yes," complete Schedule L, Part IV*	28b		No
c	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? *If "Yes," complete Schedule L, Part IV*	28c	Yes	
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? *If "Yes," complete Schedule R, Part I*	33	Yes	
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1*	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	35b		No
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36	Yes	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? **Note.** All Form 990 filers are required to complete Schedule O.	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

					Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	19			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c	Yes	

Part V **Statements Regarding Other IRS Filings and Tax Compliance** *(continued)*

2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	**2a**	48			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? **Note.** If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			**2b**	Yes	
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?			**3a**	Yes	
b	If "Yes," has it filed a Form 990-T for this year? *If "No" to line 3b, provide an explanation in Schedule O*			**3b**	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			**4a**		No
b	If "Yes," enter the name of the foreign country: ▶ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			**5a**		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			**5b**		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			**5c**		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?			**6a**		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			**6b**		
7	**Organizations that may receive deductible contributions under section 170(c).**					
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?			**7a**		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			**7b**		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			**7c**		No
d	If "Yes," indicate the number of Forms 8282 filed during the year	**7d**				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			**7e**		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			**7f**		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			**7g**		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			**7h**		
8	**Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?			**8**		
9	**Sponsoring organizations maintaining donor advised funds.**					
a	Did the sponsoring organization make any taxable distributions under section 4966?			**9a**		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			**9b**		
10	**Section 501(c)(7) organizations.** Enter:					
a	Initiation fees and capital contributions included on Part VIII, line 12	**10a**				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	**10b**				
11	**Section 501(c)(12) organizations.** Enter:					
a	Gross income from members or shareholders	**11a**				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	**11b**				
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?			**12a**		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	**12b**				
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**					
a	Is the organization licensed to issue qualified health plans in more than one state? **Note.** See the instructions for additional information the organization must report on Schedule O.			**13a**		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	**13b**				
c	Enter the amount of reserves on hand	**13c**				
14a	Did the organization receive any payments for indoor tanning services during the tax year?			**14a**		No
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*			**14b**		
15	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.			**15**		No
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.			**16**		No

Part VI **Governance, Management, and Disclosure** *For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.*

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

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	56		
	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	55		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		2	Yes	
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?		7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a	The governing body?		8a	Yes	
b	Each committee with authority to act on behalf of the governing body?		8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O*		9		No

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

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	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	
c	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?			
a	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	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		

Section 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:
▶JANEL SKELLEY 11 STANWIX STREET 17TH FLOOR PITTSBURGH, PA 15222 (412) 281-4783

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

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

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

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

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

See instructions for the order in which to list the persons above.

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

(A) Name and title	**(B)** Average hours per week (list any hours for related organizations below dotted line)	**(C)** Position (do not check more than one box, unless person is both an officer and a director/trustee)						**(D)** Reportable compensation from the organization (W-2/1099-MISC)	**(E)** Reportable compensation from related organizations (W-2/1099-MISC)	**(F)** Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
See Additional Data Table										

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position: Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
See Additional Data Table										

	(D)	(E)	(F)
1b Sub-Total . . . . ▶			
c Total from continuation sheets to Part VII, Section A . . . . ▶			
d Total (add lines 1b and 1c) . . . . ▶	1,920,618	0	260,062

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ▶ 14

			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*	3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If "Yes," complete Schedule J for such individual*	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization?*If "Yes," complete Schedule J for such person*	5		No

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation

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

Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts						
1a Federated campaigns	1a					
b Membership dues	1b					
c Fundraising events	1c					
d Related organizations	1d	30,000				
e Government grants (contributions)	1e					
f All other contributions, gifts, grants, and similar amounts not included above	1f	7,150,106				
g Noncash contributions included in lines 1a - 1f:$	1g					
h **Total.** Add lines 1a-1f ▶			7,180,106			

Program Service Revenue	Business Code	(A)	(B)	(C)	(D)
2a SHARED SERVICES REIMB	900099	2,435,600	2,435,600		
b OTHER PROGRAM REVENUE	900099	158,225	128,225	30,000	
c SPECIAL FUNCTIONS	900099	136,350	136,350		
d RELATED ORG SERVICE FEE	900099	120,000	120,000		
e ANCILLARY REVENUE	900099	9,296	9,296		
f All other program service revenue.					
g **Total.** Add lines 2a–2f. ▶		2,859,471			

Other Revenue			(A)	(B)	(C)	(D)
3 Investment income (including dividends, interest, and other similar amounts) ▶			60,905			60,905
4 Income from investment of tax-exempt bond proceeds ▶						
5 Royalties ▶			10,000			10,000
	(i) Real	(ii) Personal				
6a Gross rents (6a)						
b Less: rental expenses (6b)						
c Rental income or (loss) (6c)						
d Net rental income or (loss) ▶						
	(i) Securities	(ii) Other				
7a Gross amount from sales of assets other than inventory (7a)						
b Less: cost or other basis and sales expenses (7b)						
c Gain or (loss) (7c)						
d Net gain or (loss) ▶						
8a Gross income from fundraising events (not including $ ______ of contributions reported on line 1c). See Part IV, line 18	8a					
b Less: direct expenses	8b					
c Net income or (loss) from fundraising events ▶						
9a Gross income from gaming activities. See Part IV, line 19	9a					
b Less: direct expenses	9b					
c Net income or (loss) from gaming activities ▶						
10a Gross sales of inventory, less returns and allowances	10a					
b Less: cost of goods sold	10b					
c Net income or (loss) from sales of inventory ▶						
Miscellaneous Revenue	Business Code					
11a						
b						
c						
d All other revenue						
e **Total.** Add lines 11a–11d ▶						
12 **Total revenue.** See instructions ▶			10,110,482	2,829,471	30,000	70,905

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	4,407,889	4,407,889		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	5,025	5,025		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	1,317,178	521,870	640,586	154,722
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	3,338,241	2,181,494	1,117,713	39,034
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	161,470	104,172	56,066	1,232
9 Other employee benefits	325,298	198,310	119,018	7,970
10 Payroll taxes	326,821	189,589	121,707	15,525
11 Fees for services (non-employees):				
a Management				
b Legal	19,193	14,727	4,466	
c Accounting	70,892	47,526	23,366	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	438,887	319,786	115,720	3,381
12 Advertising and promotion	66,822	34,936	30,715	1,171
13 Office expenses	65,895	34,762	31,133	
14 Information technology	130,678	74,595	56,083	
15 Royalties				
16 Occupancy	729,281	420,342	308,939	
17 Travel	74,824	47,184	23,813	3,827
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	415,868	415,191		677
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	122,286	70,484	51,802	
23 Insurance	38,491	22,185	16,306	
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 RESEARCH & DEVELOPMENT	131,311	77,969	53,072	270
b DUES AND MEMBERSHIPS	25,607		25,607	
c SHARED EXPENSES	-2,570,361	-984,150	-1,450,136	-136,075
d				
e All other expenses	6,401	4,051	855	1,495
25 **Total functional expenses.** Add lines 1 through 24e	9,647,997	8,207,937	1,346,831	93,229
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).				

Part X **Balance Sheet**

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

				(A) Beginning of year		(B) End of year
Assets	1	Cash–non-interest-bearing		306,728	1	217,382
	2	Savings and temporary cash investments		4,741,997	2	4,646,686
	3	Pledges and grants receivable, net		2,772,525	3	2,739,540
	4	Accounts receivable, net		177,739	4	387,148
	5	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons			5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		82,237	9	126,252
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 909,938			
	b	Less: accumulated depreciation	10b 702,206	266,868	10c	207,732
	11	Investments—publicly traded securities			11	
	12	Investments—other securities. See Part IV, line 11		3,003	12	3,003
	13	Investments—program-related. See Part IV, line 11		5,713,591	13	5,968,933
	14	Intangible assets			14	
	15	Other assets. See Part IV, line 11			15	
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)		14,064,688	16	14,296,676
Liabilities	17	Accounts payable and accrued expenses		1,730,401	17	1,499,904
	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D			21	
	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons			22	
	23	Secured mortgages and notes payable to unrelated third parties			23	
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D			25	
	26	**Total liabilities.** Add lines 17 through 25		1,730,401	26	1,499,904
Net Assets or Fund Balances		**Organizations that follow FASB ASC 958, check here ▶ ☑ and complete lines 27, 28, 32, and 33.**				
	27	Net assets without donor restrictions		2,473,018	27	2,472,701
	28	Net assets with donor restrictions		9,861,269	28	10,324,071
		Organizations that do not follow FASB ASC 958, check here ▶ ☐ and complete lines 29 through 33.				
	29	Capital stock or trust principal, or current funds			29	
	30	Paid-in or capital surplus, or land, building or equipment fund			30	
	31	Retained earnings, endowment, accumulated income, or other funds			31	
	32	Total net assets or fund balances		12,334,287	32	12,796,772
	33	Total liabilities and net assets/fund balances		14,064,688	33	14,296,676

Part XI **Reconcilliation of Net Assets**

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	10,110,482
2	Total expenses (must equal Part IX, column (A), line 25)	2	9,647,997
3	Revenue less expenses. Subtract line 2 from line 1	3	462,485
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	12,334,287
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	12,796,772

Part XII **Financial Statements and Reporting**

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

			Yes	No
1	Accounting method used to prepare the Form 990: ☐ Cash ☑ Accrual ☐ Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: ☐ Separate basis ☑ Consolidated basis ☐ Both consolidated and separate basis			
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
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 audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b		

Additional Data

Software ID:

Software Version:

EIN: 25-0965213

Name: ALLEGHENY CONFERENCE ON COMMUNITY DEVELOPMENT

Form 990 (2019)

Form 990, Part III, Line 4a:

THE ALLEGHENY CONFERENCE'S 2018-19 AGENDA FOCUSED ON TAKING MEANINGFUL STEPS TO CREATE A NEXT GENERATION ECONOMY FOR ALL AND ON LAYING THE FOUNDATION FOR REGIONAL VITALITY BY IMPROVING QUALITY OF PLACE, THE POTENTIAL OF OUR PEOPLE AND STRENGTHENING OUR ECONOMY. THE FOLLOWING IS A SUMMARY OF 2019 ACCOMPLISHMENTS TO ADVANCE THIS WORK.ECONOMY: IN 2019 EFFORTS TO IMPROVE THE REGION'S ECONOMY FOCUSED ON SUPERCHARGING BUSINESS INVESTMENT. CHIEF AMONG THESE EFFORTS WAS THE DEVELOPMENT OF A MODERNIZED APPROACH TO ECONOMIC DEVELOPMENT. TO LEAD EFFORTS TO DEVELOP NEW BUSINESS ATTRACTION AND EXPANSION (INCLUDING FOREIGN DIRECT INVESTMENT) AND TALENT ATTRACTION AND RETENTION STRATEGIES, MARK ANTHONY THOMAS, A NATIONAL LEADER IN ECONOMIC DEVELOPMENT WITH EXPERIENCE IN NEW YORK, ATLANTA, AND LOS ANGELES, WAS RECRUITED TO SERVE AS PRESIDENT OF THE PITTSBURGH REGIONAL ALLIANCE, THE CONFERENCE'S ECONOMIC DEVELOPMENT AFFILIATE. UNDER THIS NEW LEADERSHIP, WE LAUNCHED A NEW ECONOMIC DEVELOPMENT FRAMEWORK FOCUSED ON SUPERCHARGING BUSINESS INVESTMENT GROWTH AND ALIGNING TALENT ATTRACTION EFFORTS.- LEVERAGE REGIONAL ASSETS ACROSS HIGH-INVESTMENT SECTORS [ENERGY, HEALTH, LIFE SCIENCES, CREATIVE] TO CATALYZE INTEREST AND LOCAL JOB GROWTH.- POSITION THE REGION AS THE LOCATION OF CHOICE FOR FAST-GROWING, DEEP-TECH, RESEARCH-DRIVEN INVESTMENTS [ROBOTICS, IOT, AI, CYBER, MOBILITY]. - PROMOTE THE REGION'S INDUSTRIAL, FREIGHT, AND PRODUCTION CAPABILITY TO ATTRACT ADVANCED MANUFACTURING, WITH A FOCUS ON DOWNSTREAM OPPORTUNITIES AND FOREIGN DIRECT INVESTMENT.- PARTNER WITH THE ACADEMIC COMMUNITY TO DEVELOP INITIATIVES TO INCREASE THE POOL OF LOCAL TALENT IN GROWTH SECTORS.- DEVELOP CONTENT AND PROGRAMMATIC INTERVENTIONS TO EQUIP BUSINESSES AND EMPLOYERS WITH THE TOOLS TO ATTRACT NEW GRADUATES, FOREIGN AND DIVERSE TALENT, AND HIGH-DEMAND TALENT.- ATTRACT THE LEADING ORGANIZATIONS AND COMPANIES, WHO CULTIVATE A VIBRANT INNOVATIVE AND INCLUSIVE ENVIRONMENT FOR PROFESSIONAL TALENT, TO THE REGION.IN SUPPORT OF THIS NEW STRATEGIC APPROACH, A REGIONAL REBRANDING INITIATIVE WAS LAUNCHED RESULTING IN THE DEVELOPMENT OF A NEW REGIONAL BRAND POSITION, WITH A TARGETED LAUNCH DATE OF MID-2020.WE SUCCESSFULLY PUSHED BACK AGAINST ATTEMPTS BY THE TRUMP ADMINISTRATION TO CUT FUNDING FOR THE NATIONAL INSTITUTE OF HEALTH, NATIONAL SCIENCE FOUNDATION AND OTHER KEY FEDERAL RESEARCH FUNDING STREAMS FOR PITTSBURGH INSTITUTIONS. THE FY 2019 BUDGET CONTAINED INCREASES OVER PRIOR YEAR LEVELS AS WELL AS OVER THE ADMINISTRATION'S REQUEST. ECONOMIC DEVELOPMENT EFFORTS RESULTED IN 20 BUSINESS EXPANSIONS AND LOCATIONS ACROSS OUR REGION, ATTRACTING $213 MILLION IN CAPITAL INVESTMENT, AND PAVING THE WAY FOR THE CREATION AND RETENTION OF 1429 JOBS. AS PART OF THE RETOOLED EFFORTS, WE DEVELOPED AN INNOVATION DRIVEN BUSINESS EXPANSION STRATEGY. STRATEGIC PARTNERSHIPS WERE FORMED TO SUPPORT THE INNOVATION DISTRICT AND TO BUILD OUT THE REGION'S TECH ECOSYSTEM. COLLABORATIVE REGIONAL MARKETING AT THRIVAL (INCLUDING AN AMPLIFIERS TOUR), WORLD AI SUMMIT, LIFE SCIENCES WEEK, INNOVATION RESEARCH EXCHANGE CONFERENCE AND PLANNING FOR LIFTOFF 2020, AND A SERIES OF CORPORATE INNOVATION ROUNDTABLES THAT ENGAGED 70 REGIONAL BUSINESSES, SUPPORTED THESE EFFORTS. A NEW EFFORT TO BETTER ALIGN PUBLIC, PRIVATE, AND UNIVERSITY RESOURCES FOR TARGETED BUSINESS GROWTH IN THE INNOVATION SECTOR WAS INITIATED.

Form 990, Part III, Line 4b:

PEOPLE:WE DEVOTED MUCH OF OUR TIME AND ATTENTION TO ELEVATING AND RETAINING THE PEOPLE EMPLOYERS NEED IN ORDER TO HAVE CONFIDENCE IN INVESTING IN THE PITTSBURGH REGION.THESE EFFORTS INCLUDED SUPPORTING LAWS TO IMPROVE CAREER READINESS AND INITIATIVES TO MARKET THE REGION TO COLLEGE STUDENTS, HALF OF WHOM LEAVE PITTSBURGH AFTER GRADUATION. TO BETTER PREPARE AND RETAIN YOUNG PEOPLE IN OUR REGION, WE SUPPORTED A LEGISLATIVE PACKAGE OF STATE CAREER READINESS BILLS, INCLUDING ACT 76, WHICH BECAME LAW. THE ENACTMENT OF ACT 76 IMPROVED CAREER AWARENESS PROGRAMS ACROSS THE COMMONWEALTH AND INCLUDED SEVERAL RECOMMENDATIONS THAT THE CONFERENCE FIRST NOTED IN OUR INFLECTION POINT STUDY. ACT 76 IS A PRIME EXAMPLE OF HOW THE CONFERENCE CAN TURN RESEARCH RESULTS INTO ACTION THROUGH OUR ADVOCACY ON IMPORTANT ISSUES. TO HELP ADDRESS REGIONAL TALENT SHORTAGES, WE CONDUCTED A SUCCESSFUL PILOT FOR THE PITTSBURGH PASSPORT SERIES, AN INITIATIVE TO INTRODUCE COLLEGE STUDENTS TO CAREER OPPORTUNITIES AND THE REGION'S QUALITY OF LIFE. THE PILOT ENGAGED MORE THAN 35 REGIONAL COMPANIES AND 1,350 INTERNS FROM 25 COUNTRIES. WE PARTNERED TO LAUNCH EFFORTS FOR MORE INCLUSIVE, DIVERSE WORKPLACES AND MORE INCLUSIVE SUPPLY CHAINS. IN PARTNERSHIP WITH VIBRANT PITTSBURGH, WE LAUNCHED AND EXECUTED THE VIBRANT INDEX THE REGION'S FIRST DIVERSITY AND INCLUSION-FOCUSED DIAGNOSTIC TOOL TO CREATE MORE INCLUSIVE WORKPLACES. THE INDEX CAPTURED INPUT ON A RANGE OF DIVERSITY AND INCLUSION INDICATORS FROM 51 REGIONAL EMPLOYERS AND IS BEING USED TO GUIDE THE DEVELOPMENT OF A BEST PRACTICES PLATFORM.WE LAUNCHED A SUPPLIER DIVERSITY STRATEGY, WHICH INCLUDED THE DEVELOPMENT AND TESTING OF A PROTOTYPE FOR CAPACITY BUILDING IN DIVERSE SUPPLIER MANAGEMENT AND FOR CONNECTING MBES TO CORPORATIONS. WE ENGAGED 25 CORPORATIONS INTERESTED IN DIVERSIFYING THEIR SUPPLIER BASE AND FOUR PARTNERS SUPPORTING MBES. THROUGH TWO WORKSHOPS WE CREATED MORE THAN 80 CONNECTIONS BETWEEN MINORITY OWNED BUSINESSES AND REGIONAL ORGANIZATIONS WITH THE POTENTIAL TO BECOME THEIR CUSTOMERS. IN ORDER TO IMPLEMENT THE ADVOCACY AGENDA, WE MANAGED AND LED SEVERAL KEY COALITIONS INCLUDING: COMPETE PA A COALITION OF OVER 130 ORGANIZATIONS ACROSS PENNSYLVANIA ADVOCATING FOR A BETTER AND MORE COMPETITIVE TAX STRUCTURE IN PENNSYLVANIA; GREAT LAKES METRO CHAMBERS COALITION A COALITION OF GREAT LAKES METRO CHAMBERS WHO HAVE COME TOGETHER FOR ADVOCACY AT THE FEDERAL LEVEL ON SHARED PRIORITIES; AND WESTERN PENNSYLVANIA PARTNERSHIP OF CHAMBERS A COALITION OF OVER 30 LOCAL AND REGIONAL CHAMBERS FROM THE PITTSBURGH REGION FOCUSED ON THE PRIORITIES OF MAIN STREET BUSINESSES IN OUR COMMUNITY.

Form 990, Part III, Line 4c:

PLACE:WE ALSO KNOW THAT FOR PEOPLE WHO COME TO THE REGION AND PEOPLE WHO CHOSE TO STAY IN THE REGION, WE NEED TO HAVE STRONG COMMUNITIES WHERE WE ARE INVESTING. IN 2019 WE MADE MEASUREABLE PROGRESS IN STRENGTHENING COMMUNITIES ACROSS OUR REGION.WE FOCUSED ON SUPPORTING TRANSFORMATIONAL COMMUNITY DEVELOPMENT EFFORTS IN THREE KEY AREAS: OVER THE SEVEN YEARS SINCE ITS INCEPTION, OUR STRENGTHENING COMMUNITIES PARTNERSHIP (SCP), A PROGRAM MADE POSSIBLE BY THE DOUBLING OF THE NEIGHBORHOOD ASSISTANCE PROGRAM TAX CREDIT, WHICH WE SUPPORTED, HAS ENCOURAGED PRIVATE SECTOR INVESTMENT IN SEVEN TRANSITIONING COMMUNITIES ACROSS OUR REGION. THESE COMMUNITIES INCLUDE: CONNELLSVILLE, HOMEWOOD, MCKEES ROCKS, MT. OLIVER/KNOXVILLE, SHARPSBURG, WASHINGTON AND WILKINSBURG. DURING THIS TIME CONFERENCE MEMBER COMPANIES BENEFITED FROM A STATE TAX CREDIT THAT ENABLED $15.5M TO BE INVESTED ACROSS THESE COMMUNITIES. THE INVESTMENT SUPPORTS NEIGHBORHOOD REVITALIZATION EFFORTS AND JOB CREATION.IN 2019, THE SCP EXPANDED TO INCLUDE NINE ADDITIONAL COMMUNITIES, INCLUDING BEAVER FALLS, BLOOMFIELD, BUTLER, BRADDOCK-RANKIN-SWISSVALE-NORTH BRADDOCK, FINEVIEW-PERRY SOUTH, HAZELWOOD, HILL DISTRICT, PENN HILLS AND MUHALL-WEST HOMESTEAD-HOMESTEAD. THESE ADDITIONS REPRESENT BOTH EMERGING AND ALSO MORE EXPERIENCED COMMUNITY DEVELOPMENT ORGANIZATIONS. A PEER NETWORKING PROGRAM WAS LAUNCHED. IN SERVICE TO BOTH OUR ECONOMIC AND COMMUNITY DEVELOPMENT WORK, THE CONFERENCE-STAFFED STRATEGIC INVESTMENT FUND (SIF) - A PRIVATE GAP FINANCING FUND FOR REAL ESTATE PROJECTS EXPECTED TO HAVE A SIGNIFICANT IMPACT ON COMMUNITY AND ECONOMIC DEVELOPMENT - REALIGNED ITS INVESTMENT STRATEGY TO PRIORITIZE LOANS TO AFFORDABLE HOUSING PROJECTS AND CATALYTIC GROWTH AND REDEVELOPMENT OPPORTUNITIES ACROSS THE REGION. THIS INCLUDES COMMUNITIES THAT HAVE BEEN IDENTIFIED AS REQUIRING RESOURCES, INCLUDING OUR SCP COMMUNITIES. IN 2019 THE FUND INVESTED $8.6 MILLION FOR 2 PROJECTS, FOR A TOTAL OF $158 MILLION IN 62 PROJECTS IN ITS 24-YEAR HISTORY. OVERALL, THE SIF HAS SUPPORTED $1.1 BILLION OF DEVELOPMENT THROUGHOUT THE REGION.A SISTER FUND TO THE SIF THE POWER OF 32 SITE DEVELOPMENT FUND WHICH PROVIDES GAP FINANCING TO PREPARE SITES FOR VERTICAL DEVELOPMENT WITH A PREFERENCE FOR BROWNFIELD REDEVELOPMENT AND INVESTING IN UNDERSERVED COMMUNITIES ALSO CONTINUED INVESTING ACROSS THE TRI-STATE REGION. IN 2019, THE FUND INVESTED $12.3 MILLION FOR 2 PROJECTS, FOR A TOTAL OF $37.1 MILLION IN 6 PROJECTS SINCE 2014.WE RELEASED PRINCIPLES TO GUIDE DECISIONS ABOUT HOW TO STRENGTHEN THE ECONOMY WHILE IMPROVING AND PROTECTING OUR QUALITY OF LIFE, AND, IMPORTANTLY, ADVANCING THE NOTION THAT WE CAN HAVE BOTH A STRONG ECONOMY AND HIGH QUALITY OF PLACE. WITH A DIVERSE SET OF VIEWPOINTS AND OPINIONS FROM THE PUBLIC, PRIVATE, NONPROFIT, ACADEMIC AND PHILANTHROPIC SECTORS AT THE TABLE, THE CONFERENCE WORKED TO ESTABLISH CORE SUSTAINABILITY PRINCIPLES TO FIT WITHIN THE SCOPE AND MISSION OF THE ORGANIZATION'S AGENDA. THE RESULT - DERIVED FROM THE U.N. SUSTAINABLE DEVELOPMENT GOALS - IS A SET OF INSPIRING AND FORWARD THINKING PRINCIPLES. THESE PRINCIPLES WERE UNANIMOUSLY ADOPTED BY THE ALLEGHENY CONFERENCE BOARD OF DIRECTORS IN LATE 2018. IN 2019 THESE PRINCIPLES WERE SHARED WITH THE COMMUNITY AND BEGAN BEING USED TO GUIDE DECISIONS ABOUT HOW TO STRENGTHEN OUR ECONOMY WHILE IMPROVING AND PROTECTING OUR QUALITY OF LIFE. WE SUPPORTED AND ADVOCATED FOR STRATEGIC IMPROVEMENTS AND INVESTMENTS IN THE REGION'S MULTI-MODAL TRANSPORTATION INFRASTRUCTURE AND PLANNING. WE ACTIVELY ENGAGED IN THE SOUTHWEST PENNSYLVANIA COALITION FOR MOBILITY, WHICH PRODUCED A STUDY IDENTIFYING THE HIGH IMPACT CORRIDORS IN THE REGION AND THE IMPACTFUL APPROACHES THAT WOULD HAVE MATERIAL IMPACT ON FUTURE FOCUSED REGIONAL TRANSPORTATION PLANNING. WE SUCCESSFULLY ADVOCATED FOR CONTINUED PROGRESS AND FUNDING FOR A CRITICAL TRANSPORTATION PROJECT, THE BUS RAPID TRANSIT (BRT) PROJECT, TO CONNECT DOWNTOWN TO OAKLAND VIA INCREASED FUNDING VIA THE CAPITAL INVESTMENT GRANT PROGRAM.WE SUPPORTED EFFORTS TO PREVENT AN INVESTMENT FUNDING CLIFF DUE TO PENNSYLVANIA TURNPIKE PAYMENTS TO THE PENNSYLVANIA DEPARTMENT OF TRANSPORTATION ENDING IN 2022, INCLUDING SUPPORT FOR STATE SENATE BILL 778, WHICH WOULD BEGIN THE PHASE OUT OBLIGATION. AT THE FEDERAL LEVEL, WE SUPPORTED CRITICAL FUNDING FOR THE UPPER OHIO AND MONONGAHELA RIVER LOCKS AND DAMS. THESE EFFORTS RESULTED IN AN INCREASE IN FUNDING IN THE US ARMY CORPS WATER APPROPRIATIONS FUNDING.

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position: Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
STEFANI PASHMAN CEO	36.00 10.00	X		X				514,328	0	31,040
MATT SMITH PRESIDENT, GPCOC	14.00 35.00				X			262,773	0	19,679
WILLIAM FLANAGAN CHIEF CORPORATE RELATIONS	40.00 6.00				X			217,695	0	38,203
JANEL SKELLEY CFO	39.00 7.00			X				218,198	0	28,893
MARK THOMAS PRESIDENT, PRA (ENTER 7/15/19)	24.00 25.00					X		146,842	0	59,051
CECELIA CAGNI CHIEF MARKETING & COMM OFFICER	42.00 7.00					X		152,581	0	21,031
VERA KREKANOVA CHIEF STRATEGY OFFICER	16.00 25.00					X		150,371	0	19,950
PATRICIA HORVATICH VICE PRESIDENT	6.00 53.00					X		126,020	0	29,009
DAVID RUPPERSBERGER PRESIDENT, PRA (EXIT 3/1/19)	22.00 20.00					X		131,810	0	13,206
WILLIAM S DEMCHAK CHAIR	1.00 0.00	X		X				0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position: Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
LAURA KARET VICE CHAIR	1.00 1.00	X		X				0	0	0
VENKEE SHARMA SECRETARY	1.00 0.00	X		X				0	0	0
SUSAN BAKER SHIPLEY TREASURER	1.00 0.00	X		X				0	0	0
RICHARD J HARSHMAN IMMEDIATE PAST CHAIR	0.50 0.00	X						0	0	0
ROBERT O AGBEDE AT LARGE MEMBER	0.50 0.00	X						0	0	0
LEROY M BALL JR AT LARGE MEMBER	0.50 0.00	X						0	0	0
JOHN A BARBOUR AT LARGE MEMBER	0.50 0.00	X						0	0	0
ERIC BOUGHNER AT LARGE MEMBER	0.50 0.00	X						0	0	0
JEFF BROADHURST AT LARGE MEMBER	0.50 0.00	X						0	0	0
DAVID BROWNLEE AT LARGE MEMBER (ENTER 4/3/19)	0.50 0.00	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
DAVID BURRITT AT LARGE MEMBER	0.50 0.00	X						0	0	0
HELEN HANNA CASEY AT LARGE MEMBER	0.50 0.00	X						0	0	0
LEON DEJULIUS AT LARGE MEMBER (EXIT 12/31/19)	0.50 0.00	X						0	0	0
VINCENT DELIE AT LARGE MEMBER	0.50 0.00	X						0	0	0
J CHRISTOPHER DONAHUE AT LARGE MEMBER	0.50 0.00	X						0	0	0
JOHN J ENGEL AT LARGE MEMBER	0.50 0.00	X						0	0	0
MARK EUBANKS AT LARGE MEMBER (EXIT 3/14/19)	0.50 0.00	X						0	0	0
MICHELE FABRIZI AT LARGE MEMBER (EXIT 5/6/19)	0.50 0.00	X						0	0	0
KAREN WOLK FEINSTEIN AT LARGE MEMBER	0.50 0.00	X						0	0	0
DANIEL K FITZPATRICK AT LARGE MEMBER	0.50 0.00	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
KIMBERLY TILLOTSON FLEMING AT LARGE MEMBER	0.50 0.00	X						0	0	0
PATRICK D GALLAGHER AT LARGE MEMBER	0.50 0.00	X						0	0	0
KENNETH GORMLEY AT LARGE MEMBER	0.50 0.00	X						0	0	0
STEVEN J GUY AT LARGE MEMBER	0.50 0.00	X						0	0	0
CHARLES L HAMMEL III AT LARGE MEMBER	0.50 0.00	X						0	0	0
PAUL HENNIGAN AT LARGE MEMBER (EXIT 12/31/19)	0.50 0.00	X						0	0	0
DAVID L HOLMBERG AT LARGE MEMBER	0.50 0.00	X						0	0	0
CHRISTOPHER HOWARD AT LARGE MEMBER	0.50 0.00	X						0	0	0
MICHAEL HUWAR AT LARGE MEMBER	0.50 0.00	X						0	0	0
FARNAM JAHANIAN AT LARGE MEMBER	0.50 0.00	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position: Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
RONALD C KEATING AT LARGE MEMBER	0.50 0.00	X						0	0	0
GERALD F MACCLEARY AT LARGE MEMBER (EXIT 12/31/19)	0.50 0.00	X						0	0	0
HENRY J MAIER AT LARGE MEMBER	0.50 0.00	X						0	0	0
STEVEN MALNIGHT AT LARGE MEMBER (ENTER 5/14/19)	0.50 0.00	X						0	0	0
DAVID J MALONE AT LARGE MEMBER	0.50 0.00	X						0	0	0
MICHAEL H MCGARRY AT LARGE MEMBER	0.50 0.00	X						0	0	0
JAMES MCQUADE AT LARGE MEMBER	0.50 0.00	X						0	0	0
HILARY MERCER AT LARGE MEMBER (ENTER 8/27/19)	0.50 0.00	X						0	0	0
DAVID J MOREHOUSE AT LARGE MEMBER	0.50 0.00	X						0	0	0
LINDA MOSS AT LARGE MEMBER (EXIT 5/14/19)	0.50 0.00	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
DAVID L MOTLEY AT LARGE MEMBER (EXIT 12/31/19)	0.50 0.00	X						0	0	0
TODD C MOULES AT LARGE MEMBER	0.50 0.00	X						0	0	0
MORGAN O'BRIEN AT LARGE MEMBER	0.50 0.50	X						0	0	0
GRANT OLIPHANT AT LARGE MEMBER	0.50 0.00	X						0	0	0
STACEY OLSON AT LARGE MEMBER	0.50 0.00	X						0	0	0
ANTONIS PAPADOURAKIS AT LARGE MEMBER	0.50 0.00	X						0	0	0
SAM REIMAN AT LARGE MEMBER (ENTER 1/18/19)	0.50 0.00	X						0	0	0
RICHARD RIAZZI AT LARGE MEMBER (EXIT 5/6/19)	0.50 0.00	X						0	0	0
JAMES H ROCK AT LARGE MEMBER	0.50 0.00	X						0	0	0
DAVID K ROGER AT LARGE MEMBER	0.50 0.00	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position: Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
JEFFREY A ROMOFF AT LARGE MEMBER	0.50 0.00	X						0	0	0
STEVE R SCHOTT AT LARGE MEMBER	0.50 0.00	X						0	0	0
JAMES SEGERDAHL AT LARGE MEMBER	0.50 0.00	X						0	0	0
GEORGE L STEWART II AT LARGE MEMBER (EXIT 12/31/19)	0.50 0.00	X						0	0	0
WILLIAM E STRICKLAND JR AT LARGE MEMBER	0.50 0.00	X						0	0	0
NISHAN J VARTANIAN AT LARGE MEMBER	0.50 0.00	X						0	0	0
SUNIL WADHWANI AT LARGE MEMBER	0.50 0.00	X						0	0	0
LARA WASHINGTON AT LARGE MEMBER	0.50 0.00	X						0	0	0
ROBERT S WETHERBEE AT LARGE MEMBER (ENTER 1/18/19)	0.50 0.00	X						0	0	0

SCHEDULE A
(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ.
▶ Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
ALLEGHENY CONFERENCE ON COMMUNITY DEVELOPMENT

Employer identification number
25-0965213

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

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

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

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ).)

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

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

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

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

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

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

9 ☐ An agricultural research organization described in **170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture. See instructions. Enter the name, city, and state of the college or university:

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

12 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.

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

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

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

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

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

f Enter the number of supported organizations . . . .

g Provide the following information about the supported organization(s).

(i) Name of supported organization	**(ii)** EIN	**(iii)** Type of organization (described on lines 1- 10 above (see instructions))	**(iv)** Is the organization listed in your governing document?		**(v)** Amount of monetary support (see instructions)	**(vi)** Amount of other support (see instructions)
			Yes	**No**		
Total						

Part II **Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization failed to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.") . .	8,592,518	9,066,558	7,730,969	7,478,018	7,185,106	40,053,169
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf. . . .						
3 The value of services or facilities furnished by a governmental unit to the organization without charge..						
4 **Total.** Add lines 1 through 3	8,592,518	9,066,558	7,730,969	7,478,018	7,185,106	40,053,169
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) . .						8,191,632
6 **Public support.** Subtract line 5 from line 4.						31,861,537

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7 Amounts from line 4. .	8,592,518	9,066,558	7,730,969	7,478,018	7,185,106	40,053,169
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. . .	24,124	43,968	29,444	44,702	70,905	213,143
9 Net income from unrelated business activities, whether or not the business is regularly carried on. .						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). .						
11 **Total support.** Add lines 7 through 10						40,266,312

12 Gross receipts from related activities, etc. (see instructions) . . . . 12 | 12,667,149

13 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** . . . . ▶ ☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f)) . . . . 14 | 79.130 %

15 Public support percentage for 2018 Schedule A, Part II, line 14 . . . . 15 | 78.980 %

16a **33 1/3% support test—2019.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . ▶ ☑

b **33 1/3% support test—2018.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . ▶ ☐

17a **10%-facts-and-circumstances test—2019.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . ▶ ☐

b **10%-facts-and-circumstances test—2018.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . ▶ ☐

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions . . . . ▶ ☐

Part III **Support Schedule for Organizations Described in Section 509(a)(2)**
(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(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						
3 Gross receipts from activities that are 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. . .						
5 The value of services or facilities 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.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9 Amounts from line 6. . .						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. .						
b Unrelated business taxable income (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 Other income. Do not include gain or 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 for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**. . . . . . ▶ ☐

Section C. Computation of Public Support Percentage

15	Public support percentage for 2019 (line 8, column (f) divided by line 13, column (f))	15	
16	Public support percentage from 2018 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2019** (line 10c, column (f) divided by line 13, column (f))	17	
18	Investment income percentage from **2018** Schedule A, Part III, line 17	18	

19a **331/3% support tests—2019.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . ▶ ☐

b **33 1/3% support tests—2018.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . ▶ ☐

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions . . . . ▶ ☐

Part IV Supporting Organizations

(Complete only if you checked a box on line 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
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? *If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.*	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? *If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).*	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If "Yes," answer (b) and (c) below.*	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? *If "Yes," describe in **Part VI** when and how the organization made the determination.*	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? *If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.*	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? *If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below.*	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.*	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If "Yes," explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? *If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in **Part VI,** including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).*	5a		
b	**Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	**Substitutions only.** Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its 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		
7	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		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? *If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).*	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If "Yes," provide detail in **Part VI.***	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in **Part VI.***	9b		
c	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If "Yes," provide detail in **Part VI.***	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If "Yes," answer line 10b below.*	10a		
b	Did the organization have any excess business holdings in the tax year? *(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).*	10b		

Part IV Supporting Organizations (continued)

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	**11a**		
b	A family member of a person described in (a) above?	**11b**		
c	A 35% controlled entity of a person described in (a) or (b) above? *If "Yes" to a, b, or c, provide detail in* ***Part VI.***	**11c**		

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (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?	**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**		

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year **(see instructions)**:

a ☐ The organization satisfied the Activities Test. Complete **line 2** below.

b ☐ The organization is the parent of each of its supported organizations. Complete **line 3** below.

c ☐ The organization supported a governmental entity. Describe in **Part VI** how you supported a government entity (see instructions)

2 Activities Test. **Answer (a) and (b) below.**

			Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? *If "Yes," then in* ***Part VI identify those supported organizations and explain*** *how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.*	**2a**		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in* ***Part VI*** *the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.*	**2b**		

3 Parent of Supported Organizations. **Answer (a) and (b) below.**

			Yes	No
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *Provide details in* ***Part VI.***	**3a**		
b	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? *If "Yes," describe in* ***Part VI.*** *the role played by the organization in this regard.*	**3b**		

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

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

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

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

	Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	**Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		

7 ☐ Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)

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

Section D - Distributions	**Current Year**
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in **Part VI**). See instructions	
7 **Total annual distributions.** Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in **Part VI**). See instructions	
9 Distributable amount for 2019 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	**(i)** **Excess Distributions**	**(ii)** **Underdistributions Pre-2019**	**(iii)** **Distributable Amount for 2019**
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required-- explain in **Part VI**). See instructions.			
3 Excess distributions carryover, if any, to 2019:			
a From 2014.			
b From 2015.			
c From 2016.			
d From 2017.			
e From 2018.			
f **Total** of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2019 distributable amount			
i Carryover from 2014 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2019 from Section D, line 7: $			
a Applied to underdistributions of prior years			
b Applied to 2019 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2019, 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 2019. 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 2020.** Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2015.			
b Excess from 2016.			
c Excess from 2017.			
d Excess from 2018.			
e Excess from 2019.			

Additional Data

Software ID:
Software Version:
EIN: 25-0965213
Name: ALLEGHENY CONFERENCE ON COMMUNITY DEVELOPMENT

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

Facts And Circumstances Test

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493315044420

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

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

▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ.
▶Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then
- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then
- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then
- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of the organization	Employer identification number
ALLEGHENY CONFERENCE ON COMMUNITY DEVELOPMENT	25-0965213

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities")

2 Political campaign activity expenditures (see instructions) ▶ $ 0

3 Volunteer hours for political campaign activities (see instructions) 0

Part I-B Complete if the organization is exempt under section 501(c)(3).

1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ $ 0

2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ $ 0

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No

4a Was a correction made? ☐ Yes ☐ No

b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ $

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ $

3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ▶ $

4 Did the filing organization file **Form 1120-POL** for this year? ☐ Yes ☐ No

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

	(a) Name	**(b)** Address	**(c)** EIN	**(d)** Amount paid from filing organization's funds. If none, enter -0-.	**(e)** Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.
1					
2					
3					
4					
5					
6					

Part II-A **Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**

A Check ▶ ☑ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).

B Check ▶ ☐ if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	**(a)** Filing organization's totals	**(b)** Affiliated group totals
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)	0	0
b Total lobbying expenditures to influence a legislative body (direct lobbying)	10,019	10,766
c Total lobbying expenditures (add lines 1a and 1b)	10,019	10,766
d Other exempt purpose expenditures	9,637,978	12,986,056
e Total exempt purpose expenditures (add lines 1c and 1d)	9,647,997	12,996,822
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.	632,400	799,841

If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:
Not over $500,000	20% of the amount on line 1e.
Over $500,000 but not over $1,000,000	$100,000 plus 15% of the excess over $500,000.
Over $1,000,000 but not over $1,500,000	$175,000 plus 10% of the excess over $1,000,000.
Over $1,500,000 but not over $17,000,000	$225,000 plus 5% of the excess over $1,500,000.
Over $17,000,000	$1,000,000.

	(a)	(b)
g Grassroots nontaxable amount (enter 25% of line 1f)	158,100	199,960
h Subtract line 1g from line 1a. If zero or less, enter -0-.	0	0
i Subtract line 1f from line 1c. If zero or less, enter -0-.	0	0

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? ☐ **Yes** ☐ **No**

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	**(a)** 2016	**(b)** 2017	**(c)** 2018	**(d)** 2019	**(e)** Total
2a Lobbying nontaxable amount	930,866	884,801	878,393	799,841	3,493,901
b Lobbying ceiling amount (150% of line 2a, column(e))					5,240,852
c Total lobbying expenditures	50,898	44,761	20,217	10,766	126,642
d Grassroots nontaxable amount	232,717	221,200	219,598	199,960	873,475
e Grassroots ceiling amount (150% of line 2d, column (e))					1,310,213
f Grassroots lobbying expenditures	1,242	2,357			3,599

Part II-B **Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).**

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.		(a) Yes	(a) No	(b) Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a	Volunteers?			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c	Media advertisements?			
d	Mailings to members, legislators, or the public?			
e	Publications, or published or broadcast statements?			
f	Grants to other organizations for lobbying purposes?			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i	Other activities?			
j	Total. Add lines 1c through 1i			
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A **Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).**

			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1		
2	Did the organization make only in-house lobbying expenditures of $2,000 or less?	2		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?	3		

Part III-B **Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."**

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) nondeductible lobbying and political expenditures **(do not include amounts of political expenses for which the section 527(f) tax was paid).**		
a	Current year	2a	
b	Carryover from last year	2b	
c	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV **Supplemental Information**

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1. Also, complete this part for any additional information.

Return Reference	Explanation

TY 2019 Affiliated Group Schedule

Name: ALLEGHENY CONFERENCE ON COMMUNITY DEVELOPMENT

EIN: 25-0965213

Affiliated Group Business Name:	PITTSBURGH REGIONAL ALLIANCE
Address. Either US or Foreign Type:	11 STANWIX STREET 17TH FLOOR PITTSBURGH, PA 15222
EIN:	25-1780438
Electing Organization Checkbox:	☑
Total Grassroots Lobbying:	0
Total Direct Lobbying:	747
Total Lobbying Expenditures:	747
Other Exempt Purpose Expenditures:	3,348,078
Total Exempt Purpose Expenditures:	3,348,825
Lobbying Nontaxable Amount:	317,441
Grassroots Nontaxable Amount:	79,360
Tot Lobbying Grassroot Minus Non Tx:	0
Tot Lobby Expend Mns Lobbying Non Tx:	0
Share Of Excess Lobbying:	0
Affiliated Group Business Name:	STRATEGIC REGIONAL DEVELOPMENTS INC
Address. Either US or Foreign Type:	11 STANWIX STREET 17TH FLOOR PITTSBURGH, PA 15222
EIN:	31-1766460
Electing Organization Checkbox:	☐
Total Grassroots Lobbying:	0
Total Direct Lobbying:	0
Total Lobbying Expenditures:	0
Other Exempt Purpose Expenditures:	0
Total Exempt Purpose Expenditures:	0
Lobbying Nontaxable Amount:	0
Grassroots Nontaxable Amount:	0
Tot Lobbying Grassroot Minus Non Tx:	0
Tot Lobby Expend Mns Lobbying Non Tx:	0
Share Of Excess Lobbying:	0

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 instructions and the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
ALLEGHENY CONFERENCE ON COMMUNITY DEVELOPMENT

Employer identification number
25-0965213

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

Part II Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

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

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

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

			Held at the End of the Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d	

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

4 Number of states where property subject to conservation easement is located ▶ ____________

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ ____________

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ $ ____________

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

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

(i) Revenue included 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, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenue included on Form 990, Part VIII, line 1 ▶ $ ____________

b Assets included in Form 990, Part X ▶ $ ____________

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

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

a ☐ Public exhibition
b ☐ Scholarly research
c ☐ Preservation for future generations
d ☐ Loan or exchange programs
e ☐ Other ....

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

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? . . . ☐ Yes ☐ No

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

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? . . . ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

			Amount
c	Beginning balance	1c	
d	Additions during the year	1d	
e	Distributions during the year	1e	
f	Ending balance	1f	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? . . . ☐ Yes ☐ No

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

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

	(a) Current year	**(b)** Prior year	**(c)** Two years back	**(d)** Three years back	**(e)** Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a Board designated or quasi-endowment ▶ ....

b Permanent endowment ▶ ....

c Temporarily restricted endowment ▶ ....

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

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

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

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

Description of property	**(a)** Cost or other basis (investment)	**(b)** Cost or other basis (other)	**(c)** Accumulated depreciation	**(d)** Book value
1a Land				
b Buildings				
c Leasehold improvements		630,025	449,783	180,242
d Equipment		264,613	237,123	27,490
e Other		15,300	15,300	0
Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* ▶				207,732

Part VII Investments—Other Securities.
Complete if the organization answered "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	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3)Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 12.)* ▶		

Part VIII Investments—Program Related.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)INVESTMENT IN SIF, LP	429,412	C
(2)INVESTMENT IN SIF, INC.	4,149,813	C
(3)INVESTMENT IN P32, LP	1,324,708	C
(4)INVESTMENT IN P32, LLC	65,000	C
(5)		
(6)		
(7)		
(8)		
(9)		
Total. *(Column (b) must equal Form 990, Part X, col.(B) line 13.)* ▶	5,968,933	

Part IX Other Assets.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col.(B) line 15.)* . . . . ▶	

Part X Other Liabilities.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f.See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col.(B) line 25.)* ▶	

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

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

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

1	Total revenue, gains, and other support per audited financial statements			1	4,148,684
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities	2b	55,034		
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d	-3,581,232		
e	Add lines **2a** through **2d**			2e	-3,526,198
3	Subtract line **2e** from line **1**			3	7,674,882
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b	2,435,600		
c	Add lines **4a** and **4b**			4c	2,435,600
5	Total revenue. Add lines **3** and **4c.** (This must equal Form 990, Part I, line 12.)			5	10,110,482

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

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

1	Total expenses and losses per audited financial statements			1	3,686,199
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a	Donated services and use of facilities	2a	55,034		
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII.)	2d	5,000		
e	Add lines **2a** through **2d**			2e	60,034
3	Subtract line **2e** from line **1**			3	3,626,165
4	Amounts included on Form 990, Part IX, line 25, but not on line **1:**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b	6,021,832		
c	Add lines **4a** and **4b**			4c	6,021,832
5	Total expenses. Add lines **3** and **4c.** (This must equal Form 990, Part I, line 18.)			5	9,647,997

Part XIII Supplemental Information

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

Return Reference	Explanation
See Additional Data Table	

Part XIII Supplemental Information ***(continued)***

Return Reference	Explanation

Additional Data

Software ID:
Software Version:
EIN: 25-0965213
Name: ALLEGHENY CONFERENCE ON COMMUNITY DEVELOPMENT

Supplemental Information

Return Reference	Explanation
PART X, LINE 2:	THE FINANCIAL ACCOUNTING STANDARDS BOARD (FASB) ISSUED THE ACCOUNTING FOR INCOME TAXES TOP IC OF THE ACCOUNTING STANDARDS CODIFICATION (CODIFICATION), WHICH CLARIFIES THE ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES RECOGNIZED IN AN ENTITY'S FINANCIAL STATEMENTS. THIS TOPI C PRESCRIBES A RECOGNITION THRESHOLD AND MEASUREMENT PRINCIPLES FOR FINANCIAL STATEMENT DI SCLOSURE OF TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN ON A TAX RETURN. THE CONFERENCE AN D AFFILIATES' COMBINED STATEMENTS OF FINANCIAL POSITION AT DECEMBER 31, 2019 AND 2018 DO N OT INCLUDE ANY LIABILITIES ASSOCIATED WITH UNCERTAIN TAX POSITIONS; FURTHER, THE CONFERENC E AND AFFILIATES HAVE NO UNRECOGNIZED TAX BENEFITS. THE CONFERENCE AND AFFILIATES ARE NO L ONGER SUBJECT TO EXAMINATION OF THEIR TAX RETURNS FOR YEARS BEFORE 2016.

Supplemental Information

Return Reference	Explanation
PART XI, LINE 2D - OTHER ADJUSTMENTS:	GRANT EXPENSE -3,586,232. ELIMINATIONS 5,000.

Supplemental Information

Return Reference	Explanation
PART XI, LINE 4B - OTHER ADJUSTMENTS:	REIMBURSEMENT OF SHARED SERVICES BY AFFILIATES 2,435,600.

Supplemental Information

Return Reference	Explanation
PART XII, LINE 2D - OTHER ADJUSTMENTS:	ELIMINATIONS 5,000.

Supplemental Information

Return Reference	Explanation
PART XII, LINE 4B - OTHER ADJUSTMENTS:	GRANT EXPENSE 3,586,232. REIMBURSEMENT OF SHARED SERVICES BY AFFILIATES 2,435,600.

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Schedule I (Form 990)

Department of the Treasury
Internal Revenue Service

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

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.
▶ Go to *www.irs.gov/Form990* for the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
ALLEGHENY CONFERENCE ON COMMUNITY DEVELOPMENT

Employer identification number
25-0965213

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . ☑ Yes ☐ No

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

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" 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 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 noncash assistance	**(h)** Purpose of grant or assistance
(1) See Additional Data							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

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

3 Enter total number of other organizations listed in the line 1 table . . . . . . ▶ 2

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

(a) Type of grant or assistance	**(b)** Number of recipients	**(c)** Amount of cash grant	**(d)** Amount of noncash assistance	**(e)** Method of valuation (book, FMV, appraisal, other)	**(f)** Description of noncash assistance
(1) TUITION ASSISTANCE - PAID DIRECTLY TO UNIVERSITY	1	5,025		N/A	N/A
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

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

Return Reference	**Explanation**
PART I, LINE 2:	THE ALLEGHENY CONFERENCE ON COMMUNITY DEVELOPMENT (ACCD), ALONG WITH ITS AFFILIATED ORGANIZATIONS: PITTSBURGH REGIONAL ALLIANCE, PENNSYLVANIA ECONOMY LEAGUE OF SOUTHWESTERN PA, LLC AND THE GREATER PITTSBURGH CHAMBER OF COMMERCE SHARE A COMMON AGENDA AND STRATEGIC PLAN. WORKING TO STIMULATE ECONOMIC GROWTH AND IMPROVE THE QUALITY OF LIFE OF SOUTHWESTERN PENNSYLVANIA, ACCD ACTS AS THE FUNDING ARM OF THE AFFLIATIONS THROUGH ITS ANNUAL CAMPAIGN. THE AFFILIATED ORGANIZATIONS REPORT TO THE ACCD BOARD OF DIRECTORS ON THEIR PROGRESS AND USES OF FUNDING. OCCASIONALLY, THE ACCD BOARD APPROVES GRANTS TO ORGANIZATIONS OR AGENCIES THAT SUPPORT THE MISSION OF ACCD TO STIMULATE ECONOMIC GROUWTH AND IMPROVE THE QUALITY OF LIFE OF SOUTHWESTERN PENNSYLVANIA. ACCD MONITORS THE USE OF THESE FUNDS TO ENSURE THEY ARE USED FOR THEIR INTENDED PURPOSE. THE BARBARA MCNEES SPIRIT OF ATHENA SCHOLARSHIP RECOGNIZES THE CONTRIBUTIONS OF RETIRED GREATER PITTSBURGH CHAMBER OF COMMERCE PRESIDENT BARBARA MCNEES, WHO FOR DECADES ACTIVELY ENCOURAGED AND SUPPORTED THE DEVELOPMENT OF WOMEN LEADERS ACROSS THE PITTSBURGH REGION. THE SCHOLARSHIP, A COMPETITIVE AWARD, PAYS THE RECIPIENT'S TUITION FOR ATTENDANCE TO AN EXECUTIVE EDUCATION PROGRAM AT CARNEGIE MELLON UNIVERSITY'S TEPPER SCHOOL OF BUSINESS: THE CARNEGIE MELLON LEADERSHIP & NEGOTIATION ACADEMY FOR WOMEN.

Additional Data

Software ID:
Software Version:
EIN: 25-0965213
Name: ALLEGHENY CONFERENCE ON COMMUNITY DEVELOPMENT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC 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
PA ECONOMY LEAGUE OF SOUTHWESTERN PA 11 STANWIX STREET 17TH FLOOR PITTSBURGH, PA 15222	23-1352264	501(C)(3)	311,000		N/A	N/A	PROJECT SUPPORT
PITTSBURGH REGIONAL ALLIANCE 11 STANWIX STREET 17TH FLOOR PITTSBURGH, PA 15222	25-1780438	501(C)(3)	432,657		N/A	N/A	PROJECT SUPPORT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC 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
PA ECONOMY LEAGUE OF SOUTHWESTERN PA 11 STANWIX STREET 17TH FLOOR PITTSBURGH, PA 15222	23-1352264	501(C)(3)	681,993		N/A	N/A	OPERATING SUPPORT
PITTSBURGH REGIONAL ALLIANCE 11 STANWIX STREET 17TH FLOOR PITTSBURGH, PA 15222	25-1780438	501(C)(3)	2,904,239		N/A	N/A	OPERATING SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC 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
LEADERSHIP PITTSBURGH 535 SMITHFIELD STREET SUITE 1125 PITTSBURGH, PA 15222	25-1767779	501(C)(3)	45,000		N/A	N/A	PROGRAM SUPPORT
GREATER PITTSBURGH CHAMBER OF COMMERCE 11 STANWIX STREET 17TH FLOOR PITTSBURGH, PA 15222	25-0399620	501(C)(6)	8,000		N/A	N/A	PROJECT SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC 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
VISIT PITTSBURGH 120 5TH AVENUE SUITE 2800 PITTSBURGH, PA 15222	25-0729260	501(C)(6)	25,000		N/A	N/A	PROGRAM SUPPORT

Schedule J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
▶ Attach to Form 990.
▶ Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
ALLEGHENY CONFERENCE ON COMMUNITY DEVELOPMENT

Employer identification number
25-0965213

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropiate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. ☐ First-class or charter travel ☐ Housing allowance or residence for personal use ☐ Travel for companions ☐ Payments for business use of personal residence ☐ Tax idemnification and gross-up payments ☑ Health or social club dues or initiation fees ☐ Discretionary spending account ☐ Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on Line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	Yes	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked on Line 1a? . .	2	Yes	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. ☑ Compensation committee ☑ Written employment contract ☑ Independent compensation consultant ☑ Compensation survey or study ☐ Form 990 of other organizations ☑ Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:			
a	Receive a severance payment or change-of-control payment?	4a	Yes	
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		No
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:			
a	The organization?	5a		No
b	Any related organization?	5b		No
	If "Yes," on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:			
a	The organization?	6a		No
b	Any related organization?	6b		No
	If "Yes," on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7	Yes	
8	Were any amounts reported on Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		No
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9		

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

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

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

(A) Name and Title		**(B)** Breakdown of W-2 and/or 1099-MISC compensation			**(C)** Retirement and other deferred compensation	**(D)** Nontaxable benefits	**(E)** Total of columns (B)(i)-(D)	**(F)** Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	**(ii)** Bonus & incentive compensation	**(iii)** Other reportable compensation				
1 STEFANI PASHMAN CEO	(i)	404,978	108,000	1,350	16,300	14,740	545,368	0
	(ii)	0	0	0	0	0	0	0
2 MATT SMITH PRESIDENT, GPCOC	(i)	219,298	42,125	1,350	13,798	5,881	282,452	0
	(ii)	0	0	0	0	0	0	0
3 WILLIAM FLANAGAN CHIEF CORPORATE RELATIONS	(i)	190,192	23,399	4,104	13,141	25,062	255,898	0
	(ii)	0	0	0	0	0	0	0
4 JANEL SKELLEY CFO	(i)	184,832	32,016	1,350	11,703	17,190	247,091	0
	(ii)	0	0	0	0	0	0	0
5 MARK THOMAS PRESIDENT, PRA (ENTER 7/15/19)	(i)	146,369	0	473	55,099	3,952	205,893	0
	(ii)	0	0	0	0	0	0	0
6 CECELIA CAGNI CHIEF MARKETING & COMM OFFICER	(i)	129,632	21,790	1,159	8,692	12,339	173,612	0
	(ii)	0	0	0	0	0	0	0
7 VERA KREKANOVA CHIEF STRATEGY OFFICER	(i)	130,889	18,525	957	7,810	12,140	170,321	0
	(ii)	0	0	0	0	0	0	0
8 PATRICIA HORVATICH VICE PRESIDENT	(i)	116,444	6,000	3,576	7,812	21,197	155,029	0
	(ii)	0	0	0	0	0	0	0

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Return Reference	Explanation
PART I, LINE 1A	ACCD CURRENTLY PAYS FOR THE QUARTERLY DUES OF THE CEO, CHIEF CORPORATE RELATIONS OFFICER AND PRESIDENT OF GPCC WHO BELONG TO A BUSINESS CLUB. THE BUSINESS CLUB HAS BEEN IDENTIFIED BY THE BOARD AS HAVING MEMBERS YIELDING TREMENDOUS IMPACT ON THE CITY, REGION, COUNTRY, AND EVEN THE WORLD. A VAST MAJORITY OF THE BOARD MEMBERS ARE MEMBERS OF THIS BUSINESS CLUB AND ARE CONSIDERED LEADERS OF THE BUSINESS COMMUNITY. THE PRIMARY PURPOSE OF HAVING THIS MEMBERSHIP IS TO CONDUCT BOARD MEETINGS AND OTHER BUSINESS MEETINGS, SPECIFICALLY TO ADVANCE THE AGENDA OF ACCD. THE INITIATION FEES TO BELONG TO THIS BUSINESS CLUB WERE PAID BY ACCD AS ARE THE QUARTERLY DUES. IF A BUSINESS PURPOSE IS NOT SUBSTANTIATED BY THE EMPLOYEE UPON RECEIPT OF THE INVOICE, THE EMPLOYEE WILL PAY THE PERSONAL PORTION DIRECTLY TO THE BUSINESS CLUB OR WILL SUBMIT A PERSONAL CHECK TO ACCD. ALL EXPENSES ARE REVIEWED BY THE ACCOUNTING GROUP PRIOR TO PAYMENT. ONLY THE CEO AND EXECUTIVE VICE PRESIDENTS ARE ELIGIBLE FOR BUSINESS MEMBERSHIPS.
PART I, LINE 4A	DAVID RUPPERSBERGER RECEIVED SEVERANCE IN THE AMOUNT OF $62,050 PAID IN CALENDAR YEAR 2019.
PART I, LINE 7	THE INCENTIVE PROGRAM IS A COMPLEMENTARY COMPONENT OF THE ORGANIZATION'S ANNUAL PERFORMANCE MANAGEMENT PROGRAM WHERE PAYOUTS ARE BASED ON THE WEIGHTED RESULTS OF THE EMPLOYEE'S ANNUAL PERFORMANCE ON THE THREE KEY PERFORMANCE ELEMENTS (10% - ORGANIZATIONAL BEHAVIORS , 20% - EMPLOYEE COMPETENCIES, AND 70% GOALS). THE NUMBERS ARE MAPPED AGAINST AN APPROVED INCENTIVE AWARD RANGE MATRIX WHICH PROVIDES PAYOUT RANGES. THE INCENTIVE PAYOUT IS THEN TAKEN TO THE INDEPENDENT PERSONNEL AND COMPENSATION COMMITTEE FOR APPROVAL.

Schedule L (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions with Interested Persons

▶ Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.
▶ Attach to Form 990 or Form 990-EZ.
▶Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
ALLEGHENY CONFERENCE ON COMMUNITY DEVELOPMENT

Employer identification number
25-0965213

Part I **Excess Benefit Transactions** (section 501(c)(3), section 501(c)(4), and section 501(c)(29) organizations only).
Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1 (a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected? Yes	No

2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958. . . . . ▶ $

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization . . . . ▶ $

Part II **Loans to and/or From Interested Persons.**
Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization? To	From	(e) Original principal amount	(f) Balance due	(g) In default? Yes	No	(h) Approved by board or committee? Yes	No	(i) Written agreement? Yes	No
Total . . . . ▶ $												

Part III **Grants or Assistance Benefiting Interested Persons.**
Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance

Part IV **Business Transactions Involving Interested Persons.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	**(b)** Relationship between interested person and the organization	**(c)** Amount of transaction	**(d)** Description of transaction	**(e)** Sharing of organization's revenues?	
				Yes	**No**
(1) SUBSTANTIAL CONTRIBUTOR	SUBSTANTIAL CONTRIBUTOR	358,480	PROVIDES HEALTH INSURANCE PRODUCTS PROVIDED TO THE CONFERENCE FOR ITS EMPLOYEES AT FAIR MARKET VALUE.		No

Part V **Supplemental Information**

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

Return Reference	**Explanation**

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SCHEDULE O **(Form 990 or 990-EZ)**

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.
▶ Go to *www.irs.gov/Form990* for the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
ALLEGHENY CONFERENCE ON COMMUNITY DEVELOPMENT

Employer identification number
25-0965213

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 1	IN ADDITION TO ITS GENERAL AUTHORITY, THE EXECUTIVE COMMITTEE SHALL HAVE THE FOLLOWING SPE CIFIC RESPONSIBILITIES: (A)TO DEVELOP RECOMMENDATIONS TO THE BOARD OF DIRECTORS CONCERNING THE CORPORATION'S PRIORITIES, OBJECTIVES, POLICY POSITIONS AND BUDGET; (B)TO REVIEW AND R ECOMMEND TO THE BOARD OF DIRECTORS OF THE CORPORATION AND OF ITS AFFILIATED ORGANIZATIONS FOR APPROVAL THE ANNUAL BUDGET FOR SUCH ENTITIES AND TO MONITOR THE PERFORMANCE OF SUCH EN TITIES AND THE MANAGEMENT OF THEIR RESOURCES, INCLUDING ESTABLISHING THEIR INVESTMENT POLI CIES; (C)TO RECOMMEND TO THE BOARD OF DIRECTORS OF THE CORPORATION AND OF ITS AFFILIATED O RGANIZATIONS APPROPRIATE ALLOCATIONS OF CONTRIBUTIONS TO THE CORPORATION FOR THE SUPPORT O F THE THREE RIVERS: ONE FUTURE REGIONAL GROWTH INITIATIVE AND SUCH ADJUSTMENTS THERETO THR OUGHOUT THE CORPORATION'S FISCAL YEAR AS THE COMMITTEE DEEMS APPROPRIATE; (D)TO RECOMMEND TO THE BOARD OF DIRECTORS OF THE CORPORATION SUCH CHANGES TO THE "STRATEGY FOR CORPORATE P LEDGES" AS IT DEEMS APPROPRIATE; (E)TO RECOMMEND A SLATE OF NOMINEES FOR ELECTION AS DIREC TORS AND OFFICERS OF THE CORPORATION AT THE ANNUAL MEETING; (F)TO RECOMMEND A SLATE OF NOM INEES FOR ELECTION AS AT-LARGE EXECUTIVE COMMITTEE MEMBERS; (G)TO NOMINATE A CANDIDATE FOR ANY VACANCY ON THE BOARD OF DIRECTORS OR IN ANY OFFICE OF THE CORPORATION FOR CONSIDERATI ON BY THE BOARD OF DIRECTORS; (H)TO APPOINT THE CORPORATION'S REPRESENTATIVES ON THE AUDIT AND PERSONNEL & COMPENSATION COMMITTEES; (I)TO APPOINT THE PRIVATE SECTOR DIRECTORS AND T HE CHAIR OF THE BOARD OF DIRECTORS OF THE PRA AS PROVIDED FOR IN THE BYLAWS OF THE PRA; (J)TO APPOINT THE MANAGERIAL ENTITY DIRECTORS AND THE CHAIR OF THE PEL/SWPA AS PROVIDED FOR IN THE OPERATING AGREEMENT OF THE PEL/SWPA; (K)TO APPOINT THE CLASS B DIRECTORS AND THE CH AIR OF THE CHAMBER AS PROVIDED FOR IN THE BYLAWS OF THE CHAMBER; (L)TO SELECT AND DETERMIN E THE COMPENSATION OF THE CEO; AND (M)TO EXERCISE THE RESERVED POWERS OF THE CORPORATION O VER ITS AFFILIATES THE PRA, THE PEL/SWPA AND THE CHAMBER AS PROVIDED IN THE RESPECTIVE BYL AWS AND OPERATING AGREEMENT OF THOSE ENTITIES, INCLUDING THE EXCLUSIVE AUTHORITY TO APPROV E AMENDMENTS TO SUCH BYLAWS AND APPOINT THE CEO OF EACH AFFILIATE.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 2	THE CONFERENCE'S BOARD IS COMPOSED OF THE CHIEF EXECUTIVE OFFICERS OF THE REGION'S MOST SI GNIFICANT EMPLOYERS AND UNIVERSITIES DEDICATED TO IMPROVING THE ECONOMY AND QUALITY OF LIF E IN THE PITTSBURGH REGION. GIVEN THE COMPOSITION OF THE BOARD AND ITS DESIRE TO CREATE A COMPETITIVE BUSINESS CLIMATE AND MARKET THE REGION FOR INVESTMENT AND JOB CREATION, IT IS NOT UNUSUAL THAT A SIGNIFICANT NUMBER OF INDIVIDUALS SERVING AS A BOARD MEMBER ON THE CONF ERENCE MAY ALSO SERVE TOGETHER ON OTHER RELATED OR UNRELATED BOARDS. THE CONFERENCE PLACES RELIANCE ON THE BOARD MEMBERS' RESPONSES TO THE ANNUAL QUESTIONNAIRE IN IDENTIFYING SUCH BUSINESS RELATIONSHIPS. BUSINESS RELATIONSHIP: MR. WETHERBEE, MR. MOREHOUSE AND MR. BALL B USINESS RELATIONSHIP: MR. HOLMBERG AND MR. MALONE BUSINESS RELATIONSHIP: MR. MCQUADE AND M S. FLEMING BUSINESS RELATIONSHIP: MR. MALONE AND MR. DELIE BUSINESS RELATIONSHIP: MR. MALO NE AND MR. MOREHOUSE BUSINESS RELATIONSHIP: MR. MALONE, MR. HOWARD, MR. SCHOTT, MR. BROADH URST AND MR. BALL BUSINESS RELATIONSHIP: MS. PASHMAN, MS. SKELLEY, MS. CASEY, MR. MALONE, MR. OLIPHANT, MR. BARBOUR AND MR. MOREHOUSE BUSINESS RELATIONSHIP: MR. ENGEL, MR. MCGARRY AND MR. BURRITT BUSINESS RELATIONSHIP: MR. GALLAGHER, MR. BARBOUR AND MR. MOREHOUSE BUSINE SS RELATIONSHIP: MR. GALLAGHER, MR. ROMOFF AND MS. SHIPLEY BUSINESS RELATIONSHIP: MR. THOM AS, MS. SHIPLEY AND MR. O'BRIEN BUSINESS RELATIONSHIP: MR. BARBOUR, MS. PASHMAN AND MS. SK ELLEY

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	APPROXIMATELY ONE WEEK PRIOR TO FILING, THE GOVERNING BODY AND THE ORGANIZATION'S MANAGEME NT TEAM IS GRANTED ACCESS TO A SECURE LINK TO THE ORGANIZATION'S FTP SITE TO VIEW THE FINA L FORM 990. DURING THIS TIME, THE ORGANIZATION'S BOARD MEMBERS CAN VOLUNTEER ANY OBSERVATI ONS & COMMENTS ON THE RETURN BUT ARE NOT REQUIRED TO REVIEW OR FORMALLY APPROVE THE FORM 9 90 BEFORE OR AFTER IT IS FILED AS PART OF ITS BOARD ACTIVITIES. THE ORGANIZATION'S FINANCE GROUP FUNCTIONS IN TANDEM WITH THE MANAGEMENT TEAM DURING THE PREPARATION OF THE RETURN. THE AUDIT COMMITTEE CHAIR AS PART OF HIS/HER RESPONSIBILITIES WILL BE GIVEN COPIES OF THE DRAFT RETURNS FOR REVIEW. THE CHIEF EXECUTIVE OFFICER WILL MEET WITH THE CFO PRIOR TO THE CFO SIGNING THE FINAL RETURN AND WILL HAVE THE OPPORTUNITY TO REVIEW AND ASK QUESTIONS AS NECESSARY.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	ANNUALLY, EACH OFFICER, DIRECTOR AND KEY EMPLOYEE (O,D,KE) OF THE ORGANIZATION MUST COMPLETE A CONFLICT OF INTEREST DISCLOSURE STATEMENT AND AFFIRM THAT HE/SHE HAS READ, UNDERSTOOD AND HAS COMPLIED WITH THE POLICY. ALL RESPONSES TO THE DISCLOSURE STATEMENT ARE SUMMARIZED BY THE ACCOUNTING DEPARTMENT. THE CHIEF EXECUTIVE OFFICER OR HIS/HER DESIGNEE IS RESPONSIBLE FOR REVIEWING THE SUMMARY OF DISCLOSURE STATEMENTS SO THAT HE/SHE IS FAMILIAR WITH AND CAN REPORT POTENTIAL CONFLICTS TO THE BOARD. IN ADDITION, EACH INTERESTED PERSON MUST DISCLOSE THE EXISTENCE OF ANY FINANCIAL INTEREST OR OTHER INTEREST (AND ALL MATERIAL FACTS REGARDING SUCH INTEREST) AT THE TIME THE BOARD IS CONSIDERING A TRANSACTION THAT MAY INVOLVE A CONFLICT OF INTEREST OR THE APPEARANCE OF A CONFLICT. IF DETERMINED A CONFLICT OF INTEREST EXISTS, THE INTERESTED PERSON WILL RECUSE HIMSELF OR HERSELF FROM VOTING. IF THE GOVERNING BOARD HAS REASONABLE CAUSE TO BELIEVE A MEMBER HAS FAILED TO DISCLOSE ACTUAL OR POSSIBLE CONFLICTS OF INTEREST, IT WILL INFORM THE MEMBER OF THE BASIS FOR SUCH BELIEF. IF THE BOARD DETERMINES THE MEMBER HAS FAILED TO DISCLOSE AN ACTUAL OR POSSIBLE CONFLICT OF INTEREST, IT SHALL TAKE APPROPRIATE DISCIPLINARY AND CORRECTIVE ACTION. THE MINUTES OF THE BOARD WILL DISCLOSE THE ACTIONS TAKEN.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	THE ALLEGHENY CONFERENCE'S PERSONNEL AND COMPENSATION COMMITTEE IS RESPONSIBLE FOR ASSURIN G THE EFFICIENT IMPLEMENTATION AND ADMINISTRATION OF CONSISTENT, COMPETITIVE, AND WELL-COM MUNICATED PERSONNEL AND COMPENSATION POLICIES. THE COMMITTEE IS COMPOSED OF SEVEN MEMBERS SERVING ON THE BOARD OF DIRECTORS OF THE CONFERENCE AND ITS AFFILIATES. EACH MEMBER IS REQ UIRED TO BE INDEPENDENT AND FREE FROM ANY RELATIONSHIPS THAT MIGHT BE CONSIDERED A CONFLIC T OF INTEREST. AMONG THE MANY RESPONSIBILITIES OF THE PERSONNEL & COMPENSATION COMMITTEE, A FEW ARE SPECIFIC TO THE PROCESS OF DETERMINING FAIR COMPENSATION PRACTICES OF THE ORGANI ZATION: 1. REVIEW AND RECOMMEND TO THE CONFERENCE'S EXECUTIVE COMMITTEE ANY COMPENSATION C HANGES FOR THE CHIEF EXECUTIVE OFFICER, 2. OBTAIN APPROPRIATE ANALYSES AND STUDIES PREPARE D BY EXTERNAL SOURCES TO AID IN EVALUATING COMPENSATION, INCENTIVE, AND BENEFIT-PLAN LEVEL S, PRACTICES AND STRATEGIES TO ASSURE THEY ARE APPROPRIATE TO ATTRACT AND RETAIN QUALIFIED PERSONNEL. THE COMMITTEE IS EMPOWERED TO RETAIN A THIRD-PARTY CONSULTANT HAVING SPECIAL C OMPETENCE AS NECESSARY TO ASSIST THE COMMITTEE IN FULFILLING ITS RESPONSIBILITIES. THE IND EPENDENT CONSULTANT IS TYPICALLY ENGAGED ON A BI-ANNUAL BASIS TO PROVIDE ASSURANCE THAT PA Y PRACTICES ARE REASONABLE AND WITHIN THE RANGE OF TYPICAL MARKET PRACTICES. ASSURANCE CAN BE IN THE FORM OF INFORMATION OBTAINED FROM OTHER FORM 990 FILINGS OF SIMILAR ORGANIZATIO NS, AS WELL AS DETAILED COMPENSATION STUDIES WHICH COMPARE JOB DESCRIPTIONS OF SIMILAR POS ITIONS OF BOTH NONPROFIT AND FOR-PROFIT ORGANIZATIONS. COMPENSATION CHANGES ARE TAKEN TO T HE CONFERENCE'S EXECUTIVE COMMITTEE AND DISCUSSION TAKES PLACE VIA AN EXECUTIVE SESSION (I NCLUDING THE CEO FOR SENIOR MANAGEMENT AND EXCLUDING CEO FOR HIS/HER OWN COMPENSATION). AP PROVAL IS DOCUMENTED IN THE MINUTES OF THE COMMITTEES' MEETINGS.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	THE CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE NOT MADE READILY AVAILABLE TO THE PUBLIC VIA THE ORGANIZATION'S WEBSITE, AND REQUESTS FOR THIS INFORMATION ARE HANDLED ON A CASE BY CASE BASIS.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XII, LINE 2C:	THERE WERE NO CHANGES FROM PRIOR YEARS.

SCHEDULE R (Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
▶ Attach to Form 990.
▶ Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
ALLEGHENY CONFERENCE ON COMMUNITY DEVELOPMENT

Employer identification number
25-0965213

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) PGHQ2 LLC 11 STANWIX STREET FLOOR 17 PITTSBURGH, PA 15222 25-0965213	PROMOTION OF THE REGION	PA	0	0	ACCD

Part II **Identification of Related Tax-Exempt Organizations.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity? Yes	No
(1)PENNSYLVANIA ECONOMY LEAGUE OF GREATER PITTSBURGH 11 STANWIX STREET 17TH FLOOR PITTSBURGH, PA 15222 23-1352264	RESEARCH AND ANALYSIS	PA	501(C)(3)	170(B)(1) (A)(VI)	ACCD	Yes	
(2)PITTSBURGH REGIONAL ALLIANCE 11 STANWIX STREET 17TH FLOOR PITTSBURGH, PA 15222 25-1780438	PROMOTION OF THE REGION	PA	501(C)(3)	509(A)(3) - TYPE I	ACCD	Yes	
(3)GREATER PITTSBURGH CHAMBER OF COMMERCE 11 STANWIX STREET 17TH FLOOR PITTSBURGH, PA 15222 25-0399620	ADVOCACY	PA	501(C)(6)	N/A	ACCD	Yes	
(4)STRATEGIC REGIONAL DEVELOPMENTS INC 11 STANWIX STREET 17TH FLOOR PITTSBURGH, PA 15222 31-1766460	ECONOMIC INVESTMENT	PA	501(C)(3)	509(A)(3) - TYPE I	ACCD	Yes	
(5)GREATER PITTSBURGH CHAMBER OF COMMERCE POLITICAL ACTION COMM 11 STANWIX STREET 17TH FLOOR PITTSBURGH, PA 15222 25-0399620	POLITICAL ACTION COMMITTEE	PA	527	N/A	GREATER PITTSBURGH C OF C		No
(6)STRATEGIC INVESTMENT FUND INC 425 SIXTH AVENUE SUITE 580 PITTSBURGH, PA 15219 25-1774991	ECONOMIC INVESTMENT	PA	501(C)(4)	N/A	ACCD		No

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations? Yes	No	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes	No	(k) Percentage ownership
(1) STRATEGIC INVESTMENT FUND PARTNERS 535 SMITHFIELD STREET PITTSBURGH, PA 15222 25-1777423	PRIVATE SECTOR FINANCING	PA	N/A	RELATED	9,747	429,416		No			No	0.740 %
(2) POWER OF 32 SITE DEVELOPMENT FUND LLC 11 STANWIX STREET 17TH FLOOR PITTSBURGH, PA 15222 46-5227064	PRIVATE SECTOR FINANCING	PA	N/A	RELATED	7,992	65,009		No			No	50.000 %
(3) POWER OF 32 SITE DEVELOPMENT FUND LP 11 STANWIX STREET 17TH FLOOR PITTSBURGH, PA 15222 61-1734071	PRIVATE SECTOR FINANCING	PA	N/A	RELATED	30,882	1,327,296		No			No	3.800 %

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity? Yes	No

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

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	No
1 During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of **(i)** interest, **(ii)**annuities, **(iii)** royalties, or **(iv)** rent from a controlled entity . . .	1a		No
b Gift, grant, or capital contribution to related organization(s) . . .	1b	Yes	
c Gift, grant, or capital contribution from related organization(s) . . .	1c	Yes	
d Loans or loan guarantees to or for related organization(s) . . .	1d		No
e Loans or loan guarantees by related organization(s) . . .	1e		No
f Dividends from related organization(s) . . .	1f		No
g Sale of assets to related organization(s) . . .	1g		No
h Purchase of assets from related organization(s) . . .	1h		No
i Exchange of assets with related organization(s) . . .	1i		No
j Lease of facilities, equipment, or other assets to related organization(s) . . .	1j		No
k Lease of facilities, equipment, or other assets from related organization(s) . . .	1k		No
l Performance of services or membership or fundraising solicitations for related organization(s) . . .	1l	Yes	
m Performance of services or membership or fundraising solicitations by related organization(s) . . .	1m	Yes	
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) . . .	1n	Yes	
o Sharing of paid employees with related organization(s) . . .	1o	Yes	
p Reimbursement paid to related organization(s) for expenses . . .	1p	Yes	
q Reimbursement paid by related organization(s) for expenses . . .	1q	Yes	
r Other transfer of cash or property to related organization(s) . . .	1r		No
s Other transfer of cash or property from related organization(s) . . .	1s		No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

See Additional Data Table

(a) Name of related organization	**(b)** Transaction type (a-s)	**(c)** Amount involved	**(d)** Method of determining amount involved

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	

Part VII **Supplemental Information**

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

Return Reference	Explanation

Additional Data

Software ID:
Software Version:
EIN: 25-0965213
Name: ALLEGHENY CONFERENCE ON COMMUNITY DEVELOPMENT

Form 990, Schedule R, Part V - Transactions With Related Organizations

(a) Name of related organization	(b) Transaction type(a-s)	(c) Amount Involved	(d) Method of determining amount involved
PITTSBURGH REGIONAL ALLIANCE	B	3,336,896	CASH
PENNSLVANIA ECONOMY LEAGUE OF SOUTHWESTERN PA	B	992,993	CASH
GREATER PITTSBURGH CHAMBER OF COMMERCE	B	8,000	CASH
GREATER PITTSBURGH CHAMBER OF COMMERCE	L	1,277,523	CASH
GREATER PITTSBURGH CHAMBER OF COMMERCE	N	499,549	CASH
PITTSBURGH REGIONAL ALLIANCE	N	1,311,588	CASH
PENNSLVANIA ECONOMY LEAGUE OF SOUTHWESTERN PA	N	307,916	CASH
GREATER PITTSBURGH CHAMBER OF COMMERCE	O	651,539	CASH
PITTSBURGH REGIONAL ALLIANCE	O	1,720,750	CASH
PENNSLVANIA ECONOMY LEAGUE OF SOUTHWESTERN PA	O	404,226	CASH