(Rev January 2020)

Department of the Treasury

HTA

## **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

Open to Public

Inter	nal Revenu			THIS OF THE PROPERTY OF THE PR				100/000	mspection		
<u> </u>			endar year, or tax year beginning	7/1/2019	, and e			/30/2020	an number		
В	Check if a	applicable		idelphia Alliance for Capita	I & Technolog	ies	D Embio	er identificati	on number		
Ш	Address	change	Doing business as		1=			~~			
	Name cha	ange	Number and street (or P O box if mail is no	t delivered to street address)	Room/suite		23-30363		<del>_</del>		
_	ramo om	-1,go	200 South Broad Street		700		E Telepho	one number			
	Initial retu	ırn	City or town	State	ZIP code	,	(215) 790	-3646			
П	Final ætum	/terminated	Philadelphia	PA	19102-381						
二			Foreign country name Foreig	n province/state/county	Foreign postal	code	C C	annuata C	1,299,353		
Ш	Amended	i retum				_	G Gross r	eceipis a			
П	Application	n pending	F Name and address of principal officer			H(a) Is th	nis a group retu	m for subordinate	s? Yes X No		
_			Dean Miller 200 South Broad Street	, Philadelphia, PA 1910	2 🖊	H(b) Are	all subordin	ates included?	Yes No		
_	T			◀ (insert no ) 4947(a)(1		1		list (see instr			
<u>.</u>	rax-exer	mpt status		(Insert no ) 4947(a)(1	) 01	1			•		
J	Website	► www	w.philadelphiapact com		1	H(c) Gro	oup exemption	n number 🕨	<del></del>		
K	Form of	organization	X Corporation Trust Assoc	lation Other ►	LYe	ar of forma	ation 200	0 M State	of legal domicile PA		
	art I	Su	mmary		-						
	1		escribe the organization's mission of	most significant activitie	s Grea	ter Phil	adelphia /	Alliance for	Capital &		
ė	1		ogies (PACT)'s mission is to create								
an	1		ies in the information technology, (co			inia are:					
E				••••		- <b>f</b>		·			
Š	2		nis box ▶ ☐ if the organization di		or alsposea	or more	e man 257	1 - 1			
ڻ معا	3		of voting members of the governing					3	35		
ŝ	4		of independent voting members of t			•		4	33_		
ij	5		mber of individuals employed in cale		line 2a)	•		5	9		
ŧξ	6		mber of volunteers (estimate if nece		•			6	208		
LUCE Activities & Governance	7a		related business revenue from Part		•	•		7a	0		
	b	Net unre	elated business taxable income from	Form 990-T, line 39				7b	0		
4							Prior Year		Current Year		
<b>≥</b>	8	Contribu	itions and grants (Part VIII, line 1h)					0	0		
Revenu	9	Program	service revenue (Part VIII, line 2g)			2,1	77,005	1,297,095			
5€	10	Investm	ent income (Part VIII, column (A), lin	es 3, 4, and 7d) .				1,288	1,268		
, Œ	11	Other re	venue (Part VIII, column (A), lines 5	, 6d, 8c, 9c, 10c, and 11e	∍)			0	990		
	12	Total rev	enue-add lines 8 through 11 (must ed	ual Part VIII, column (A), li	ne 12)		2,1	78,293	1,299,353		
	13	Grants a	and similar amounts paid (Part IX, co	lumn (A), lines 1-3)				35,000	20,561		
;	14	Benefits	paid to or for members (Part IX, col	umn (A), line 4)				0	0		
g	15		other compensation, employee benefit		s 5–10)		ç	43,229	853,444		
ıse	16a		onal fundraising fees (Part IX, colum					0	0		
Expenses	b		ndraising expenses (Part IX, column		0	7			The second second		
Ж	17		penses (Part IX, column (A), lines 1				1,1	45,887	600,855		
	18		penses Add lines 13-17 (must equa		e 25) .			124,116	1,474,860		
	19		e less expenses Subtract line 18 fro	m line 12			· · ·	54,177	-175,507		
- i d		11010110	0.000 0.000 0.000 0.000	RECEIVED		Beginn	ing of Curr		End of Year		
Net Assets or	20	Total as	sets (Part X, line 16)	- INCIVE	ויי	<u> </u>		59,257	1,191,193		
Ass	21	Takal lia	hildren (Dent V. Ione 20)		၂၀၂			320,589	628,031		
Ş	22	Net ass	ets or fund balances. Subtract line 2	13 200 MAPO 0 5 2021				738,668	563,162		
	art II		nature Block	TOTAL LOCAL	181	1					
Lind	er nenalti	les of penuin	Lideclare that I have examined this return in	luding accombanying schedules	141	and to the	ne best of my	/ knowledge	····		
and	belief, it i	is true, corre	y, I declare that I have examined this return, no ct, and complete Declaration of preparer (other	r than officer) is based on all inf	ormation of which	h prepare	r has any kn	owledge			
			Dean Miller					1/21/21			
Si			Signature of officer		· · · ·		Dat	e			
He	re		Dean Miller		Pres	udent a	nd CEO				
			Type or print name and title		1100	nacht a	IIG OLO				
		Prin	t/Type preparer's name	Preparer's signature		Dat	e		PTIN		
Pa	id		Af a brahama a manna			"		Check	ıf		
	eparei	, L						self-employe	d		
	e Only		i's name				Firm's EIN	<b>_</b>			
US	e Om	, ,	's address ▶	<u>, , , , , , , , , , , , , , , , , , , </u>			Phone no				
NA-	v tha IF			about 2 (acc instruction					□ Vac □ 11-		
			s this return with the preparer showi	<del></del>	15)	· ·	<u> </u>	<u>·</u>	Yes No		
Fo	Papen	work Red	uction Act Notice, see the separate i	nstructions.					Form <b>990</b> (2019)		

$\neg$	-30	ヽつ	$\sim$	$\sim$	,

Form 9	Greater Philadelphia Alliance for Capital & Technologies	23-3036397	Page ∠
Pa	rt III Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III		X
1 ·	Briefly describe the organization's mission		-
•	Greater Philadelphia Alliance for Capital and Technologies (PACT)'s vision is to be a		
	for an arrival and the arrangement of the information to almost on a class		
	technology, and life sciences industries. PACT connects emerging growth companies, venture		
	investors, professional advisors, and technology-focused (continued on Schedule O)		
2	Did the organization undertake any significant program services during the year which were not listed on		
2	the prior Form 990 or 990-EZ?	Yes	X No
	If "Yes," describe these new services on Schedule O		<u> </u>
2	Did the organization cease conducting, or make significant changes in how it conducts, any program		
3	services?	X Yes	No
		Λ ies	
	If "Yes," describe these changes on Schedule O  Describe the organization's program service accomplishments for each of its three largest program services,	as magazirad by	
4	expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allo		
	the total expenses, and revenue, if any, for each program service reported	cations to others,	1
	the total expenses, and revenue, if any, for each program service reported		
	(Out to the first term of the	- <del>-</del>	
4a	(Code ) (Expenses \$ including grants of \$ ) (Revenue		
	entrepreneurial communities This day-and-a-half event offers both sponsors and attendees access		
	to emerging companies from the Mid-Atlantic region, networking opportunities with the movers and		
	registrants and is believed to have been the catalyst for billions of dollars in venture funding		
	and entrepreneurial success in the region		
41-	(Code ) (Function C ) (Poveries	- <del> </del>	٠ ,
4b	(Code ) (Expenses \$ including grants of \$ ) (Revenue	; Þ	)
	PACT Technology Executive Roundtables - These events bring together an elite group of ClOs, CTOs,		
	VPs, Directors of IT and independent consultants who provide high level strategic consulting,		
	attracting the best and brightest minds to discuss the latest technologies, trends and government		
	ınıtıatıves		
40	(Code ) (Expenses \$ including grants of \$ ) (Revenue		١
4c	DA OT Indicate: Carres - DA OT Indicate: Carres in a program person that deliver depolit in to		
	enterprise tech industry segments including Fintech and CyberSecurity Each program highlights a		
	enterprise tech industry segments including inflectifiand cyber security. Each program nighting in		
	specific area of interest in the industry segment and presents a panel of expert speakers for		
	conversation in addition to attendee networking		
			<b></b>
4d	Other program services (Describe on Schedule O )	0.)	
40	(Expenses \$ 0 including grants of \$ 0 ) (Revenue \$  Total program service expenses ▶ 0	0)	<del> </del>
4e	Total program service expenses ► 0		

Form, 990 (2019)
Part IV **Checklist of Required Schedules** 

			res	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		х
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		X
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		
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	Х	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		×
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		×
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		×
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V	10		х
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			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		Х
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		Х
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		Х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
12a	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X  Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	11f	X	
b	Schedule D, Parts XI and XII  Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes,"	12a		Х
	and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
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			
4-	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		_X
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		х
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		Х
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		Х
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		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
20-	If "Yes," complete Schedule G, Part III	19		<u> X</u>
	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a		X
21	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?  Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	20b		
	domestic government on Part IX, column (A), line 1? If "Yes " complete Schedule I, Parts I and II	21	X I	

Par	Checklist of Required Schedules (continued)			_
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	F	Yes	No
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	X	├
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<del>  ^</del> -
	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		<u> </u>
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	ļ	<u> </u>
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		<del> </del> -
D	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		
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	200		
	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		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key		,	ļ
	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	27		x
28	persons? If "Yes," complete Schedule L, Part III  Was the organization a party to a business transaction with one of the following parties (see Schedule L,	27		â
20	Part IV instructions, for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	If"Yes," complete Schedule L, Part IV	28a		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If			
20	If"Yes," complete Schedule L, Part IV  Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	28c 29		X
29 30	Did the organization receive more than \$25,000 in non-cash contributions <i>in Yes, complete Schedule in</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	29		<del>-^-</del> -
00	conservation contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
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		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	_		
24	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Х	į
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled			
	entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	_	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
.=	organization? If "Yes," complete Schedule R, Part V, line 2	36		<b></b> -
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	,,	:	х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and	37		_^-
30	19? <b>Note:</b> All Form 990 filers are required to complete Schedule O	38	х	
Par		100		
	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 8	-		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c	X ggn	(2019)
		1 01111	200	(5102)

ΓαI	Statements Regarding Other IRS Fillings and Tax Compliance (Continued)		Γ	٠					
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	7 *	Yes	No					
	Statements, filed for the calendar year ending with or within the year covered by this return  2a 9	,	, 0	-					
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	$\overline{\mathbf{x}}$						
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		,	-					
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X					
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b							
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,								
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X					
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?	<u>5a</u>		X					
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 <u>b</u>		X					
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c_		ļ					
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	_		,					
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		Х					
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	٠.							
7	gifts were not tax deductible?	6b		-					
7	Organizations that may receive deductible contributions under section 170(c).	·	•						
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	—- 7а							
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							
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d								
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e							
f									
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 10	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	,	<b>5</b> C					
10	Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12		,	-					
a b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b	ı	į,						
11	Section 501(c)(12) organizations. Enter	ŧ	1						
 а	Gross income from members or shareholders			·					
b	Gross income from other sources (Do not net amounts due or paid to other sources		,						
	against amounts due or received from them )								
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.		, JI						
а	Is the organization licensed to issue qualified health plans in more than one state?	13a							
	Note: See the instructions for additional information the organization must report on Schedule O								
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  [3b]	ł							
C	Enter the amount of reserves on hand	4.6-	= -						
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X					
b 15	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on 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	ا ـ ـ ا	ł	V					
	excess parachute payment(s) during the year	15	<del></del>	X_					
	If "Yes," see instructions and file Form 4720, Schedule N		<del></del>	<del>``</del>					
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X					
	If "Yes," complete Form 4720, Schedule O		[						

Part VI

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

Sect	ion A. Governing Body and Management									
	The second secon	<del></del>			Yes	No				
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	35							
	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 on Schedule O			ľ						
b	Enter the number of voting members included on line 1a, above, who are independent	1b	33	J	-					
2	Did any officer, director, trustee, or key employee have a family relationship or a business relations	hip with								
	any other officer, director, trustee, or key employee?		L-	2	X					
3	,,									
	supervision of officers, directors, trustees, or key employees to a management company or other person?									
4	7									
5	3 ···· · · · · · · · · · · · · · · · ·									
6	Did the organization have members or stockholders?			6		<u> </u>				
7a	Did the organization have members, stockholders, or other persons who had the power to elect or	appoint	١,	,		~				
h	one or more members of the governing body?  Are any governance decisions of the organization reserved to (or subject to approval by) members		_ <u> </u> -	7a		_X_				
b	stockholders, or persons other than the governing body?	1	١,	7b	ĺ	Х				
8	Did the organization contemporaneously document the meetings held or written actions undertaken	n during								
Ü	the year by the following	r duning								
а	The governing body?		[	3a	Х					
b	Each committee with authority to act on behalf of the governing body?			3b	X					
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re	eached								
	at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O			9		X				
Sect	on B. Policies (This Section B requests information about policies not required by the	Internal Revenu	e Co	de)						
					Yes	No X				
10a	Did the organization have local chapters, branches, or affiliates?									
b	If "Yes," did the organization have written policies and procedures governing the activities of such of			0b	1					
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?									
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before the copy of this Form 990 to all members of its governing body before the copy of this Form 990 to all members of its governing body before the copy of this Form 990 to all members of its governing body before the copy of this Form 990 to all members of its governing body before the copy of this Form 990 to all members of its governing body before the copy of this Form 990 to all members of its governing body before the copy of this Form 990 to all members of its governing body before the copy of this Form 990 to all members of its governing body before the copy of this Form 990 to all members of its governing body before the copy of t	re filing the form?	1	1a	X.	_				
b 42-	Describe in Schedule O the process, if any, used by the organization to review this Form 990		4	2-		Ÿ				
12a b	Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could g	ivo rico to conflicte?		2a 2b	+	<u>X</u>				
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If '		`   <del>''</del>	20	<del></del>					
·	describe in Schedule O how this was done	703,	1:	2c	1					
13	Did the organization have a written whistleblower policy?			_	$\overline{x}$					
14	Did the organization have a written document retention and destruction policy?		_		X					
15	Did the process for determining compensation of the following persons include a review and appro-	val by								
	independent persons, comparability data, and contemporaneous substantiation of the deliberation	-								
а	The organization's CEO, Executive Director, or top management official		1	5a	Х					
b	Other officers or key employees of the organization		1:	5b		Χ_				
	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 arrang	ement								
	with a taxable entity during the year?		10	6a		X				
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evalu		ł	4						
	participation in joint venture arrangements under applicable federal tax law, and take steps to safe	guard								
3 4	the organization's exempt status with respect to such arrangements?	<del></del>	110	6b						
	on C. Disclosure		-							
17 18	List the states with which a copy of this Form 990 is required to be filed PA Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990	and 990-T (Section	n 501	1(c)						
	(3)s only) available for public inspection. Indicate how you made these available. Check all that appropriately		J11 JU	· (U)						
		olaın on Schedule	O)							
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents,		•	<b>,</b>						
	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 b	ooks and records	•	<b>&gt;</b>						
	Finance Department	215-790-364	4			- <b></b> -				
	200 South Broad St , Suite 700, Philadelphia, PA 19102-3813									

23.	$\sim$	$\sim$	20	~
/ 3.	. KI	Inn		,

Form 990 (2019)	Greater Philadelphia	Λ

hiladelphia Alliance for Capital & Technologies

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#### 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

#### 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, and 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

	below dotted line)	ed attons w line)			compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations			
(1) Andrea Allon	1 00	<b>V</b>						0	004.070	445 505
Director (2) Poor Millor	40 00 40 00	Х	Н				$\dashv$	0	381,872	115,585
(2) Dean Miller Director and CEO	0 00	Х		х				286,122	0	50,247
(3) Dianne Strunk	40 00		Н	$\widehat{}$	-	-+	$\dashv$	200, 122		50,247
Vice President, Business Development	0 00	Х		x				152,846	o	24,199
(4) Laurie Actman	1 00						$\neg$	102,010		21,100
Director	0 00	Х						О	o	0
(5) Lloyd Adams	1 00		П				$\neg$			
Director	0 00	Х						0	o	0
(6) Allen Born	1 00									
Director	0 00	X						0	0	0
(7) Patrick Boyle	1 00									
Director	0 00	Χ						0	0	0
(8) Jonathan Brassington	1 00									
Director	0 00	Χ			_		_	0	0	0
(9) Dave Burkavage	1 00				- 1					
Director	0 00	Χ		_			_	0	0	0
(10) Joseph Callahan	1 00	.,						_	_	_
Director	0 00	Χ						0	0	0
(11) Andrew Cherry	1 00	.,		ļ						•
Director (42)	0 00	X	$\vdash$	$\dashv$		-+		0	0	0
(12) Sean Denham Director	1 00	_							] _	0
	0 00 1 00	Х	$\vdash$		$\dashv$		$\dashv$	0	0	0
(13) David Egan Director	0 00	х					ĺ	o	o	0
(14) Dennis Hancock	1 00	^_	$\vdash$		$\dashv$		$\dashv$			
Director	0 00	х		-			-	اه	o	0

(A) Name and title	(B) Average hours per week	box.	unle: er an	Pos heck ss pe	erson	than is boti	h an tee)	(D) Reportable compensation from the	(E) Reportable compensation from related		(F) mated ar of other ompensal	r
	(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	org	from the anization of organia	e n and
(15) Michael Harrington	1 00	.,										
Director  (16) Michael Heller	0 00	<u> </u>	-	├	┼—	ļ	<u> </u>	0	0	<del> </del>		
(16) Michael Heller Director	1 00 0 00	×		İ				О	o			C
(17) Ryan Hicke	1 00	<u> </u>			-		-			<del>                                     </del>		
Director	0 00	×						0	O			C
(18) Stephanie Humphrey	1 00											
Director	0 00	Х						0	<u> </u>			C
(19) Immanuel John	1 00											
Director	0 00	Х						. 0	0	<u> </u>		
(20) Doug Kingston	1 00								_			
Director	0 00	Х						0	0			C
(21) Marc Lederman	1 00				ļ.,					J		_
Director (22) Nate Lentz	0 00	Х		_				0	0			C
Director	0 00	х						0	0	,		0
(23) Brian Lobley	1 00			_								
Director	0 00	х						О	0	1		0
(24) Lorraine LoPresti	1 00											
Director	0 00	Х						0	0			0
(25) Jennifer Maher	1 00											
Director	0 00	Х						0	0	_		0
1b Subtotal								438,968	381,872	ļ	<u> 190</u>	0,031
c Total from continuation sheets to Part VII, Se d Total (add lines 1b and 1c)	ection A							0 438,968	0 381,872		100	0 0,031,
2 Total number of individuals (including but not lin	nited to those lis	ted a	hov	e) w	vho	recei	ved			l		1,031
reportable compensation from the organization		icu a	DO V	C) V	VI 10	COCI	vca	more than \$100	,000 01			2
											Yes	No
3 Did the organization list any former officer, dire	ctor, trustee, key	emp	loye	ee,	or h	ighes	t co	mpensated				
employee on line 1a? If "Yes," complete Sched	ule J for such ind	dıvıdu	al							3		X
4 For any individual listed on line 1a, is the sum of	of reportable com	pens	atio	n a	nd c	ther	com	pensation from				
the organization and related organizations grea	ter than \$150,00	)0? If	"Ye	s," (	com	plete	Scl	hedule J for sucl	ל			
ındıvıdual										4	Х	
5 Did any person listed on line 1a receive or accr	ue compensatioi	n fron	n ar	ıy u	nrel	ated	orga	anization or indiv	vidual			
for services rendered to the organization? If "Ye	es," complete Sc	hedu	le J	for	suc	h per	son			5	Ш	X_
Section B. Independent Contractors												
1 Complete this table for your five highest compe	•											
compensation from the organization Report co	mpensation for t	ne ca	ueno	Jar	yea	rena	ing '		e organization's			
(A) Name and business addr	ess							(B) Description of sen	vices (	(C Comper		
Garces Catering 742 College Ave	enue Haverford,	PA 19	904	1			Cat	tering			130	),980
												0
												0
												0
												0
2 Total number of independent contractors (include	=		thos	se li	stec	abo	ve)	who received				
more than \$100,000 of compensation from the	organization 🕨	•					1					

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

Page	1	of

Greater Philadelphia Alliance for Capital & Technologies

Employer identification number

23-3036397

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

Compensated Employees										
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average	Posi	tion (	т —		that ap		Reportable	Reportable	Estimated
	hours per week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
(26) Paul Marvel	1 00									
Director	0 00	X	_		L	<b> </b>	_	0	0	0
(27) Chris McNabb	1 00									
Director	0 00	-	_		├-		_	0	0	0
(28) Christopher Miller	1 00									•
Director (20)	0 00	Х	-		<del> </del>	<del> </del> -	-	0	. 0	0
(29) Sylvester Mobley	1 00 0 00	×						0	<u>,                                    </u>	0
Director (30) Doc Parghi	1 00	<del>  ^</del> -		<u> </u>	$\vdash$		<del> </del>		0	
Director	0 00	x						0	o	0
(31) Warren Pennington	1 00	<u> </u>					-			
Director	0 00	Х						o	o	0
(32) RoseAnn Rosenthal	1 00				_					
Director	0 00	Х				ļ		ol	0	0
(33) Sandra Stoneman	1 00									
Director	0 00	Х						o	o	0
(34) Harry Vitelli	1 00									
Director	0 00	Х						0	0	0
(35) Kevin Weirman	1 00									
Director	0 00	Х						0	0	
(36)										
(37)										
(38)										
(39)										
(40)										
(41)										
(42)										
(43)										
(44)										
(45)										
(46)										

Part VIII	Statement of	Revenue	

		Check if Schedule O co	ntains	s a respon	se or	note to any line i	n this Part VIII			
_	<del></del>						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
· ·	1a	Federated campaigns			1a	T 0	)			
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues			1b	C	1			
စ် ဋ	С	Fundraising events		•	1c	C				
ξ, Α	d	Related organizations			1d	C				
ਛੂ ਲ	е	Government grants (contrib	oution	s)	1e	C	1			
Sim	f	All other contributions, gifts	, grar	nts, and						
utlo er (		similar amounts not include	ed abo	ove	1f	C				
를 함	g	Noncash contributions inclu	ıded ı	n						
ont nd (	_	lines 1a-1f			1g	\$ 0				
O m	h	Total. Add lines 1a-1f				<b>&gt;</b>	0			
						Business Code				
eo	2a	Programs and Events				561499	866,065	866,0 <u>65</u>		
e ⊊	b	Membership Dues				561499	431,030	431,030		
en S	С						0			
ar lev	d						0			. —
Program Service Revenue	е						0			
Ę.	f	All other program service re	evenu	е		L	0			
	g	Total. Add lines 2a–2f				<b>•</b>	1,297,095		_	
	3	Investment income (including dividends, interest, and other similar amounts)				t, and	1,268			1,268
	A .	•	tov o	vomnt han	d pro	ocoods -	1,200			1,200
	4	Income from investment of Royalties	tax-e	xempt bon	u pro	oceeus -	0			
	5	Noyaliles		(ı) Rea	1	(ii) Personal				
	6a	Gross rents	6a	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			1			
	b	Less rental expenses	6b				1			
	C	Rental income or (loss)	6c		0	O	1			
	d	Net rental income or (loss)	L			<b>&gt;</b>	0			. <del></del>
	7a	Gross amount from		(ı) Securi	ties	(II) Other				
		sales of assets								
		other than inventory	7a		0	0				
en le	b	Less cost or other basis								
E		and sales expenses	7b		0		]			
Revenue	С	Gain or (loss)	7с		0	0			<u></u>	
	d	Net gain or (loss)		r		<u> </u>	0			
Othe	8a	Gross income from fundrais	sing							
Ĭ		events (not including \$		0.						
		of contributions reported or	ııne	1C)	0.					
	<b>h</b>	See Part IV, line 18 Less direct expenses			8a_ 8b	0				
	b	Net income or (loss) from fu	ındra	j nave panisi		<u> </u>	<del></del>			
	с 9а	Gross income from gaming		-		1				
	Ja	See Part IV, line 19	GOLIV	11100	9a	lo				
	b	Less direct expenses		ŀ	9b	0	4			
Ì	c	Net income or (loss) from g	amınd	ו activities ב		<b>•</b>	0			
		Gross sales of inventory, le		]						
		returns and allowances			10a	l o				
	b	Less cost of goods sold			10b	0	1			
	c	Net income or (loss) from s	ales d	of inventor		<b>&gt;</b>	0			
<u>0</u>		, ,				Business Code				
ᅙ	11a	Miscellaneous				561499	990	990		
ᇍ	b						0			
cellaneo Revenue	С					_	0			
Miscellaneous Revenue	d	All other revenue					0			
2	<u>e</u>	Total. Add lines 11a–11d				<u> </u>	990			<u> </u>
	12	Total revenue. See instruc-	tions			<u> </u>	1,299,353	1,298,085	0	1,268

following SOP 98-2 (ASC 958-720)

<u>Pa</u>	rt IX Statement of Functional Expenses				
Sect	ion 501(c)(3) and 501(c)(4) organizations must complete all	columns All other or	ganizations must d	complete column (A)	
	Check if Schedule O contains a response or note	e to any line in this Pa	rt IX		
	not include amounts reported on lines 6b, 7b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				•
	domestic governments See Part IV, line 21	20,561			
2	Grants and other assistance to domestic				<u> </u>
	individuals See Part IV, line 22	0			
3	Grants and other assistance to foreign				-
	organizations, foreign governments, and foreign	1			
	individuals See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			<u>-</u>
5	Compensation of current officers, directors,	444.070			
c	trustees, and key employees	441,678	<del></del>	0	
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	307,541		<del>                                     </del>	·
8	Pension plan accruals and contributions (include	- 007,071			
•	section 401(k) and 403(b) employer contributions)	13,477			
9	Other employee benefits	55,293			<u> </u>
10	Payroll taxes	35,455			
11	Fees for services (nonemployees)				
a	Management	0		_	
b	Legal	0			
c	Accounting	17,571	<del></del>		
d	Lobbying	50,611			
е	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	0			
g	Other (If line 11g amount exceeds 10% of line 25, column				
40	(A) amount, list line 11g expenses on Schedule O)	128,718		0	
12	Advertising and promotion	3,708			
13 14	Office expenses	11,574 11,647			
15	Information technology Royalties	0	<del></del>		
16	Occupancy	24,324	<u></u>		
17	Travel	18,040			·
18	Payments of travel or entertainment expenses	10,040	-		
	for any federal, state, or local public officials	o			
19	Conferences, conventions, and meetings	289,706			
20	Interest	0			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	10,092	0	0	0
23	Insurance	0			
24	Other expenses Itemize expenses not covered				
	above (List miscellaneous expenses on line 24e If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O)				
a	Credit card fees	18,360			
ь	Dues and subscriptions	10,315			<u> </u>
C		0			<del> </del>
d	All albor aurones - Manadania	0			
e 25	All other expenses Miscellaneous	6,189			
<u>25</u> 26	Total functional expenses. Add lines 1 through 24e  Joint costs. Complete this line only if the	1,474,860	0	0	0
20	organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation Check here	1			

Bailey

Balance Sheet

		Check if Schedule O contains a response or	note t	o any line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing			147,491	1	168,938
	2	Savings and temporary cash investments		Γ	578,076	2	579,235
	3	Pledges and grants receivable, net			0	3	0
	4	Accounts receivable, net			290,935	4	161,391
	5	Loans and other receivables from any current of	r forme	er officer, director,		-	
		trustee, key employee, creator or founder, subs					]
		controlled entity or family member of any of the			0	5	
	6	Loans and other receivables from other disqualif					
		under section 4958(f)(1)), and persons described	-		0	6	
ets.	7	Notes and loans receivable, net			0	7	0
Assets	8	Inventories for sale or use		0	8		
Ø	9	Prepaid expenses and deferred charges			42,755	9	281,629
	10a	Land, buildings, and equipment cost or	J		<u></u>		
		other basis Complete Part VI of Schedule D	10a	o			
	Ь	Less accumulated depreciation	10b	0	0	10c	0
	11	Investments—publicly traded securities			0	11	0
	12	Investments—other securities See Part IV, line	-	0	12	0	
	13	Investments—program-related See Part IV, line	0	13	0		
	14	Intangible assets		Ť	0	14	0
	15	Other assets See Part IV, line 11		F	0	15	0
	16	Total assets. Add lines 1 through 15 (must equi	al line :	33)	1,059,257	16	1,191,193
	17	Accounts payable and accrued expenses		212,610	17	104,895	
	18	Grants payable		0	18	0	
	19	Deferred revenue	107,979	19	523,136		
	20	Tax-exempt bond liabilities	i –	0	20	0	
	21	Escrow or custodial account liability Complete F	Part IV	of Schedule D	0	21	0
ģ	22	Loans and other payables to any current or form					
Liabilities		trustee, key employee, creator or founder, subsi					
ਙ		controlled entity or family member of any of thes			0	22	0
Ë	23	Secured mortgages and notes payable to unrela			0	23	0
	24	Unsecured notes and loans payable to unrelate		· · · · · · · · · · · · · · · · · · ·	0	24	0
	25	Other liabilities (including federal income tax, pa		·			
		parties, and other liabilities not included on lines	-				
		Part X of Schedule D	, ,, _	,, complete	o	25	0
	26	<b>Total liabilities.</b> Add lines 17 through 25		<u> </u>	320,589	26	628,031
		Organizations that follow FASB ASC 958, che	ak ba	V			
S		and complete lines 27, 28, 32, and 33.	CKITE				
<u>a</u>	27	Net assets without donor restrictions			738,668	27	
Ва	27	Net assets with donor restrictions		-	730,000	28	563,162
ğ	28		.EO ah	aak bara	<del>_</del>		0
Ī		Organizations that do not follow FASB ASC 9	156, CH	eck fiere			
Net Assets or Fund Balances	20	and complete lines 29 through 33.		-			
Ş	29	Capital stock or trust principal, or current funds		nt fund	0	29	0
SSE	30	Paid-in or capital surplus, or land, building, or ed			0	30	0
Ä	31	Retained earnings, endowment, accumulated in	come,	or other lunius	739 669	31	<u> </u>
Ne	32	Total net assets or fund balances		-	738,668	32	563,162
	33	Total liabilities and net assets/fund balances			1,059,257	33	1,191,193

Form **990** (2019)

If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits

the Single Audit Act and OMB Circular A-133?

Form **990** (2019)

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3b

#### SCHEDULE C (Form 990 or 990-EZ)

#### **Political Campaign and Lobbying Activities**

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

OMB No 1545-0047

Open to Public Inspection

Employer identification number

23-3036397

Department of the Treasury Internal Revenue Service

Name of organization

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.

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

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

Greater Philadelphia Alliance for Capital & Technologies

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

1				(c) or is a section 527					
		he organization's direct and indirect p	political campaign	activities in Part IV (see ins	structions for				
	definition of "political can	, ,							
2		y expenditures (see instructions)		▶ \$					
3		cal campaign activities (see instruction			<del></del>				
		the organization is exempt und							
1		excise tax incurred by the organization							
2		excise tax incurred by organization m	-						
3		ed a section 4955 tax, did it file Form	4720 for this year?	?	Yes No				
4a					Yes No				
	If "Yes," describe in Part		<del> </del>	<del></del>					
Pa	Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).								
1	Enter the amount directly activities	expended by the filing organization f	for section 527 exe						
2									
	527 exempt function activ		ŭ						
3									
	line 17b ▶ \$ <u>0</u>								
4	Did the filing organization	file Form 1120-POL for this year?			Yes No				
5		ses and employer identification numb							
		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								
					al organization, such				
		ntributions received that were prompt fund or a political action committee			al organization, such				
				(d) Amount paid from	al organization, such information in Part IV (e) Amount of political				
	as a separate segregated	fund or a political action committee	(PAC) If additiona	space is needed, provide	(e) Amount of political contributions received and promptly and directly				
	as a separate segregated	fund or a political action committee	(PAC) If additiona	(d) Amount paid from filing organization's	(e) Amount of political contributions received and promptly and directly delivered to a separate				
	as a separate segregated	fund or a political action committee	(PAC) If additiona	(d) Amount paid from filing organization's	(e) Amount of political contributions received and promptly and directly				
/4)	as a separate segregated	fund or a political action committee	(PAC) If additiona	(d) Amount paid from filing organization's	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If				
(1)	as a separate segregated	fund or a political action committee	(PAC) If additiona	(d) Amount paid from filing organization's	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If				
(1)	as a separate segregated	fund or a political action committee	(PAC) If additiona	(d) Amount paid from filing organization's	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If				
(2)	as a separate segregated	fund or a political action committee	(PAC) If additiona	(d) Amount paid from filing organization's	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If				
	as a separate segregated	(b) Address	(PAC) If additiona	(d) Amount paid from filing organization's	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If				
(2)	as a separate segregated	fund or a political action committee	(PAC) If additiona	(d) Amount paid from filing organization's	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If				
(2)	as a separate segregated	(b) Address	(PAC) If additiona	(d) Amount paid from filing organization's	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If				
(2)	as a separate segregated	(b) Address	(PAC) If additiona	(d) Amount paid from filing organization's	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If				

9011	codie C (1 01111 330 01 330-EZ) 2013					Page 4
Ρ	art II-A Complete if the organiz under section 501(h)).	ation is exempt	under section 5	01(c)(3) and file	d Form 5768 (ele	
	Check ► if the filing organization name, address, EIN, e	expenses, and sh	nare of excess lol	bbying expenditu	res)	oup member's
<u>B</u>	Check ▶ if the filing organization			troi provisions ap	рріу	т
	Limits on I (The term "expenditures	_obbying Expendi s'' means amounts		)	(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence	public opinion (gra	assroots lobbying)			
b	Total lobbying expenditures to influence	a legislative body	(direct lobbying)			
С	Total lobbying expenditures (add lines 1	a and 1b)			0	
d	Other exempt purpose expenditures					C
е	Total exempt purpose expenditures (add	d lines 1c and 1d)			0	
f	Lobbying nontaxable amount Enter the	amount from the fo	ollowing table in bot	:h	İ	
	columns	. <u> </u>			0	
	If the amount on line 1e, column (a) or (b	) is: The lobbying	ng nontaxable amou	unt is:		•
	Not over \$500,000	20% of the a	amount on line 1e			ı
ļ	Over \$500,000 but not over \$1,000,000		us 15% of the excess			
ļ	Over \$1,000,000 but not over \$1,500,000		us 10% of the excess			
- }	Over \$1,500,000 but not over \$17,000,000		us 5% of the excess of	over \$1,500,000		
	Over \$17,000,000	\$1,000,000				
g	Grassroots nontaxable amount (enter 2	•			0	0
h	Subtract line 1g from line 1a If zero or I				0	0
!	Subtract line 1f from line 1c If zero or le	•			0	0
J	If there is an amount other than zero on	either line 1h or lin	ie 1i, did the organiz	zation file Form 4/2	0 reporting	П., П.,
	section 4911 tax for this year?			·· <del>·</del>		Yes No
	(Some organizations that made Se	a section 501(h)	period Under Sec election do not hav tructions for lines	e to complete all o	of the five columns	below.
	Lob	bying Expenditure	es During 4-Year A	veraging Period		-
	Calendar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	<b>(d)</b> 2019	(e) Total
2a	Lobbying nontaxable amount	0	0	0	0	0
b	Lobbying ceiling amount (150% of line 2a, column(e))	<u>-</u>				0
С	Total lobbying expenditures	0	0	0	0	0
d	Grassroots nontaxable amount	0	0	0	0	0
е	Grassroots ceiling amount (150% of line 2d, column (e))					0
f	Grassroots lobbying expenditures	0	0	0	0	0

Schedule C (Form 990 or 990-EZ) 2019

0

	Greater Philadelphia Alliance for Capital & Technologies 2: dule C (Form 990 or 990-EZ) 2019	3-3036	397	Page
	rt II-B Complete if the organization is exempt under section 501(c)(3) and has NO (election under section 501(h)).	T filed	For	
For	each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed	(;	a)	(b)
	cription of the lobbying activity	Yes	No	Amount
1 a	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 Volunteers?			*
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?  Media advertisements?			
q	Mailings to members, legislators, or the public?	<u> </u>		
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 i	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?  Other activities?			
j	Total Add lines 1c through 1i			
2a b	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? 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			
þ	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			
Par —	t III-A Complete if the organization is exempt under section 501(c)(4), section 501 501(c)(6).	(c)(5), 	or s	ection
1 2 3 Par	Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior yet III-B  Complete if the organization is exempt under section 501(c)(4), section 501 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes."	(c)(5),		
1	Dues, assessments and similar amounts from members	—-т	1	431,030
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).	•		401,000
a	Current year		2a	50,611
þ	Carryover from last year	ļ	2b	
¢	Total		2c	50,611
3 4	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 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		3	64,655
	lobbying and political expenditure next year?	ļ	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	1	5	
Part				<del></del>
	de the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group e instructions), and Part II-B, line 1 Also, complete this part for any additional information			

,	Grea	ter Philadelphia Alliance for Capital & Technologies	23-3036397	
		orm 990 or 990-EZ) 2019	Pag	e 4
Part	IV _	Supplemental Information (continued)	<del></del>	
				<b></b> -
			<del></del>	· <b>-</b>
			····	
	~			
		·		
	<b></b> -			
	<b></b> -			

#### SCHEDULE D (Form 990)

**Supplemental Financial Statements** 

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

OMB No 1545-0047

2019

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name	of the organization		E	mpioyer ident	incation number
Grea	ter Philadelphia Alliance for Capital & Technologies				23-3036397
Par	Organizations Maintaining Donor Adv	ised Funds or Othe	er Similar Fund	ls or Acco	ounts.
	Complete if the organization answered "				
		(a) Donor advised fi	unds	(b) F	unds 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 a	dvisors in writing that th	ne assets held in d	lonor advise	ed
	funds are the organization's property, subject to the				Yes No
6	Did the organization inform all grantees, donors, a	<del>-</del>	_	ids can be ι	used
	only for charitable purposes and not for the benefit				
	conferring impermissible private benefit?		•		Yes No
Par	Conservation Easements.		<del></del>		
	Complete if the organization answered "	Yes" on Form 990. F	Part IV. line 7		
1	Purpose(s) of conservation easements held by the				
•	Preservation of land for public use (for example, r			of a historica	ally important land area
			=		
	Protection of natural habitat	L	Preservation c	or a certified	historic structure
	Preservation of open space				
2	Complete lines 2a through 2d if the organization he	eld a qualified conserva	ition contribution ir	n the form o	
	easement on the last day of the tax year				Held at the End of the Tax Year
а	Total number of conservation easements			2a	
b	Total acreage restricted by conservation easement			2b	
С	Number of conservation easements on a certified			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	f			
3	Number of conservation easements modified, trans	sterred, released, exting	guisnea, or termina	ated by the	organization during
_	the tax year				
4	Number of states where property subject to conse			andling of	
5	Does the organization have a written policy regard		ing, inspection, na	anding of	☐ Yes ☐ No
_	violations, and enforcement of the conservation ea				
6	Staff and volunteer hours devoted to monitoring, inspec	ting, nandling of violations	s, and emorcing con	iservation ea	sements during the year
7	Assurant of supposes property in magnitude and property	handling of walstians, on	d onforcing concon	ation eacom	ante during the year
7	Amount of expenses incurred in monitoring, inspecting,	nandling of violations, an	a emorcing conserv	ation easein	ents during the year
0	Does each conservation easement reported on line	a 2/d) above satisfy the	requirements of s	ection 170/	h)(4)(R)(i)
8		e z(u) above satisty the	requirements or s	iection 170(	Yes No
9	and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports	conservation easement	e in ite revenije ar	nd evnense	
3	balance sheet, and include, if applicable, the text of				
	organization's accounting for conservation easeme		gariization s imanc	iai statemei	R3 triat describes trie
Par	III Organizations Maintaining Collection		Treasures or O	ther Simi	lar Assets
ı aı	Complete if the organization answered "			tiloi oilii	141 7100010.
	If the organization elected, as permitted under FAS			tatement ar	nd halance sheet
ıa	works of art, historical treasures, or other similar a				
	public service, provide in Part XIII the text of the fo				
h	If the organization elected, as permitted under FAS				
U	works of art, historical treasures, or other similar a				
	public service, provide the following amounts relati		nonion, caddation	, 5, ,050410	
	(i) Revenue included on Form 990, Part VIII, line	-			<b>▶</b> \$
		•			► \$ ► \$
2	(ii) Assets included in Form 990, Part X If the organization received or held works of art, his	etorical treasures, or et	ner similar assets :	for financial	dain provide the
2	The state of the s			ioi illialicial	gain, provide the
_	following amounts required to be reported under F.	AGD AGG 300 TEIRING L	O 111696 1161119		▶ \$
	Revenue included on Form 990, Part VIII, line 1				<b>\$</b>
D	Assets included in Form 990, Part X				<b>₽</b> Ψ

•	dule D (Form 990) 2019 Greater Philadelphia A						23-303		Page <b>2</b>
Par									ed)
3	Using the organization's acquisition, acces	ssion, and othe	records,	check any	of the follow	ving tha	it make significan	t use of its	
	collection items (check all that apply)			٦.					
а	Public exhibition		d [_	Loan or	exchange p	rogram			
b	Scholarly research		e	Other					
С	Preservation for future generations								
4	Provide a description of the organization's XIII	collections and	l explaın l	how they fu	urther the org	ganızatı	on's exempt purp	ose in Part	
5	During the year, did the organization solici assets to be sold to raise funds rather than							Yes	☐ No
Par	IV Escrow and Custodial Arrange	ments.						<u></u>	
	Complete if the organization ansi		n Form	990, Part	IV, line 9, o	or repo	rted an amoun	t on Form	
	990, Part X, line 21					·	<u> </u>		
1a	Is the organization an agent, trustee, custo	dian or other in	itermedia	ry for conti	ributions or c	other as	sets not		
	included on Form 990, Part X?							Yes	No
b	If "Yes," explain the arrangement in Part X	III and complete	e the follo	wing table		_			
	_					<u> </u>		Amount	
C	Beginning balance					1			0
d	Additions during the year					1			
e f	Distributions during the year Ending balance					1			0
	-								
2a	Did the organization include an amount on						-	Yes	ĭ No
b	If "Yes," explain the arrangement in Part X	III Check here	if the exp	lanation ha	as been prov	ided on	Part XIII		<u></u> .
Part			_						
	Complete if the organization ansi					<del></del> 1		1	
4 -	<b>—</b>	a) Current year	(b) Pr	nor year	(c) Two years		(d) Three years back		
1a b	Beginning of year balance Contributions	0		0	·	0		0	0
C	Net investment earnings, gains,	<del></del>			· <b>—</b> ——		<del></del>		
·	and losses								
d	Grants or scholarships								
е	Other expenditures for facilities	~							
	and programs								
f	Administrative expenses								
g	End of year balance	0		. 0		0		0	0
2	Provide the estimated percentage of the ci	ırrent year end	balance i	(line 1g, co	lumn (a)) he	ld as			
а	Board designated or quasi-endowment	• 	<u>%</u>						
b	Permanent endowment	<u></u>							
С	Term endowment ▶ %		201						
3a	The percentages on lines 2a, 2b, and 2c s Are there endowment funds not in the post			on that are	hold and ad	ministo	rad for tha		
Ja	organization by	session of the C	rgariizalii	on that are	neia ana aa	IIIIIIISte	rea for the	Ye	s No
	(i) Unrelated organizations							3a(i)	3 110
	(ii) Related organizations							3a(ii)	
b	If "Yes" on line 3a(ii), are the related organ	ızatıons listed a	s require	d on Sched	dule R?			3b	
4	Describe in Part XIII the intended uses of t							L	
art					<del></del>			_	
	Complete if the organization answ		n Form !	990, Part	IV, line 11a	See	Form 990, Part	X, line 10	
	Description of property	(a) Cost or ot			or other basis		Accumulated	(d) Book	value
		(investm	ent)	(0	other)		depreciation		
1a	Land		0	<del> </del>	0				0
b	Buildings		0	1	0	[	0		0

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10c)

Leasehold improvements

Equipment

Other

C

d

Part VII	Investments—Other Securities. Complete if the organization answered	"Ves" on Form 990	Part IV line 11h See Form	990 Part X line 12
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of v Cost or end-of-year	aluation
(1) Financia	al derivatives	0		
(2) Closely	held equity interests	0		
(3) Other				
(C)				<u>.                                    </u>
		<u> </u>		<u> </u>
<u>(E)</u>				
(F)		<u> </u>		
(G)		<u> </u>		<del></del>
(H)				
	n (b) must equal Form 990, Part X, col (B) line 12) ▶	0		
Part VIII	•			
	Complete if the organization answered	<u>"Yes" on Form 990,</u>	Part IV, line 11c See Form 9	990, Part X, line 13
	(a) Description of investment	(b) Book value	(c) Method of v Cost or end-of-year	
(1)				
(2)				
(3)				· · · · · · · · · · · · · · · · · · ·
			·	
(5)		<del> </del>		
(6)				
(8)		<u> </u>		
(9)	n /h) must aqual Form 000 Part V ani /P) line 121			
Part IX	n (b) must equal Form 990, Part X, col (B) line 13)  Other Assets.	0		
rait ix	Complete if the organization answered	"Ves" on Form 990	Part IV line 11d See Form (	000 Part X line 15
	(a) Descr		raitiv, interita decironna	(b) Book value
(1)	(4,000)			(2) 2001 100
(2)	<del></del>			
(3)				
(4)		· · · · · · · · · · · · · · · · · · ·		
(5)				
(6)				
(7)			<del></del>	
(8)			<del></del>	
(9)			<del></del>	
	ımn (b) must equal Form 990, Part X, col (B) l	ine 15)	<b>•</b>	C
Part X	Other Liabilities.			<u> </u>
	Complete if the organization answered	"Yes" on Form 990,	Part IV, line 11e or 11f See	Form 990, Part X,
	line 25			
1.	(a) Descrip	tion of liability		(b) Book value
(1) Federa	Income taxes			C
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Colu	ımn (b) must equal Form 990, Part X, col (B) li	ne 25)	<u> </u>	0
2. Liability fo	r uncertain tax positions. In Part XIII, provide the te	xt of the footnote to the o	rganization's financial statements the	nat reports the

organization's liability for uncertain tax positions under FASB ASC 740 Check here if the text of the footnote has been provided in Part XIII

 $\left[ \mathbf{x}\right]$ 

Schedule D (Fo	rm 990) 2019	Greater Philadelphia Alliance for Capital & Technologies	23-3036397 Page <b>5</b>
Part XIII	Supplem	ental Information (continued)	
- wite Aim	оприс	01144	· · · · · · · · · · · · · · · · · · ·
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	<b></b>		
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	-		

## SCHEDULEI (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Part I

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

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

▶ Attach to Form 990.

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OMB No 1545-0047

**Employer identification number** 

**2** 

× Yes 23-3036397 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and General Information on Grants and Assistance Greater Philadelphia Alliance for Capital & Technologies

the selection criteria used to award the grants or assistance?

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) Campus Philly 1500 JFK Blvd , Suite 411 Philadelphia	20-1518941	501 (c) (3)	25,000	0			Support of Global Identity Project
(2)							
(3)							
(4)							
(5)							
(9)							
(7)							
(8)							
(6)							
(10)							
(11)							
(12)							
ŀ	1 501(c)(3) and g	overnment organiza	itions listed in the line 1	table		•	
3 Enter total number of other organizations listed in the line 1 table	rganizations liste	ed in the line 1 table					0

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

Schedule I (Form 990) (2019)

Page 2

(f) Description of noncash assistance Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b), and any other additional information Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. (e) Method of valuation (book, FMV, appraisal, other) Part I Line 2 The organization keeps a record of all grants and assistance and also of all requests. Requests are viewed by the (d) Amount of noncash assistance (c) Amount of cash grant Part III can be duplicated if additional space is needed. President and a decision is made based on the intended use of the funds (b) Number of recipients (a) Type of grant or assistance Part IV Part III က 2 9

#### SCHEDULE J (Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

**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.

2019

OMB No 1545-0047

Open to Public Inspection

Employer identification number

23-3036397 Greater Philadelphia Alliance for Capital & Technologies Part I **Questions Regarding Compensation** No Yes Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items First-class or charter travel Housing allowance or residence for personal use Payments for business use of personal residence Travel for companions Tax indemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (such as maid, chauffeur, chef) If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a? 2 Indicate which, if any, of the following the 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 Approval by the board or compensation committee Form 990 of other organizations 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 4a Receive a severance payment or change-of-control payment? Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b X Participate in, or receive payment from, an equity-based compensation arrangement? 4c If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any 5 compensation contingent on the revenues of 5a The organization? Any related organization? 5b If "Yes" on line 5a or 5b, describe in Part III For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of The organization? 6a Any related organization? 6b If "Yes" on line 6a or 6b, describe in Part III For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III 7 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III 8 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in

Regulations section 53 4958-6(c)?

Greater Philadelphia Alliance for Capital & Technologies

Schedule J (Form 990) 2019

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 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 instructions, on row (ii) Do not list any individuals that aren't listed on Form 990, Part VII

		(B) Brookdown of	(B) Breakfact of Miles 1000 Miles 1000 Miles	uoitesaeamos Ja				
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive	(III) Other reportable	(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
Dean Miller	Ξ	223,622	62,500	0	10,796	40,658	337,576	0
1 Director and CEO	Ξ	0		0	0	0	0	0
Dianne Strunk	ε	122,846		0	6,268	18,655	177,769	0
2 Vice President, Business Developme		0			0	0	0	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Andrea Allon	l	0	0	0	0		0	0
3 Director	(ii)	232,353	75,00	74,519	92,355	24,514	498,741	63,439
	Θ							
4	(ii)							
	(1)							
S	(ii)							
	(!)		39					
9	(ii)							
	Θ							
7	(ii)							
	€							
8	(ii)							
	(9)							
6	Ξ	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		1		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
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10	<b>(E)</b>							
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11	(ii)							
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	€		1	11 11 11 11 11 11 11 11 11 11 11 11 11	1			
13	Ξ							
	Ξ							
14	Ξ							
	Ξ						1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	11 11 11 11 11 11 11 11 11 11 11 11 11
15	<u>(E</u>							
	Ξ	1		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	11 11 11 11 11 11 11 11 11 11 11 11 11
16	⊞							

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

#### Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047

2019

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

23-3036397 Greater Philadelphia Alliance for Capital & Technologies Form 990, Part I, Line 1 (continued from Form 990, page 1) clean technology and life sciences industries, manifesting in a competitive edge for the Greater Philadelphia region Form 990, Part III, Line 1 (continued from Form 990, page 2) corporations to network, develop relationships, pursue business opportunitites, and market and promote their business to foster growth and innovation Form 990, Part VI, Section B, Line 11 The organization's Form 990 is prepared and reviewed by the staff of the Chamber of Commerce for Greater Philadelphia. In addition it is reviewed by PACT's CEO and provided to the Board of Directors prior to filing Form 990, Part VI, Section B, Line 15 The compensation of the CEO is determined by the Executive Committee of the Board of Directors Form 990, Part VI, Section B, Line 19 No documents are made available to the Public Form 990, Part XI, Line 9 Fraction of Cents Form 990, Part VI, Section A, Line 2 Directors Michael Heller and Marc Lederman have a business relationship Form 990, Part III, Line 2 As a result of the 2020 Covid-19 pandemic and resulting government restrictions on public gatherings, PACT converted all of its traditionally in-person events to virtual programs delivered electronically. In addition, two of PACT's large-scale events were delayed from spring 2020 to fall 2020 and as a result were not accounted for in the fiscal year ending June 30, 2020 PACT continues to deliver all programming virtually and it is expected that in-person events will return at some level in later 2021

Schedule O (Form 990 or 990-EZ) (2019)	Page <b>2</b>
Name of the organization	Employer identification number
Greater Philadelphia Alliance for Capital & Technologies	23-3036397
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SCHEDULE R (Form 990) Department of the Treasury Internal Revenue Service

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

Related Organizations and Unrelated Partnerships

▶ Attach to Form 990.

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Open to Public

OMB No 1545-0047

Employer identification number

23-3036397 Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33. Greater Philadelphia Alliance for Capital & Technologies Name of the organization Part I

	(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)						
(2)	(2)					
(3)	(8)					
(4)						
(5)						
(9)						
Part II	Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year	Complete if the organiza tax year	tion answered "Ye	s" on Form 990,	Part IV, line 34, b	ecause it had

Olle Ol Illore Terated tax-exempt organizations until the tax year	uillig the tax year						
(a)	(p)	(c)	(p)	(e)	<b>(</b> )	(B)	
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign country)	Exempt Code section	Public charity status (if section 501(c)(3))	rolling /	Section 512(b)(13) confrolled entity?	2(b)(13) led
						Yes	٥ N
(1) Chamber of Commerce for Greater Philadelphia 23-0969030	Business League						
200 South Broad Street, Suite 700 Philadelphia, PA 19102		PA	501 (c)(6)		N/A		×
(2) GPCC Resources, Inc 23-3097773	Promote trade and						
200 South Broad Street, Suite 700 Philadelphia, PA 19102	commerce	PA	501 (c)(6)		N/A	•	×
(3) CCGP Regional Foundation 23-2653189	Education and Cultural						
200 South Broad Street, Surte 700 Philadelphia, PA 19102	Development	PA	501 (c)(3)	11, Type 1	N/A		×
(4) Philadelphia Volunteer Lawyers for the Arts 23-2066564	Legal referral services						
200 South Broad Street, Suite 700 Philadelphia, PA 19102		PA	501 (c)(3)	7	GPCC Reg. Found	×	
(5) Eastern Techonology Council Foundation 23-2976799	Education and		i				
200 South Broad Street, Suite 700 Philadelphia, PA 19102	workforce development PA	PA	501 (c)(3)	PF	N/A		×
(9)							
(7)	-						
							:

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

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 23-3036397 Schedule R (Form 990) 2019

(k) Percentage • ownership									τ	(1) Section 512(b)(13) controlled entity?	Yes No					_			Schedule R (Form 990) 2019
(J) General or managing partner?	Yes No						_		າ 990, Pa	(h) Percentage Secownership	×								ule R (Forn
(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)									d "Yes" on Forn	Share of Percend-of-year assets own									Sched
(h) Disproportionate allocations?	Yes No								answere year	(f) Share of total income									
(g) Share of end-of- year assets									ganization ing the tax										
Share of total Sh				_					te if the or r trust duri	(e) Type of entity (C corp, S corp, or trust)									
					<u> </u>				t. Comple poration o	(d) Direct controlling entity		_							
(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)									n or Trus d as a con										
(d)  Direct controlling entity									Corporations treated	(c) Legal domicile (state or foreign country)									
				<u>.</u>					able as a	activity									
(c) Legal domicile (state or foreign country)									ions Tax	(b) Primary activity							:		
(b) Pnmary activity									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	ed organization									
(a) Name, address, and EIN of related organization									Identification of IV, line 34, because	(a) Name, address, and EIN of related organization									
E BON		(1)	(2)	(3)	(4)	(5)	(9)	(7)	Part IV	ž		(1)	(2)	(3)	(4)	(5)	(9)	(7)	

Schedule R (Form 990) 2019

ran v	Iransactions with Related Organizations. Complete it the organization answered the office 390, Part IV, line 34, 335, or 35	res on ron	n agu, mari iv, iine	34, 330, or 30			•
Note:	Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule				Yes	S No	· 
·		elated organiz	ations listed in Parts I	-\/\-		$\vdash$	<u>.</u>
ď	Receipt of (i) interest. (ii) annuities. (iii) rovalities, or (iv) rent from a controlled entity	)		•	19	×	7
Φ	Gift, grant, or capital contribution to related organization(s)				9	×	
ر	Gift grant or cantal contribution from related organization(s)				1	×	l
7			•		2 3	( >  -	١
5	Loans or loan guarantees to or for related organization(s)			•	B P	<b>\</b>	1
Φ	Loans or loan guarantees by related organization(s)....................................				1e	×	-
4	Dividends from related organization(s)				=	×	7
•					= ,	( ;  -	I
D	Sale of assets to related organization(s)				1g	×	
ح	Purchase of assets from related organization(s)				<b>+</b>	×	
	Exchange of assets with related organization(s)		-	•	i=	×	l
	Lease of facilities, equipment, or other assets to related organization(s)				;=	×	1
•							-
¥	Lease of facilities, equipment, or other assets from related organization(s)					×	7
: <b>-</b>	Defermance of contract or fundaciena or fundaciena colintatione for related organization(c)			•	=	:  <i>&gt;</i>	
-	Ferroritiarice of services of meriod sind of joing assistances for related organization (s)		•		= .	<b>(</b>  :	1
Ε	Performance of services or membership or fundraising solicitations by related organization(s)				Ja L	×	- 1
_	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n X		1
0	Sharing of paid employees with related organization(s)				10	×	
						-	_
۵	Reimbursement baid to related organization(s) for expenses				1 of		1
	( )			•	₽		
5	Remindusement pard by related organization(s) for expenses				ы	<u> </u>	
						; 	٦
_	Other transfer of cash or property to related organization(s)				1	× :	J
S	Other transfer of cash or property from related organization(s)				1s	×	ا
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	ils line, includi	ng covered relationsh	ps and transaction	thresholds	è.	
	(a) Name of related organization  ty	(b) Transaction type (a—s)	(c) Amount involved	(d) Method of determining amount involved	(d) ning amount in	volved	
							1
(1)							
Ś			-				
7							1
(3)							
							1
<b>Ð</b>							-
(5)							
9							

# Part VI

Unrelated Organizations Taxable as a Partnership. Complete of 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

							2					-	
(a)	(a)	(0)		(e)		(L)	(6)	(r)		(E) ?	3		(¥)
Name, address, and EiN of entity	Primary activity	(state or foreign country)	rredominant income (related, unrelated, excluded from tax under sections 512-514)	Are all partners section 501(c)(3) organizations?		Share of total income	share of end-of-year assets	alloca	usproportonate allocatrons?	amount in box 20 of Schedule K-1 (Form 1065)	General or managing partner?		Percentage ownership
				Yes	٥			Yes	٤	•	Yes	٥ ٧	
(1)													
(2)													
(3)													1
(4)													
(5)													
(9)													
(2)													
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(11)													
(12)													
(13)	-				-								
(14)				-	_								
(15)													
(16)													

Schedule R (For	m 990) 2019	Greater Philadelphia Alliance for Capital & Technologies	23-3036397	Page <b>5</b>
		ental Information		
Part VII	Provide a	dditional information for responses to questions on Schedule R. See instruc	ctions	
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