Form 990

Department of the Treasury

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.

2017 Open to Public Inspection

> X Yes No Form 990 (2017

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Α	For th	e 2017 d	calendar year, or tax year begir	ıning , and	ending				_					
В	Check if a	applicable	C Name of organization					ר	Employe	rıdentıfi	cation numb	er		
	Address	change	ange' Philadelphia Community Corps											
\vdash	Name ch	2000	Doing business as Phill	27-4576805										
닏	<u>'</u>	ŭ	Number and street (or P O box if mail i				Room/suite		Telephon					
L	Initial retu		5200 Unruh Avenue		12	<u> 15</u>	<u>316-</u>	<u>-2454</u>						
	Final retu		City or town, state or province, country,					ł						
\Box	Amended		Philadelphia	PA 19135				G	Gross rece	eipts\$	22	<u>6,325</u>		
జ	! !		F Name and address of principal officer				M/m) to the		far a	baadaaa		X No		
Ш	Application	on pending	Gregory Trainor	c .			H(a) Is this	a group i	emin ioi s	UDOIGIIIA	tes? Yes	X No		
			5200 Unruh Aver	ue Section J			H(b) Are al	l subordi	nates incli	uded?	Yes	∐ No		
			Philadelphia	PA 1913	35	_	If	"No," att	ach a list	(see insi	ructions)			
, 1	Tax-exe	mpt status	X 501(c)(3) 501(c) () ◀ (insert no) 4947(a)(1) or	527	3							
, J	Website		ww.philadelphiac				H(c) Group	exempt	on numbe	er 🕨				
K		organization		ociation Other		1,	ear of formation				e of legal domi	cile		
_	Part I		ımmary			l								
<u>z</u>	1		escribe the organization's mission	or most significant activities										
တ္ဆမ္			organization provid			rams ti	hat emo	ower	und	erse	rved			
題に			zens to revitalize								_,			
No Statute Issue			dings and salvaging			of acc.		9	Vac	u				
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80	2		is box I if the organization di	· 1	isposed or r				1 1	Λ				
ග්	3 1		of voting members of the governing	·	$\Delta / \Delta \cdot$	HEU	EIVED	רטר	3	0				
ctivities &	4		of independent voting members o					RS-OSC	4	0				
; ;	5		mber of individuals employed in ca		e 2a) \$258	FEB S	26 2021	١٨	5	0				
Äc			mber of volunteers (estimate if ned	•	[20]		-	Œ	6	75				
2	7a	Total unr	elated business revenue from Pa	rt VIII, column (C), line 12	1 1		F-81 117		7a			0		
_	ь	Net unrel	lated business taxable income fro	m Form 990-T, line 34	STATE	$_{\mu}$ QG $_{ u}$	EN, U	. pratty my	7b			0		
	ļ					EIVE	, Prior	Year			Current Yea			
ē	8 (tions and grants (Part VIII, line 1h		. !\	FIVE	<u> </u>	11,	5/5			<u>,771</u>		
Revenue	9 1		service revenue (Part VIII, line 2g		ALL?	1 202	\				8	<u>,579</u>		
ě	10	Investme	ent income (Bart All) to (A), I	ines 3, 4, and 7d)	(""" -	1 4 202	<u> </u>					0		
Œ	11 (Other rev	vertue (San Mit Politicia) (A), lines	5, 6d, 8c, 9c, 10c, and 11e)	ा उस्त	2000		<u>53,</u>				<u>, 025</u>		
	12	Total rev	enue - add lines-8-through 11 (mi	ust equal Part VIII, column (A	1), line (2)	TOM	າ ————	64,	933		<u> 116</u>	<u>, 375</u>		
	13 (Grants ai	nd simyla (ampuns 273124) (Part IX,	column (A), lines 1–3)		DC14						0		
	14 1	Benefits i	paid to or for members (Part IX, c	olumn (A), line 4)								0		
$\Xi_{\mathbf{s}}$	15 :	Salanes,	other compensation and puppee b	enefits (Part IX, column (A),	lines 5–10)							0		
3 202 per ses	16ai	Professio	onal fundraising free Part IX, colu	ımn (A), line 11e)			-					0		
က ရွိ	⊢ Ь.	Total fund	draising expenses (Part IX, colum	ın (D), line 25) ▶		0 [
⊃ ñ			penses (Part IX, column (A), lines			Ī		61,	218		51	,525		
>	1	•	penses Add lines 13-17 (must eq	·	25)	• •		61,			51	,525		
MAY	ŀ		less expenses. Subtract line 18 f	• •	,	<u> </u>			715			,850		
ر اه	<u> </u>	tovonac	Tiods experieds. Subtract line 101	1011 1110 12			Beginning of				End of Year			
Net Assets or	S 20 -	Total ass	ets (Part X, line 16)			Ī		76,			80	,904		
Ass	21		ulities (Part X, line 26)		•	·			994			,168		
ž.	22 1		ts or fund balances Subtract line	21 from line 20	٠				647			,736		
	Part II		gnature Block	, , , , , , , , , , , , , , , , , , , ,	· · · · · · · · · · · · · · · · · · ·			<u>· - /</u> .	<u> 1</u>			7.00		
4 			perjury, I declare that I have examine	d this salum including accomps	nyana sehadu	lac and state	monte and t	a tha h	at of m	kooude	dee end b	aliaf itia		
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c:			ignature of officer						Date					
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		<u> </u>	ype or print name and title							 _	DTI:			
Б.	اد:	₽nnt/Type	e preparer's name	Preparer's signature			Date		Check	\square	PTIN			
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Us	e Only									-				
		Firm's ad	dress					Phone	e no					

See Statement 1

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

For Paperwork Reduction Act Notice, see the separate instructions.

	Statement of Program Sc	ervice Accomplishments	-45/6805	Page 2
		ins a response or note to any line in	this Part III	; ; X
	cribe the organization's mission	d		
citizer	ganization provid ns to revitalize	des career training pr blighted neighborhood	s by deconstructing	underserve
buildir	ngs and salvaging	g materials for reuse.	s by deconstructing	vacant
			•	
	janization undertake any significa 990 or 990-EZ?	ant program services during the year which we	ere not listed on the	
•	escribe these new services on Sc	hedule O		Yes X No
		nake significant changes in how it conducts, a	ny program ,	
services?			,	Yes X No
	escribe these changes on Schedu	ale O e accomplishments for each of its three larges	et nrogram sanucas, as maasurad hy	
		organizations are required to report the amour	· · · ·	
	penses, and revenue, if any, for		,	
- 10-1-	\ /F			
a (Code [.]) (Expenses \$	including grants of \$) (Revenue \$)
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(Code) (Expenses \$	including grants of\$) (Revenue \$)
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(Code) (Expenses \$	including grants of \$) (Revenue \$)
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	ram services (Describe in Schedi	ule ())	· · · · · · · · · · · · · · · · · · ·	
Other pres-	am services ruescribe in Schedl	(O عال		
Other progr (Expenses		cluding grants of \$) (Revenue \$	}

ADMO

Part IV	Checklist of	of Required	Schedules
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- 1 'Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A
- 2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?
- 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
- 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
- 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
- 6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I
- 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II
- 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III
- 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
- 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
- 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, 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
 - 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
 - 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
 - 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
 - e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X
 - 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
- 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII
 - **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
- 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E
- 14a Did the organization maintain an office, employees, or agents outside of the United States?
- 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
- 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
- 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
- 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)
- 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
- 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

 	Vas	No
	162	NO
1 2	_X_	
2		X
3		<u>x</u>
4		X
5		X
6		<u>x</u>
7		x
8		X
9		х
10		X
11a	x	
11b		x
11c		<u>X</u>
11d	х	X
11e		
11f		X
12a		<u>x</u>
12b		X
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٠. د		v
14b		X
15		X
16		X
17		X
18		<u>X</u>
 19	000	x
Forr	n 990	(2017)

	•		Yes	
20a [`]	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		<u> </u>
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		<u>X</u>
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		i	
	\$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		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year		l	
	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		İ	
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or		1	
	disqualified persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		<u>X</u>
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	- 1		
	Schedule L, Part IV	28b		<u>X</u>
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,		ļ	
	Part I .	31		<u>X</u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	- 1	Ì	
	complete Schedule N, Part II	32		X
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		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		X
35a	· · · · · · · · · · · · · · · · · · ·	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	l		
	• • • • • • • • • • • • • • • • • • • •	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable	1		
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		X
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,		1	
	Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and	ļ		
	19? Note. All Form 990 filers are required to complete Schedule O.	38		X
			$\alpha \alpha \alpha$	

•	Check if Schedule O contains a response or note to any line in this Pa	nrt V			
				Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b			ł
С	Did the organization comply with backup withholding rules for reportable payments to vendors and		7		
	reportable gaming (gambling) winnings to prize winners?		1c		X
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			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax re	eturns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction	ons)	,		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedu	ıle O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or oth	er 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 Financi	al Accounts			
	(FBAR)				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year	?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter trans	saction?	5b		X
С	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	d the		!	
	organization solicit any contributions that were not tax deductible as charitable contributions?		6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contrib	utions or			1
	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	or goods			
	and services provided to the payor?		7a		 -
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		ļ
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it	was			
	required to file Form 8282?	1 = . 1	7c		
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		7e		 -
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit co		7f		├─-
g	If the organization received a contribution of qualified intellectual property, did the organization file		7g		 -
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, airplanes, or other vehicles, did the organization of cars, boats, airplanes,		7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintaining donor advised funds at a substant the use of the second funds.	ained by the		1	
^	sponsoring organization have excess business holdings at any time during the year?		8	<u> </u>	
9	Sponsoring organizations maintaining donor advised funds. Did the appropriate graphication make any taxable distributions under section 49662		00		
a b	Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9a 9b		
10	Section 501(c)(7) organizations. Enter		30	-	
а	Initiation fees and capital contributions included on Part VIII, line 12	10a	1		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	1		
11	Section 501(c)(12) organizations. Enter		7	Ì	
a	Gross income from members or shareholders	11a	1		1
b	Gross income from other sources (Do not net amounts due or paid to other sources		1	}	
-	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 F		12a	i	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	126			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		1		
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				
ь	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			
С	Enter the amount of reserves on hand	13c	7		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Scheen	dule O	14b		
DAA	•		For	n 99 0	(2017)

Pa	irt VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, a	nd fo	r a "N	Vo"
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S	See ir	struc	tions.
	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion 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			
	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			
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		X
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		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
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		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue	e Co	de.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
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	X	
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	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		X
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
Ū	describe in Schedule O how this was done	12c		х
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by	-'7		
13	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		х
b	Other officers or key employees of the organization	15b		X
U	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	130		
160	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
IOa	with a taxable entity during the year?	46-		х
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	16a		
Q	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	· · · · · · · · · · · · · · · · · · ·	466		
<u></u>	organization's exempt status with respect to such arrangements?	16b		
	tion C. Disclosure	-		
17	List the states with which a copy of this Form 990 is required to be filled PA			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)			
	available for public inspection. Indicate how you made these available Check all that apply			
	Own website Another's website X 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			
	regory Trainor 5200 Unruh Avenue Section J			
Pl	niladelphia PA 19135 215	-31	<u>6-2</u>	<u>454</u>

										 -			
Form 990 (2017) Philadely	obia Com		n i +		c	~~~	. ~	27-457	6005	2 7			
										Page 7 ted Employees, and			
' Independent C		, ט	CCU	01 3	', '	1 43		s, itey Employees,	inghest compensa-	ica Employees, and			
-		ns a	resi	oor	nse	or r	note	e to any line in this P	art VII				
								est Compensated Emplo					
1a Complete this table for all person organization's tax year													
 List all of the organization's cu compensation Enter -0- in columns 									ons), regardless of amoun	t of			
List all of the organization's cu		•		-				•	• •				
 List the organization's five cui who received reportable compensationganization and any related organization. 	ion (Box 5 of F									ee)			
 List all of the organization's fo \$100,000 of reportable compensation 	on from the org	anıza	ation a	and	any	/ rela	ed o	organizations					
 List all of the organization's forganization, more than \$10,000 of List persons in the following order in compensated employees, and formed 	reportable com ndividual truste	pensa es or	ation	fror	n th	e org	anız	ration and any related orga	anizations	e			
Check this box if neither the org	·		ated	org	anız	ation	cor	npensated any current off	cer, director, or trustee				
(A)	(B)	Ť		(0				(D)	(E)	(F)			
Name and Title	Average hours per week (list any hours for	erage rs per (do no eek box, ur t any officer			Position (do not check more than one box, unless person is both an officer and a director/trustee)					an ee)	Reportable compensation from the organization	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	,	organization and related organizations			
(1) Gregory Trainor							٩	,					
	40.00							`					
Executive Director	0.00	11		X		1		54,042	0	0			
(2)Jordan Rushie													
,	1.00												
Secretary	0.00	 		X		\vdash		0	0	0			
(3) Bob Beaty	1 00					1 1							
Board Member	1.00 0.00			x				0	0	0			
(4) Stephen Arrivel	0.00	1 1	 	^		+							
(4) O Cephen Alliver	1.00												
Treasurer	0.00			x				0	0	0			
(5) Jeff George			$\vdash \vdash$	- <u>-</u>	<u> </u>	\Box							
	1.00					1 1							

Board Member

(6) Carl Stanton

Board Member
(8) Archna Sahay

Board Member

(9)

(10)

(11)

DAA

(7) Kathryn Martinez

Vice President

0.00

1.00

0.00

1.00

0.00

1.00

0.00

X

X

X

X

0

0

0

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0

0

0

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0

Form **990** (2017)

DAA

Form **990** (2017)

Pa	art VII Section A. Officer	s, Directors, Tr	uste	es,	Key	Em	ploy	ees	s, and Highest Compens	ated Employees (continu	Jed)		. ago
	` (A) Name and title	(B) (C) Average Position hours per (do not check more than week box, unless person is both officer and a director/trust						n an	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	E a con	n	
		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)	(W-2/1099-MISC)	org an	rom the ganization id related anizations	•
	•				,								
												.	
													_
										•			<u>-</u> .
									54.040				
1b c	Sub-total Total from continuation sho	note to Part VII	Sád	tion				>	54,042				
d	Total (add lines 1b and 1c)	cets to t art vii,	Jet					>	54,042				
2	Total number of individuals (ir reportable compensation from				tho	se li	sted	abo	ive) who received more that	an \$100,000 of		-	
												Ye	s No
3	Did the organization list any fe employee on line 1a? If "Yes,"									sated		3	x
4	For any individual listed on lin	e 1a, is the sum	of re	epor	table	cor	nper	ısatı	on and other compensatio				 -
	organization and related organization	nizations greate	r tha	n \$1	50,0	00?	If "Y	es,*	complete Schedule J for s	such		4	X
5	Did any person listed on line 1									or individual			v
Sect	for services rendered to the o tion B. Independent Contract		res,	COI	ripie	ie Si	cried	uie	J for such person			5]	X
1	Complete this table for your fi	ve highest comp											
	compensation from the organ	(A) business address	omp	ens	ation	ior	ine c	arer	ndar year ending with or wi	thin the organization's tax (B) tion of services	year	(C) Compen	
	Name and	business address	-	•					Descrip	lion of services		Compen	satron
	·												
	· · · · · · · · · · · · · · · · · · ·												
		·							:				
•												<u>, </u>	
	Total number of independent	contractors (==-1		a h	l not	lum.	004 4	2.66	oca listed shave)b-				
2	Total number of independent of received more than \$100,000									0			

	rt VI	、Check if Schedule	O con	tains a respons				
	•				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from lax under sections 512-514
nts	1a	Federated campaigns	1a					
Section	b	Membership dues	1b					
Ag	С	Fundraising events	1c					
	d	Related organizations	1d	. <u> </u>				
S.E	e	Government grants (contributions)	1e	·····				
Program Service Revenue Contributions, Gifts, Grants	f	All other contributions, gifts, grants,				,		
룔틟		and similar amounts not included above	1f	46,771				
E S	g	Noncash contributions included in lines 1	a-1 <i>i</i> \$	46,771	1			,
<u>ರೈಕ</u>	h	Total. Add lines 1a-1f			46,771			
Ž				Busn Code				
ě	2a	Other Revenue			8,579	8,579		
9	b							
Ξ̈	С							
S	d						-	
ran	е							
§ S		All other program service revo	enue	<u> </u>	0.570			
		Total. Add lines 2a–2f		<u> </u>	8,579			
	3	Investment income (including	dividen	ds, interest,			i	
		and other similar amounts)						
	4	Income from investment of ta	x-exemp	ot bona proceeds				
	5	Royalties	<u>1</u>	(ii) Personal				
	٠.	(i) Real		(ii) Personal				
		Gross rents		·				
		Less rental exps Rental inc or (loss)			1			
		Net rental income or (loss)		•				
	7a Conse amount from		(II) Other					
			<u> </u>	_				
	h	Less cost or other				- CA	•	
		basis & sales exps						
	c	Gain or (loss)			1			
		Net gain or (loss)		>	1			
au	!	Gross income from fundraising ev	rents					,
Ž	-	(not including \$						
eve		of contributions reported on line 1	c)					
ď.		See Part IV, line 18	а					
Other Revenue	ь	Less direct expenses	b []	1		
0	С	Net income or (loss) from fur	draising	events · 🕨				
	1	Gross income from gaming activity						
		See Part IV, line 19	a					
	b	Less direct expenses	ьĹ					
	С	Net income or (loss) from gain	ming act	ivities				
	10a	Gross sales of inventory, less	s					
		returns and allowances	a	170,97	_			
	b	Less cost of goods sold	b∟	109,950				
	С	Net income or (loss) from sal	les of inv	ventory >	61,025	61,025		
		Miscellaneous Revenue		Busn Code	-			
	11a			<u> </u>	-			
	b							
	C							
	d	All other revenue		L		 		
	e	Total. Add lines 11a–11d		.	116 275	60 604		
	12	Total revenue. See instructi	ons	<u> </u>	116,375	69,604	0	0

4)

Part IX Statement of Functional Expenses
Section 501(c)(3) and 501(c)(4) organizations must complete all

Seci	Check if Schedule O contains a res			ompiete column (A)	
	not include amounts reported on lines 6b, 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		САРСІЛОСЯ	general expenses	Схрензез
'	<u> </u>]			
•	and domestic governments See Part IV, line 21				
2	Grants and other assistance to domestic	1			
•	Individuals See Part IV, line 22				
3	Grants and other assistance to foreign		1		
	organizations, foreign governments, and foreign	1			
4	Individuals. See Part IV, lines 15 and 16 Benefits paid to or for members				
-	·		.		
5	Compensation of current officers, directors,				
•	trustees, and key employees Compensation not included above, to disqualified			 	
6					
	persons (as defined under section 4958(f)(1)) and		,		
_	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	· · · · · · · · · · · · · · · · · · ·			
٥,	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)		,		
•					
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
a	Management .	4,333	4,333		
b	Legal	1,946	1,946		
<u>.</u> م	Accounting	1,940	1,940		
đ	Lobbying Professional fundraising services See Part IV, line 1	7			
f	Investment management fees	\'			<u> </u>
' ~	Other (If line 11g amount exceeds 10% of line 25, column				
y	(A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion	1,548	1,548	-	
13	Office expenses	9,279	9,279		
14	Information technology	J 72.5	3,2,3		
15	Royalties				
16	Occupancy	21,030	21,030		···········
17	Travel	1,773	1,773		
18	Payments of travel or entertainment expenses		1 1	•	
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20.	_	775	775		
21	Payments to affiliates	,,,,	,	· · · · · · · · · · · · · · · · · · ·	•
22	Depreciation, depletion, and amortization	4,274	4,274		
23	Insurance	6,567	6,567		
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)	<u> </u>			
а	,				
b	•				
c	·				
d	I				
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	51,525	51,525	0	0
26	Joint costs. Complete this line only if the				
	organization reported in column (B) joint costs from a combined educational campaign and		,		
	fundraising solicitation. Check here				
	following SOP 98-2 (ASC 958-720)				

Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 17,664 11,731 Cash--non-interest bearing 1 2 2 Savings and temporary cash investments 3 3 Pledges and grants receivable, net 4 4 Accounts receivable, net Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 5 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L 6 Assets Notes and loans receivable, net 49,950 8 50,020 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or 17,400 other basis Complete Part VI of Schedule D 10a 4,180 14,960 10b 10c 13,220 b Less accumulated depreciation Investments—publicly traded securities 11 12 12 Investments—other securities See Part IV, line 11 13 Investments—program-related See Part IV, line 11 13 14 14 Intangible assets 15 15 Other assets See Part IV, line 11 76,64180,904 Total assets. Add lines 1 through 15 (must equal line 34) 16 4,994 17 Accounts payable and accrued expenses 17 18 18 Grants payable 19 Deferred revenue 19 20 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 22 Loans and other payables to current and former officers, directors, Liabilities trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 23 23 Secured mortgages and notes payable to unrelated third parties 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 14,168 4,994 26 Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117 (ASC 958), check here $\blacktriangleright |\overline{\mathbf{X}}|$ and Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 71,647 66,736 27 Unrestricted net assets 27 28 Temporarily restricted net assets 28 29 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 32 Retained earnings, endowment, accumulated income, or other funds 71,647 33 Total net assets or fund balances 33 76,641 80,904 Total liabilities and net assets/fund balances

Form 990 (2017)

SCHEDULE A (Form 990 or 990-EZ)

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

Open to Public Inspection

Name of the organization

Philadelphia Community Corps

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

Employer identification number 27-4576805

Schedule A (Form 990 or 990-EZ) 2017

Г	arti	Reas	son for Public Charic	y Status (All organization	ns mus	t compi	ete triis part.) See iristri	uctions.
he	orga			use it is (For lines 1 through 1				(
1	Ц			sociation of churches describe				$\mathcal{O}(\mathcal{O})$
2		A school de:	scribed in section 170(b)(1)(A)(ii). (Attach Schedule E (F	orm 990 o	or 990-EZ	`	
3		A hospital or	r a cooperative hospital\sen	vice organization described in	section 1	70(b)(1)(A)(iii).	(
4		A medical re		ed in conjunction with a hospit	al describ	ed in sec	tion 170(b)(1)(A)(iii). Enter t	ne hospital's name,
5		An organiza	tion operated for the benefit	of a college or university own	ed or ope	rated by a	governmental unit described	ın
_			(b)(1)(A)(iv). (Complete Pa			4==41.44		
6				governmental unit described in				
7			tion that normally receives a section 170(b)(1)(A)(vi). (i substantial part of its support Complete Part II.)	from a go	overnmen	tal unit or from the general pu	blic
8				170(b)(1)(A)(vi). (Complete F	•			
9	Ш	or university		scribed in section 170(b)(1)(a of agriculture (see instruction				
10	X	receipts from support from	n activities related to its exe i gross investment income a	(1) more than 33 1/3% of its sumpt functions—subject to certaind unrelated business taxable 30, 1975 See section 509(a)	ain except e income (tions, and less secti	(2) no more than 33 1/3% of on 511 tax) from businesses	
11				exclusively to test for public s			•	
12	П	_	=	exclusively for the benefit of,	-		, , , ,	rposes
		of one or mo	re publicly supported organ	izations described in section that describes the type of supp	509(a)(1)	or sectio	n 509(a)(2). See section 509	9(a)(3).
	а			perated, supervised, or control				-
		the supp	orted organization(s) the po	wer to regularly appoint or ele complete Part IV, Sections	ct a major			<u>.</u>
	b	_	= :	upervised or controlled in coni		th its sum	norted organization(s), by hav	una
	-	control o	r management of the suppo	rting organization vested in the e Part IV, Sections A and C.	e same pe			
	С	Type III	functionally integrated. A	supporting organization opera	ated in cor			d with,
	d			structions). You must comple				-ahan(a)
	d			ed. A supporting organization are organization are organization generally must				
				must complete Part IV, Sect				C11C35
	е	Check th	is box if the organization re	ceived a written determination	from the	RS that it		
	f		mber of supported organiza		orang org	anneation		
				he supported organization(s)		•	•	
(1)		e of supported	(ii) EIN	(iii) Type of organization	(IV) Is the	organization	(v) Amount of monetary	(vi) Amount of
.,		anization	, ,	(described on lines 1-10	listed in yo	ur governing	support (see	other support (see
				above (see instructions))	docu	ment?	instructions)	instructions)
					Yes	No		
(A)								
(B)								
(C)					 			
				•	-			
(D)		······································						
(E)								
ota	1							

che	dule A (Form 990 or 990-EZ) 2017 Phi	ladelphia	a Communi	ty Corps		-4576805	Page 2
	art II Support Schedule for O	rganizations	Described in	Sections 170	(b)(1)(A)(iv) a	nd 170(b)(1)(A)(vi)
	(Complete only if you che	cked the box	on line 5, 7, or	r 8 of Part I or	if the organizat	tion failed to qu	alify under
	Part III. If the organization	n fails to qualif	y under the te	sts listed belov	w, please comp	plete Part III)	
	tion A. Public Support					/	
ale	ndar year (or fiscal year beginning in) 🕨	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Ciffe execute contributions and						
'	Gifts, grants, contributions, and membership fees received (Do not				/		
	include any "unusual grants ")	· · · · · · · · · · · · · · · · · · ·			/		· · · · · · · · · · · · · · · · · · ·
2	Tax revenues levied for the				/		
2	organization's benefit and either paid						
	to or expended on its behalf						
3	The value of services or facilities						
3	furnished by a governmental unit to the						
	organization without charge			/			
4	Total. Add lines 1 through 3			/_			
5	The portion of total contributions by						
	each person (other than a governmental unit or publicly						
	supported organization) included on			1/			
	line 1 that exceeds 2% of the amount			Y			
	shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4		L	<u> </u>	<u> </u>		
	ndar year (or fiscal year beginning in)	(a) 2013	(b)/2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
	• • • • •	(a) 2013	(0)/2014	(6) 2013	(u) 2010	(e) 2017	(I) Total
7	Amounts from line 4	_ ·	/				
8	Gross income from interest, dividends, payments received on securities loans,						
	rents, royalties, and income from	/	1		_		
	sımılar sources	/					
9	Net income from unrelated business						
	activities, whether or not the business			}			
	is regularly carried on	/					
0	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						
2	Gross receipts from related activities, etc.	(see instructions	;)			12	
13	First five years. If the Form 990 is for th			fourth, or fifth tax	year as a section 5	501(c)(3)	
	organization, check this box and stop he	ге					▶
Se	ction C. Computation of Public S	Support Perce	entage				
14	Public support percentage for 2017 (line	6, column (f) dıvıd	led by line 11, coli	umn (f))		14	%_
15	Public support percentage from 2016 Sci					_15	%_
16a	,,,				is 33 1/3% or more	e, check this	
	box and stop here. The organization qua				45 00 4/00/		▶ _
b	• • • • • • • • • • • • • • • • • • • •				ne 15 is 33 1/3% oi	r more, check	
	this box and stop here. The organization					l 14	▶ [
17a	· · · · · · · · · · · · · · · · · · ·						
	10% or more, and if the organization mee						
	Part VI how the organization meets the "f	acis-and-circums	tances test The	organizadon quali	nes as a publicity s	υμμοιτεα	> [
L	organization	016 If the erges	zation did not cho	ok a hov on line 13	R 16a 16h or 17a	and line	F [_
b	10%-facts-and-circumstances test—2 15 is 10% or more, and if the organizatio						
	Explain in Part VI how the organization in						
	Explain and vi now the organization in	icets the Tacts-at	iu-circumstances	test The Organiz	andii qualilles ds c	Publicly	. —

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

18

supported organization

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.)

Sec	tion A. Public Support			· · · · · · · · · · · · · · · · · · ·			
Cale	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")					46,771	46,771
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					179,554	179,554
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					226,325	226,325
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b c	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 Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
0	line 6)			,			226,325
Sec	tion B. Total Support			<u> </u>		<u></u>	220,323
	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9	Amounts from line 6					226,325	226,325
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						
С	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,					225 225	
14	and 12) First five years. If the Form 990 is for the	e organization's fi	ret second third t	fourth or fifth tax i	year as a section t	226,325	226,325
	organization, check this box and stop he		ist, second, time,	outer, or mer tax y	rear as a section .	301(0)(3)	▶ □
Sec	tion C. Computation of Public S		entage				
15	Public support percentage for 2017 (line 8			mn (f))		15	100.00%
16	Public support percentage from 2016 Sch	nedule A, Part III,	line 15 .			16	%
Sec	tion D. Computation of Investm						
17	Investment income percentage for 2017 (line 10c, column	(f) divided by line 1	3, column (f))		17	%
18	Investment income percentage from 2016					18	%
19a	33 1/3% support tests—2017. If the org						[ৰুক্
b	17 is not more than 33 1/3%, check this b 33 1/3% support tests—2016. If the org		_			-	► X
~	line 18 is not more than 33 1/3%, check the					•	▶ □
20	Private foundation. If the organization d	-	-	•		•	▶ □

Page 4

Philadelphia Community Corps Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on 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.)

S	Section .	A. All	Supporting	Organizations

3666	ion A. All Supporting Organizations		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing		163	110
•	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	<u> </u>		
-	under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported			
		2		
2.	organization was described in section 509(a)(1) or (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		
ь	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	ا م		
	organization made the determination	3b		
С	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	1 . 1		
	"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		
С	Did the organization support any foreign supported organization that does not have an IRS determination		1	
	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		ļ	
	designated in the organization's organizing document?	5b		
С	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 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		

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.

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

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

supporting organizations)? If "Yes," answer 10b below

determine whether the organization had excess business holdings)

9с

10a

10a

Sched	ule A (Form 990 or 990-EZ) 2017 Philadelphia Community Corps 27	<u>-4576805</u>		Page 5
Pai	rt IV . Supporting Organizations (continued)			
	•		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		<u> </u>
	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		<u> </u>
Sect	ion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to		ļ	
	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		
Sect	ion 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		
Sect	ion 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 t	ax		
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the		ļ	
	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	v []		
	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		
Sect	ion 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	e instructions)		
а	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			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government er	ntity (see instructions)	
		_		
2 /	Activities Test Answer (a) and (b) below.		Yes	No
а	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,	i I]	
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities	2a	ĺ	
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	1	
3	Parent of Supported Organizations Answer (a) and (b) below.			
а	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 arganizations? If "Vas " describe in Part VI the role placed by the arganization in this regard		İ	

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting C		ations	7003 Page 6
1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on instructions. All other Type III non-functionally integrated supporting organizations r	Nov 20,	1970 (explain in Part Vi	
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)
Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year)			
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 integrate	ed Type I	II supporting organization	on (see

Schedule A (Form 990 or 990-EZ) 2017

instructions)

Schedule A (Form 990 or 990-EZ) 2017

e Excess from 2017

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.)

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 Open to Public

Inspection Employer identification number Name of the organization 27-4576805 Philadelphia Community Corps 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 Total number at end of year Aggregate value of contributions to (during year) 2 Aggregate value of grants from (during year) Aggregate value at end of year 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? 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? Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. 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 a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space 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 Tax Year Total number of conservation easements 2a 2b **b** Total acreage restricted by conservation easements 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 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) | Yes | | and section 170(h)(4)(B)(II)? 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 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 Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990. Part X

	edule D (Form 990) 2017 Philadelp					21-4				Page Z
Pá	art III Organizations Maintaining	Collections of	of Art,	Historical	Treasure	s, or O	ther Si	<u>imilar Ass</u>	ets (cont	inued)
3	Using the organization's acquisition, accession collection items (check all that apply)	on, and other recor	ds, chec	k any of the f	ollowing that	are a sigi	nificant u	ise of its		
а	Public exhibition	d 🗌	Loan or	exchange pro	grams					
b	Scholarly research	е 🗍	Other							
С	Preservation for future generations									
4	Provide a description of the organization's co	llections and expla	in how t	hey further the	e organizatio	n's exem _l	pt purpos	se in Part		
	XIII									
5	During the year, did the organization solicit or	receive donations	of art, h	nistorical treas	sures, or othe	er sımılar				,
	assets to be sold to raise funds rather than to								Yes	☐ No
Pá	art IV Escrow and Custodial Arr.		·							
	Complete if the organization 990, Part X, line 21.		s" on l	Form 990,	Part IV, lır	ne 9, or	reporte	ed an amo	unt on Fo	rm
1 2	is the organization an agent, trustee, custodia	an or other interme	diany for	contributions	or other ass	sets not				
ia	included on Form 990, Part X?	an or other interme	dialy lo	CONTINUENCIA	or other asc	0000			Yes	☐ No
h	If "Yes," explain the arrangement in Part XIII	and complete the f	ollowipa	table						
D	it res, explain the arrangement in Fart Air a	and complete the i	onowing	lable			1		Amount	
	Description belongs						ł	10	741100111	
	Beginning balance						ŀ	1c		
d	Additions during the year						}	1d		
е	• · · · · · · · · · · · · · · · · · · ·						-	1e		
f	3						_ [1f	<u> </u>	
	 Did the organization include an amount on Fo 						y ²		Yes	No
	If "Yes," explain the arrangement in Part XIII	Check here if the	explanat	ion has been	provided on	Part XIII				Ш
Pa	art V Endowment Funds.					4.0				
	Complete if the organization	answered "Ye	s" on I	orm 990,	Part IV, lir	ne 10.				
		(a) Current year	(b)	Prior year	(c) Two yea	ars back	(d) Thr	ee years back	(e) Four ye	ars back
1a	Beginning of year balance									_
b	Contributions									
С	Net investment earnings, gains, and									
	losses									
d	Grants or scholarships									
е	Other expenditures for facilities and									
	programs				1					
f	Administrative expenses			1						
a	End of year balance									
2	Provide the estimated percentage of the curre	ent year end balan	ce (line	1g, column (a	i)) held as					
	Board designated or quasi-endowment ▶	%	ì							
	Permanent endowment ▶ %	•	Ø							
	Temporarily restricted endowment ▶	%								
•	The percentages on lines 2a, 2b, and 2c sho									
3a	a Are there endowment funds not in the posses		zation th	at are held ar	nd administer	red for the	,			
Ja	organization by.	or are organia				,			Y	es No
	(i) unrelated organizations								3a(i)	1.0
	(ii) related organizations								3a(ii)	
	o If "Yes" on line 3a(ii), are the related organizations	ations listed as root	ured on	Schodule P2	,				3b	
4									[30]	
- 4	Describe in Part XIII the intended uses of the		Jowinen	Liunus		·				
	art VI Land, Buildings, and Equi		ne"	Form 000	Dart IV III	110	See E	orm 000 D	art Y line	10
	Complete if the organization									
	Description of property	(a) Cost or other		(b) Cost or (Accumulate epreciation	u	(d) Book val	ue
		(investment)	· · · · · · · · · · · · · · · · · · ·	l (Olin	, , , , , , , , , , , , , , , , , , ,	- 0	- Preciation			
	a Land									
	b Buildings									
	c Leasehold improvements						<u> </u>			
	d Equipment			<u> </u>	400	ļ		100		000
_	e Other	<u> </u>			17,400	<u> </u>	4	,180		,220
Tota	al. Add lines 1a through 1e (Column (d) must e	equal Form 990, P	art X, co	lumn (B), line	10c)				13	,220

Schedule D (F	form 990) 2017 Philadelphia Communit	ty Corps	27-4576805	Page
	Investments—Other Securities.			- <u>-</u>
	Complete if the organization answered "Yes" o	n Form 990, Part IV,	line 11b. See Form 990, Pa	rt X, line 12.
	(a) Description of security or category	(b) Book value	(c) Method of valuation	ì
	(including name of security)		Cost or end-of-year market	value
(1) Financial of	derivatives			
(2) Closely-he	eld equity interests			
(3) Other				
(A) .				
(B)				
(C)				
(D)	•	<u></u>		
(E)				
(F)				
(G)				
(H)	n (b) must equal Form 990, Part X, col. (B) line 12)▶			
Part VIII	Investments—Program Related.	<u> </u>		
r art viii	Complete if the organization answered "Yes" o	n Form 990 Part IV	line 11c See Form 990 Par	rt X line 13
	(a) Description of investment	(b) Book value	(c) Method of valuation	
	(-,	(-,	Cost or end-of-year market	
(1)				
(2)				
(3)			,	
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	n (b) must equal Form 990, Part X, col (B) line 13) ▶		<u> </u>	
Part IX	Other Assets.	5 000 D . W.		
	Complete if the organization answered "Yes" o	n Form 990, Part IV,		
	(a) Description			(b) Book value
(1)				
(2)				
(3)		· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·
(4)		 		
(5)				
<u>(6)</u> (7)				
(8)				
(9)		· · · · · · · · · · · · · · · · · · ·		<u> </u>
	n (b) must equal Form 990, Part X, col. (B) line 15.)		>	
Part X	Other Liabilities.			
	Complete if the organization answered "Yes" o	n Form 990, Part IV,	line 11e or 11f. See Form 99	90, Part X,
	line 25.			
1.	(a) Description of liability	(b) Book value		
	income taxes			
	oll Liabilities	7,103		
(3) Credi	Lt Cards	7,065		
(4)	···			
(5)]	
(6)				
(7)				
(8)			1	
(9)		4 4 4 6 6		
	n (b) must equal Form 990, Part X, col (B) line 25) ▶	14,168	<u> </u>	
2 Liability for	uncertain tax positions. In Part XIII, provide the text of the for	atnote to the organization's	s tinancial statements that reports th	0

Sche	dule D (Form 990) 2017 Philadelphia Community Corps	<u>27-457680</u>)5	Page
Pa	rt XI Reconciliation of Revenue per Audited Financial State	ments 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	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
а	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b]	
С	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII)	2d]	
е	Add lines 2a through 2d		_2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	1 ' 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b]	
С	Add lines 4a and 4b		4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5	
Pa	irt XII Reconciliation of Expenses per Audited Financial State	ements With Expenses p	er Return).
	Complete if the organization answered "Yes" on Form 990	, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
а	Donated services and use of facilities	2a]	
b	Prior year adjustments	2b `]	
С	Other losses	2c		
d	Other (Describe in Part XIII)	2d		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1	, ,	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a]	
b	Other (Describe in Part XIII)	4b		
С	Add lines 4a and 4b		4c	
5	Total expenses Add lines 3 and &c. (This must equal Form 990, Part I line 18.)		5	

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

Part XIII Supplemental Information (continued)

SCHEDULE M (Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

Noncash Contributions

► Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

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

OMB No 1545-0047

2017

Open To Public Inspection

Philadelphia Community Corps

Employer identification number 27-4576805

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30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through	302	During the year, did the organization	n receive l	hy contribution any nron	erty reported in Part I line	s 1 through		-	
28, that it must hold for at least three years from the date of the initial contribution, and which isn't required	Jua	-				· · · · · · · · · · · · · · · · · · ·			
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	b 33	If "Yes," describe in Part II	amount in	column (c) for a type of	oronerty for which column	(a) is checked			

Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

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.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ Attach to Form 990 or 990-EZ. ▶ Go to www.irs.gov/Form990 for the latest information.

Name of the organization Philadelphia Community Corps Employer identification number 27-4576805

Form 990, Part I, Line 6

Assistance with inventory management, sales and marketing

Form 990, Part III, Line 4d - All Other Accomplishment The organization provides career training programs that empower underserved citizens to revitalize blighted neighborhoods by deconstructing vacant buildings and salvaging materials for reuse.

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990 No review was or will be conducted.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation No documents available to the public

Form 990, Part XI, Line 9 - Other Changes in Net Assets Explanation 2,534 Book / Tax Depreciation Difference

PCCTRAINOR Philadelphia Community Corps 2/15/2021 5:17 PM Federal Statements

FYE: 12/31/2017

Statement 1 - Late Filing Explanation

Description

Lack of consistent bookeeper, accountant and CPA

1

Statement 1 - Late Filing Explanation

The simple reason why we did not hire a bookkeeper or an accountant is that we could never afford to. Philadelphia Community Corps is a nonprofit organization that was launched without any sort of capital funding or institutional support by myself in 2014. When I started this nonprofit I was technically homeless, and would have qualified federally as "Very Low Income." I couldn't contribute anything monetarily.

From 2014 to 2016 the PCC filed Form 990EZs because we didn't make more than the legal limit for 990EZs. In those years we made so little that I had to volunteer full-time as Founder/Executive Director while working full-time at other jobs. We were able to hire our first part-time employees for low hourly rates, but we couldn't afford anyone with financial accounting experience. We had no idea in those years whether the company would survive long enough for it to even matter anyway.

In 2017 we grew a lot and grossed enough to need to file a 990, but we were still operating at a loss, so we couldn't afford to hire anyone to professionally prepare the 990 application. No one on the staff knew how to fill it out, and we were so understaffed that no one had the time to IRS - OSC 07 figure it out. We tried hard to find an accountant or bookkeeper to help us pro bono, but we couldn't find anyone who would volunteer in that capacity.

By 2018, we were in even more extreme financial distress. I had to lay off the rest of the staff, Ogden, Utah and take on all of their jobs in the now much larger organization. At that time, one of the former employees hacked into our Google Drive and deleted all of our files. We had a backup, but the thousands of files representing 9 years of my work came back without any sort of file structure, so many documents were lost. Then in the process of taking over the former employees responsibilities I realized that they had been delegating all bookkeeping responsibilities to their college interns entirely, so each semester the bookkeeping would vary, and there were many mistakes that needed to be corrected. There were years of mistakes to correct, all of our files were lost or scattered, and I was now the only employee holding the company. I did not have the time or expertise to correct it all back then.

In 2019, we were evicted from our warehouse space, and had to suddenly move to a new location while our former landlord harassed us every way they could think of to make it as difficult as possible, including throwing all of our paperwork into boxes and leaving them in a pile. Between them and the chaos of a sudden disorganized move to a new location lots of our documentation was lost, and it became yet even more difficult to perform a multi-year comprehensive review of our financial statements.

In 2020, we were setting up a new warehouse that had no lights or plumbing when a national pandemic and recession disrupted everything. Fortunately, a generous accountant took pity on us and helped us clean up our financial statements so we could finally file our 990s for 2017, 2018, and 2019. Now we have a professional bookkeeping service to make sure we're never in that situation again.