EXTENDED TO NOVEMBER 15, 2017

Form **990**

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public. ► Information about Form 990 and its instructions is at www.irs.gov/form990.

Open to Public Inspection

A F	or the 2	2016 calendar year, or tax year beginning	and	ending			
	neck if oplicable:	C Name of organization			D Employer identific	ation number	
	Address change Name	PHILADELPHIA FILM SOCI	ETY		23-31	77468	
	change Initial	Doing business as	d.t. alwast address)	Room/suite		777400	
	Jreturn TFinal	Number and street (or P.O. box if mail is not delife 1412 CHESTNUT STREET	fulliber and Street (or 1:0: box in than is not domested to extend the				
L	return/ termin- ated	City or town, state or province, country, and	ZIP or foreign postal code		G Gross receipts \$	2,638,671.	
	Amende Ireturn	d PHILADELPHIA, PA 1910;	2		H(a) Is this a group re	turn	
	Applica-	F Name and address of principal officer: J.	ANDREW GREENBLA	TT	for subordinates?		
SAME AS C ABOVE H(b) Are all subordinates included? L Yes							
<u> 1 T</u>	ax-exer		(insert no.) 4947(a)(1)	or 527	-	list. (see instructions)	
JW	Vebsite	: WWW.FILMADELPHIA.ORG	sociation Other	I Voor	H(c) Group exemption	State of legal domicile: PA	
		rganization, [22] ostporation	SOCIATION Other	L Teal	or formation. 2002 [W	Cate of logal dofficies, 2 22	
Pa	ru	Summary riefly describe the organization's mission or most	cignificant activities: PHII	ADELPH	IIA FILM SOC	IETY	
စ္ခ	1 8	REATES OPPORTUNITIES FOR	DIVERSE COMMUN	ITIES	TO EXPERIENCE	CE FILM	
Governance	2	theck this box if the organization discor	ntinued its operations or dispo	osed of more	e than 25% of its net as	sets.	
Ver		lumber of voting members of the governing body			3	⊿ 5	
ၓ	4 1	lumber of independent voting members of the go	verning body (Part VI, line 1b)		4	24	
Activities &	5 T	otal number of individuals employed in calendar y	ear 2016 (Part V, line 2a)		5	148	
vitie		otal number of volunteers (estimate if necessary)				300	
\cti		otal unrelated business revenue from Part VIII, co				0.	
_	۱d	let unrelated business taxable income from Form	990-T, line 34	·····		Current Year	
				<u> </u>	Prior Year 9,191,958.	860,924.	
æ		Contributions and grants (Part VIII, line 1h)			1,214,218.	1,777,670.	
Revenue			and 7d\		12.	34.	
Be		nvestment income (Part VIII, column (A), lines 3, 4 Other revenue (Part VIII, column (A), lines 5, 6d, 8d			28,233.	43.	
		otal revenue (Part VIII, Column (A), lines 3, 6d, 6d Total revenue - add lines 8 through 11 (must equal			10,434,421.	2,638,671.	
_		Grants and similar amounts paid (Part IX, column (0.	0.	
		Benefits paid to or for members (Part IX, column (0.	0.	
Ø		Salaries, other compensation, employee benefits (1,490,407.	1,754,100.		
Expenses	160 [Professional fundraising fees (Part IX, column (A).	line 11e)		0.	0.	
xbe	b -	otal fundraising expenses (Part IX, column (D), lir	e 25) 297,	454.	1 007 365	2,222,091.	
Ш	17 (Other expenses (Part IX, column (A), lines 11a-11c	l, 11f-24e)		1,997,365. 3,487,772.	3,976,191.	
		Total expenses. Add lines 13-17 (must equal Part			6,946,649.	-1,337,520.	
. 10	19	Revenue less expenses. Subtract line 18 from line	12		seginning of Current Year		
Net Assets or Fund Balances				۲	9,159,963.	8,478,557.	
SSE	20	Fotal assets (Part X, line 16) Fotal liabilities (Part X, line 26)			1,969,990.	2,626,104.	
Vet /	21 22	Net assets or fund balances. Subtract line 21 fron			7,189,973.	5,852,453.	
I Pa	art II	Signature Block					
Und	ler pena	ties of perjury, I declare that I have examined this return	, including accompanying schedu	ıles and stateı	ments, and to the best of m	y knowledge and belief, it is	
true	, correc	t, and complete. Declaration of preparer (other than offic	er) is based on all information of	which prepar	er has any knowledge.	······································	
					 Date		
Sig	ın	Signature of officer	OTTO D	Date			
He	re	J. ANDREW GREENBLATT,	EXECUTIVE DIRE	CTOR			
		Type or print name and title	I Duran alamatura		Date Check	II PTIN	
		Print/Type preparer's name	Preparer's signature		if self-emplo	T01330800	
Pai		HELEN M. MARTIN Firm's name EISNERAMPER LLP	J		Firm's EIN	13-1639826	
	parer only	Firm's name EISNERAMPER LLP Firm's address 130 NORTH 18TH S	STREET, SUITE 3	000			
USt	Jonly	PHILADELPHIA, PA	19103-2757		Phone no. (2		
	41 11	29 discuss this return with the preparer shown ab				X Yes No	

Form	990 (2016) PHILADELPHIA FILM SOCIETY 23-3077406 Page 2
Par	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	SEE SCHEDULE O
2	Did the organization undertake any significant program services during the year which were not listed on the
_	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O. Siddly a varieties appropriately services? Yes X No
3	big the organization dease conducting, or make significant changes in now it obtained to, any program of the conducting of make significant changes in now it obtained to, any program of the conducting of the co
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	royanua, if any for each program service reported
	1 392 386 \ (Revenue \ 1,030,744 •)
4a	(Code:) (Expenses \$ 17,002,7000 inflorming grains of \$ 20.15 AN EXCITATION
	PERFORMANCE VENUE IN THE HEART OF DOWNTOWN PHILADELPHIA, THE PRINCE
	THEATER HOSTS FILM AND LIVE EVENTS IN TWO STATE-OF-THE-ART THEATERS AND
	ALSO BOASTS THE LARGEST CONVENTIONAL MOVIE SCREEN IN THE CITY.
	(Code:) (Expenses \$ 1,039,423 • including grants of \$) (Revenue \$)
4b	(Code:) (Expenses \$ 1,039,423 including grants of \$) (Hevenue \$ 1,039,423 including grants of \$) (Figure 1,039,423 including grants of \$) (Expenses \$) (Expenses \$ 1,039,423 including grants of \$) (Expenses \$ 1,039,423 including grants of \$) (Expenses \$ 1,039,423 including grants of \$) (Expenses \$) (Expense
	PFS CREATES OPPORTUNITIES FOR DIVERGE AND ENTERTAIN.
	THROUGH INITIATIVES THAT INSPIRE, EDUCATE, CHALLENGE, AND ENTERTAIN.
	TTS PURPOSE IS TO UTILIZE FILM'S UNIQUE CAPACITY TO ENGAGE A BROAD
	CROSS-SECTION OF THE COMMUNITY, WHILE FURTHER PROVIDING ACCESS TO
	POWERFUL FILMS FROM AROUND THE WORLD IN ORDER TO INCREASE EDUCATION AND
	UNDERSTANDING. AS THE PRODUCER OF THE PHILADELPHIA FILM FESTIVAL, AND
	CREATIVE ENERGY BEHIND THE PRINCE AND PFS ROXY THEATERS, PFS RAISES
	AWARENESS OF FILM AS AN IMPORTANT ART FORM IN PHILADELPHIA, AND SERVES
	AS A VITAL PIECE OF THE CITY'S ARTS AND CULTURAL LANDSCAPE. AS THE MOST
	AS A VITAL PIECE OF THE CITI S AND CONTOURN DECIME AND THE MOST
	DISTINGUISHED FILM PRESENTING ORGANIZATION IN THE REGION, PFS MAKES A
	MAJOR CULTURAL CONTRIBUTION BY PROGRAMMING THOUGHT-PROVOKING FILM, AND
	BRINGING THE BEST OF DOMESTIC AND INTERNATIONAL CINEMA TO VENUES
4c	585 999 including greate of \$ (Revenue \$ 547,172.)
-10	AFTER ASSUMING OPERATIONS OF THE PFS ROXY IN 2013 AND FOLLOWING AN
	EXTENSIVE RENOVATION OF THE THEATER THROUGHOUT THE MAJORITY OF 2013,
	THE THEATER REOPENED IN DECEMBER 2013. OPERATING AS A TWIN (2 SCREEN),
	160-SEAT TOP-OF-THE-LINE MOVIE THEATER FEATURING FIRST-RUN FILMS MIXED
	16U-SEAT TOP-OF-THE-LINE MOVIE THEATER FEATORING FIRST ROW FIELD MIXED
	WITH SPECIALIZED, CURATED NEW AND REPERTORY PROGRAMMING, THE PFS ROXY
	IS OPEN TO THE PUBLIC 365 DAYS A YEAR.
4d	Other program services (Describe in Schedule O.)
	(Expenses \$ 260,229 • including grants of \$) (Revenue \$ 192,629 •)
40	Total program service expenses 3,268,037.
<u>-+e</u>	Total program service expenses

Part IV | Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A X 2 Is the organization required to complete Schedule B, Schedule of Contributors? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for Х 3 public office? If "Yes," complete Schedule C, Part I Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect X 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 X similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III 5 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to Х 6 provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I Did the organization receive or hold a conservation easement, including easements to preserve open space, X 7 the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete X 8 Schedule D, Part III Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for 9 amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? X 9 If "Yes," complete Schedule D, Part IV Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent X endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 10 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Х 11a 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 X 11b assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total Х 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 Х Part X, line 16? If "Yes," complete Schedule D, Part IX 11d X e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11e f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses Х the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 11f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete X 12a Schedule D, Parts XI and XII b Was the organization included in consolidated, independent audited financial statements for the tax year? Х 12b If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional X Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 14a 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 Х or more? If "Yes," complete Schedule F, Parts I and IV 14b Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any X 15 foreign organization? If "Yes," complete Schedule F, Parts II and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to X 16 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, 17 X 17 column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines Х 18 1c and 8a? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," X complete Schedule G, Part III Form 990 (2016)

Part IV | Checklist of Required Schedules (continued) No Yes Х 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or X domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 21 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on X 22 Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current 23 and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete X 23 Schedule J 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 X 24a Schedule K. If "No", go to line 25a **b** Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease 24c any tax-exempt bonds? 24d d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit Х transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25a 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 X 25b Schedule L, Part I Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," Х 26 complete Schedule L, Part II 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 Х 27 of any of these 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, Part IV instructions for applicable filing thresholds, conditions, and exceptions): X a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV X **b** A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, Х director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV X Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation X 30 contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? X 31 If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete X 32 Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 Х 33 sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and 34 Х 34 Part V, line 1 X 35a 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity 35b within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? 36 X 36 If "Yes," complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization 37 X and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 37 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O . Form 990 (2016)

Parl				
	Check if Schedule O contains a response or note to any line in this Part V	······		
			Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable) (1)	
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming		X	
	(gambling) winnings to prize winners?	1c_		- 1 J. S
	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,		8 3	
	filed for the calendar year ending with or within the year covered by this return		X	125.17
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	- 22	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	20	.E1114	Х
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a 3b		
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	SD		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	4a		х
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	- 1 -a	4.1	
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). Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	88 a .	х
5a	Was tile organization a party to a promoted text choice a text choice at the party to a promoted text choice a text choice at the party to a promoted text choice at the party to a party to a promoted text choice at the party to a party t	5b		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5c		
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T? Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
ба	any contributions that were not tax deductible as charitable contributions?	6a		X
L.	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			_
a		6b		
7	were not tax deductible? Organizations that may receive deductible contributions under section 170(c).	W 10 1	Andrew No. of the	
7	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	1000 N. S.	X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
C	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			\$19
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		<u> </u>
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the		5 1 h	Maria de la Compania
	sponsoring organization have excess business holdings at any time during the year?	8_		
9	Sponsoring organizations maintaining donor advised funds.		924 C.S.	
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a	<u> </u>	—
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:	1.00		
а	Initiation fees and capital contributions included on Part VIII, line 12	-		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			15.424
b	Gross income from other sources (Do not net amounts due or paid to other sources against	10 17 4 \$41 10	160	
	amounts due or received from them.)		92340	22-2
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	la de	.evstrat
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	100	7,750	\vdash
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	- jeA	1975
	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		9.5	
	organization is licensed to issue qualified health plans 13b 13c 13c	† ՛։		1554 1554
	Little tille diffedit et reserve et mane	14a	1	X
14a	Did the organization receive any payments for indoor tanning services during the tax year? If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	 	
<u> </u>	it res, has it filed a Forti 720 to report these payments? If No, provide an explanation in deflectate o		m 990	(2016)

PHILADELPHIA FILM SOCIETY

PHILADELPHIA FILM SOCIETY

23-307/468 Page

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 in Schedule O. See instructions. 77

	Check if Schedule O contains a response or note to any line in this Part VI						<u> </u>
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	1a		25		. 12	
	If there are material differences in voting rights among members of the governing body, or if the governing			-) JE	a tat
	body delegated broad authority to an executive committee or similar committee, explain in Schedule 0.						
b	Enter the number of voting members included in line 1a, above, who are independent	1b		24			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	ip with	any other		Pari		200
_	officer, director, trustee, or key employee?			L	2		_X_
3	Did the organization delegate control over management duties customarily performed by or under the	ne dire	ct supervision		1		
3	of officers, directors, or trustees, or key employees to a management company or other person?			L	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form	990 w	as filed?	L	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's as	sets?		L	5		X
6	Did the organization have members or stockholders?		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	L	6		X
70	Did the organization have members, stockholders, or other persons who had the power to elect or a	appoint	one or	-	Ì		
1 a	more members of the governing body?			[7a		<u> </u>
h	Are any governance decisions of the organization reserved to (or subject to approval by) members,	stockh	olders, or		ŀ		1
b	persons other than the governing body?			L	7b		X_
	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	ear by t	ne following:		- Q		4.41
8	The governing body?			[8a	X	
a	Each committee with authority to act on behalf of the governing body?			[8b	Х	
	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re	ached	at the	ſ			1
9	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			.,.	9		X
500	tion B. Policies (This Section B requests information about policies not required by the Internal F	Revenu	e Code.)				
<u> </u>	RIOTI D. I GIIGIGG (Mile George Proquesto il la marina de la propieta de la constante de la co					Yes	No
100	Did the organization have local chapters, branches, or affiliates?				10a		Х
IUa h	If "Yes," did the organization have written policies and procedures governing the activities of such	chapte	rs, affiliates,	- 1			
, ,	and branches to ensure their operations are consistent with the organization's exempt purposes?	· · · · · · · · · · · · · · · · · · ·		[10b		
110	Has the organization provided a complete copy of this Form 990 to all members of its governing bo	dy bef	ore filing the form	?	11a	X	<u>l</u>
ı ıa	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			ĺ	14.		
	The state of the s			[12a	Х	
12a b	the state of the state of the state and key employees required to displace annually interests that could give ris	se to co	nflicts?		12b	Х	1
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If	'Yes,"	describe				1
·	in Schedule O how this was done				12c	X	
10	Did the organization have a written whistleblower policy?				13	X	<u> </u>
13	Did the organization have a written document retention and destruction policy?				14	X	
14	Did the process for determining compensation of the following persons include a review and appro	val by	independent				
15	persons, comparability data, and contemporaneous substantiation of the deliberation and decision	1?	•				
_	The organization's CEO, Executive Director, or top management official				15a	X	
	Other officers or key employees of the organization				15b	Х	
Ľ	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).						
40-	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrang	ement	with a				
168	taxable entity during the year?				16a		X
	of "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	uate its	participation			12-16	
K	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization	anizat	ion's		10 Carlo 10 S RM		
	exempt status with respect to such arrangements?				16b		
50	exempt status with respect to such arrangements?						
	List the states with which a copy of this Form 990 is required to be filed ▶PA						
17	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990	D-T (Se	ction 501(c)(3)s o	nly) a	availa	ble	
18	for public inspection. Indicate how you made these available. Check all that apply.	•					
	Own website Another's website X Upon request Other (explain	ain in S	chedule O)				
40	Describe in Schedule O whether (and if so, how) the organization made its governing documents,			, an	d fina	ncial	
19	statements available to the public during the tax year.	_	, ,				
~~	State the name, address, and telephone number of the person who possesses the organization's	books	and records:				
20	BREAKWATER ACCOUNTING & ADVISORY CORP 302-543-	456	4				
	P.O. BOX 362, ROCKLAND, DE 19732						
	1 · O · DOA DOA / 10 Olimano / DE					~~	2 (22 4

632006 11-11-16

Form **990** (2016)

Page 7

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

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

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.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons. Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

Check this box is rielliner the digarilza		<u>Grga</u>	inza			1001			(E)	(F)
(A) Name and Title	(B) Average		F	O) Posi	tion			(D) Reportable	(E) Reportable	Estimated
name and mie	hours per	box,	not ch unles	eck r s per	more son i	than (n an	compensation	compensation	amount of
	week	offic	er and	l a di	irecto	r/trus	tee)	from	from related	other
	(list any	ctor						the	organizations	compensation
	hours for	or director				ted		organization	(W-2/1099-MISC)	from the
	related	stee c	ruste		.	seusa		(W-2/1099-MISC)		organization
	organizations	altru	onalt		oloye	com ee				and related organizations
	below line)	Individual trustee	institutional trustee	Officer	Key employee	Highest compensated employee	Former			Organizations
(1) J. ANDREW GREENBLATT	40.00	<u> </u>	-	-	<u>×</u>	±Θ	IJ.,			
EXECUTIVE DIRECTOR		х	İ	Х				144,941.	0.	0.
(2) JACK ADLER	5.00								_	
BOARD CHAIR		X		X				0.	0.	0.
(3) LOUIS BLUVER	2.00							_		•
BOARD MEMBER		X				<u> </u>		0.	0.	0.
(4) GERALD GUARCINI	2.00							1		
BOARD MEMBER		Х						0.	0.	0.
(5) LAURADA BYERS	2.00]								۱ ,
BOARD MEMBER		X	Ш				_	0.	0.	0.
(6) ELLEN DAVIS	2.00	.							0.	0.
BOARD MEMBER		X			_	<u> </u>	_	0.	0.	0.
(7) BRIAN EFFRON	3.00	ا							.) o.	0.
TREASURER		X		X	<u> </u>	┞-	_	0.	· ·	0.
(8) BETSY FILTON	2.00	Į <u>.</u> .						0.	. 0.	0.
BOARD MEMBER		X		<u> </u>	ــــ		╄	U.		- 0
(9) MARJORIE HONICKMAN	2.00	٠,,					ŀ	0.	. 0.	0.
BOARD MEMBER		X	<u> </u>	_	_	├-	-	0.	•	
(10) RALPH HIRSHORN	3.00	٠,,		\ \ \	1		1	0.	. 0.	0
SECRETARY	2 00	X	-	X	├	┿	┿	<u> </u>		-
(11) LOSENGE IMASOGIE	2.00	$\frac{1}{x}$				ļ		0.	. 0.	. o
BOARD MEMBER	2.00	<u> </u>	-	<u> </u>	╀	╀╌	\vdash	0		
(12) SUSAN JACQUETTE	2.00	x					1	0	. 0.	. 0
BOARD MEMBER	2.00	╬	┼	┢	╁	╁	+	1		
(13) JILL ROSS BOARD MEMBER	2.00	$ _{\mathbf{x}}$		1				0	.) o.	. 0
(14) LAWRENCE KORMAN	2.00	+	╁┈		╁	╁╴	╁╌			
BOARD MEMBER	2.00	$ \mathbf{x} $		Ì				0	. 0.	. 0
(15) VICTOR KEEN	2.00		\vdash	\vdash	+-	+	+			
BOARD MEMBER		$\exists_{\mathbf{x}}$						0	. 0.	. 0
(16) JOE MANKO JR.	2.00			 	T	+	T			
BOARD MEMBER		$\forall x$			1			0	. 0.	. 0
(17) SUZANNE NAPLES	2.00		1	T	T	1	T			
BOARD MEMBER		٦x						0	. 0	0.
000007 11 11 16		'				-				Form 990 (2016

632007 11-11-16

Part VII Section A. Officers, Directors, Trus	tees, Key Emp	oloy	ees,	and	d Hi	ghe	st C	ompensated Employee	es (continued)	
(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average	/do	not el	Pos	ition	than	nne	Reportable	Reportable	Estimated
	hours per	box	, unles	ss pe	rson	is bot	n an	compensation	compensation	amount of
	week		cer an	cad	recto	or/trus	tee)	from	from related	other
	(list any	ector						the	organizations	compensation
	hours for	ordii	82		ļ	ated		organization	(W-2/1099-MISC)	from the organization
	related organizations	ustee	truste		,	bens		(W-2/1099-MISC)		and related
	below	ual tri	ional		ploye	1697	١.			organizations
	line)	individual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former			3
(18) LUANA NEDUCSIN	2.00	-	_		×	1				
BOARD MEMBER		X						0.	0.	0.
(19) BARRY O'SULLIVAN	2.00								_	
BOARD MEMBER		Х						0.	0.	0.
(20) RUTH PERLMUTTER	2.00				١					
BOARD MEMBER		X			_	丄		0.	. 0.	0.
(21) STEVE POSES	2.00	 							,	0
BOARD MEMBER		X		<u> </u>	<u> </u>	╙		0.	0.	0.
(22) CAROL SALINE	2.00						١		_	0.
BOARD MEMBER	2 00	X	_		-	-	<u> </u>	0.	0.	U •
(23) JUSTIN WINEBURGH	2.00	۱,,						0.	٥.	0.
BOARD MEMBER	2 00	X	 	_	╀	-	┢	0.	0.	0.
(24) LINDA YAFFE	2.00	x						0.	0.	0.
BOARD MEMBER (25) ROSS WEISS	2.00	1	┢	┝	╁	╁	-			
(25) ROSS WEISS BOARD MEMBER	2.00	x						0.	0.	0.
BOARD MEMBER		 	-	┢	╁	╁	\vdash			
		1								
1b Sub-total				<u> </u>	'		┢	144,941.	0.	0.
c Total from continuation sheets to Part V							•	0.	0.	0.
d Total (add lines 1b and 1c)							•	144,941.	0.	0.
Total number of individuals (including but i	not limited to th	nose	liste	ed a	bov	/e) w	ho r	received more than \$10	0,000 of reportable	
compensation from the organization						·				1
										Yes No
3 Did the organization list any former officer	, director, or tr	uste	e, ke	еу е	mpl	oyee	, or	highest compensated	employee on	
line 1a? If "Yes," complete Schedule J for	such individual	•								3 X
4 For any individual listed on line 1a, is the s	um of reportab	le c	omp	ens	atio	n an	d ot	ther compensation from	the organization	
and related organizations greater than \$15										4 X
5 Did any person listed on line 1a receive or	accrue compe	nsa	tion	fron	n an	ıy un	rela	ted organization or indiv	idual for services	
rendered to the organization? If "Yes," cor	nplete Schedu	le J	for s	uch	pei	rson		<u>.</u>		5 X
Section B. Independent Contractors									A.00.000 f	Contract
Complete this table for your five highest complete this table.	ompensated in	dep	end	ent	con	tract	ors	that received more than	1 \$100,000 of compen	sation from
the organization. Report compensation for	the calendary	/ear	ena	ıng	witr	orv	vitni	(B)	year.	(C)
(A) Name and busines:	s address	N	ON	F.				Description of	services	Compensation
			011			_				
2 Total number of independent contractors	(including but	no+	limit	ad +	0 +h	000	lieto	d above) who received	more than	
2 Total number of independent contractors \$100,000 of compensation from the organ		iiOt	111111111111111111111111111111111111111	u l	o ui	0	1310	above, who received		
φτου,σου οι compensation nom the organ	nadion								4	Form 990 (2016)

Statement of Revenue Part VIII Check if Schedule O contains a response or note to any line in this Part VIII (**D)** Revenue excluded from tax under Related or Unrelated Total revenue exempt function business revenue revenue 1 a Federated campaigns 167,938. **b** Membership dues _____ 10 c Fundraising events d Related organizations 1d 17,388 1e e Government grants (contributions) All other contributions, gifts, grants, and 675,598 similar amounts not included above 31,507 q Noncash contributions included in lines 1a-1f: \$ 860,924 h Total. Add lines 1a-1f Business Code 821,178 821,178 THEATER RENTAL AND FEE 512000 Program Service Revenue 667,003. 667,003. TICKET AND BADGE SALES 512000 192,913 512000 192,913. c CONCESSIONS 55,526. 55,526. 512000 d THEATER AND RESTORATIO 512000 41,050. 41,050. SUBMISSION FEES All other program service revenue ,777,670. a Total. Add lines 2a-2f Investment income (including dividends, interest, and 34. other similar amounts) Income from investment of tax-exempt bond proceeds 5 (ii) Personal (i) Real 6 a Gross rents **b** Less: rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (ii) Other (i) Securities assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c). See Part IV, line 18 b Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 _____a b Less: direct expenses _____ b c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold Net income or (loss) from sales of inventory Business Code Miscellaneous Revenue 43 43 OTHER INCOME 512000 11 a All other revenue 43. e Total. Add lines 11a-11d 34. 638,671.1 Total revenue. See instructions. 12

Form 990 (2016) PHILADELPHIA
Part IX | Statement of Functional Expenses

Secu	on 501(c)(3) and 501(c)(4) organizations must comp Check if Schedule O contains a respons	e or note to any line in	this Part IX		
Do n 7b, 8	ot include amounts reported on lines 6b,	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic			조상님 이 사람 보다.	
	individuals. See Part IV, line 22			eta digita e Mileria e de la las Grandias de la Alexa Grandia e	
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	144,941.	50,730.	21,741.	72,470.
_	trustees, and key employees Compensation not included above, to disqualified	144/5114	307.00	<u> </u>	
6	persons (as defined under section 4958(f)(1)) and				
-,	Persons described in section 4958(c)(3)(B) Other salaries and wages	1,377,506.	1,089,409.	156,541.	131,556.
7 8	Pension plan accruals and contributions (include	_,_,,,			
8	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	86,160.	64,620.	10,339.	11,201.
10	Payroll taxes	145,493.	109,120.	17,459.	18,914.
11	Fees for services (non-employees):				
	Management				
	Legal	1,588.	1,066.	522.	
	Accounting	51,840.	34,733.	17,107.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,			01 627	10 010
_	column (A) amount, list line 11g expenses on Sch O.)	72,122.	39,667.		10,818. 5,596.
12	Advertising and promotion	139,910.	131,516.		2,501.
13	Office expenses	16,673.	9,170.	5,002.	9,047.
14	Information technology	45,234.	31,664.	4,523.	9,047.
15	Royalties	054 040	105 516	44,113.	11,619.
16	Occupancy	251,248.	195,516.	1,081.	11,017.
17	Travel	106,077.	104,996.	1,001	
18	Payments of travel or entertainment expenses		ļ		
	for any federal, state, or local public officials	41,202.	14,421.	24,721.	2,060.
19	Conferences, conventions, and meetings	94,285.	66,942		270001
20	Interest	94,200.	00,542	27,345	
21	Payments to affiliates	635,239.	628,887.	6,352.	
22	Depreciation, depletion, and amortization	95,995.	77,756		11,519.
23	Insurance				
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 0.) EQUIPMENT AND FILM RENT	282,297.	279,474.	2,823.	
a	MICORITANEONIC	73,140			
b	TATEINTET DEINTONT	58,000			
0	DANTE AND COUNTY CARD DE	48,208		7,231.	
c	All other expenses	209,033		28,591.	10,153
	Total functional expenses. Add lines 1 through 24e	3,976,191			297,454
25 26	Joint costs. Complete this line only if the organization	, , , , , , , , , , , , , , , , , , , ,			
20	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				
	Check here I in following our set (AGO 306-120)				Form 990 (201

Form 990 (2016)
Part X | Balance Sheet

Pai	t X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	79,004.	1	72,916
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net	309,600.	3	256,595
	4	Accounts receivable, net	43,917.	4	75,625
	5	Loans and other receivables from current and former officers, directors,		- 201	
		trustees, key employees, and highest compensated employees. Complete		1 (14)	
		Part II of Schedule L	and an amazanin and the College of the Self and the Self	5	Lattice to the second of the second of
	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		inthe so the	
		employers and sponsoring organizations of section 501(c)(9) voluntary		Fe)	
ń		employees' beneficiary organizations (see instr). Complete Part II of Sch L	Maria William Maria di Sarah da Sarah Maria da Sarah da Sarah	6	
Assers	7	Notes and loans receivable, net		7	
AS	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	28,029.	9	19,890
		Land, buildings, and equipment: cost or other		13,31	
		basis, Complete Part VI of Schedule D 9,066,030.			
	ь	basis. Complete Part VI of Schedule D Less: accumulated depreciation 10a 9,066,030. 1,241,107.	8,415,523.	10c	7,824,923
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	283,890.	15	228,608
	16	Total assets. Add lines 1 through 15 (must equal line 34)	9,159,963.	16	8,478,557
	17	Accounts payable and accrued expenses	222,763.	17	397,447
	18	Grants payable		18	
	19	Deferred revenue	281,893.	19	227,858
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
က္က	22	Loans and other payables to current and former officers, directors, trustees,	London and religions of	S. Salar	
	i	key employees, highest compensated employees, and disqualified persons.			
Liabilities		Complete Part II of Schedule L	The second contract of	22	Commence of the Commence of th
j	23	Secured mortgages and notes payable to unrelated third parties	1,426,074.	23	1,980,877
	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	39,260.	25	19,922
	26	Total liabilities. Add lines 17 through 25	1,969,990.	26	2,626,104
		Organizations that follow SFAS 117 (ASC 958), check here ▶ X and		444	
S		complete lines 27 through 29, and lines 33 and 34.		\$\$G	
ĕ	27	Unrestricted net assets	6,921,723.	27	5,689,953
<u> </u>	28	Temporarily restricted net assets	268,250.	28	162,500
<u> </u>	29	Permanently restricted net assets		29	
		Organizations that do not follow SFAS 117 (ASC 958), check here ▶			
2		and complete lines 30 through 34.			
SIG	30	Capital stock or trust principal, or current funds		30	
155	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net Assets of Fund Balances	32	Retained earnings, endowment, accumulated income, or other funds		32	
ž	33	Total net assets or fund balances	7,189,973.	33	5,852,453
	ı	Total liabilities and net assets/fund balances	9,159,963.	34	8,478,557

Form	1990 (2016) PHILADELPHIA FILM SUCIETY	43-30	7 7 4 0 0	Pag	ge 12			
Pa	rt XI Reconciliation of Net Assets							
	Check if Schedule O contains a response or note to any line in this Part XI	<u></u>			<u></u> _			
			0 60					
1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,63	5,6	$\frac{71}{01}$.			
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,97					
3	Revenue less expenses. Subtract line 2 from line 1		-1,33° 7,18°					
4	99							
5	Net unrealized gains (losses) on investments	5						
6	Donated services and use of facilities	6						
7	Investment expenses	7						
8	Prior period adjustments	8						
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,		- 0-	~ <i>4</i>	- -			
	column (B))	10	5,85	4,4	53.			
Pa	rt XII Financial Statements and Reporting				X			
	Check if Schedule O contains a response or note to any line in this Part XII			Yes	No			
_				res	INO			
1	Accounting method used to prepare the Form 990: Cash X Accrual Other							
_	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.							
2a			2a		X			
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a						
	separate basis, consolidated basis, or both:							
	Separate basis Consolidated basis Both consolidated and separate basis		2b	X	السلامات			
b			20	- 25	- 7,5			
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e dasis,						
	consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis							
_	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	o audit						
С	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	Filtratia			
			20	Salket.	1.42			
20	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule C. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit							
Sa			3a	: :	X			
h	Act and OMB Circular A-133? If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ		Ja					
D	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3 _b		1			
	or addits, explain with in our educe of and describe any steps taken to differ go such addits			990	(2016)			
			1 0/11/1		(=0,0)			

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.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Employer identification number

OMB No. 1545-0047

Open to Public Inspection

Name of the organization 23-3077468 PHILADELPHIA FILM SOCIETY Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 2 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. ___ Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. ____ Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) is the organization listed in your governing document (v) Amount of monetary (vi) Amount of other (iii) Type of organization (i) Name of supported (described on lines 1-10 support (see instructions) support (see instructions) organization above (see instructions))

Schedule A (Form 990 or 990-EZ) 2016 PHILADELPHIA FILM SOCIETY 23-30774

| Part II | Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support				······································		
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to	,					
	the organization without charge						
4	Total. Add lines 1 through 3				lu		
5	The portion of total contributions		Rate (
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)			12-45 to 13-47			
	Public support. Subtract line 5 from line 4.			568X 7-2.7		- 1. Majir 100, 1 4 35 15 1	
	tion B. Total Support	r		· I · · · · · · · · · · · · · · · · · ·	1,0045	1 1 2000 1	(f) T - t - l
	ndar year (or fiscal year beginning in) ►	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
	Amounts from line 4		~~~		<u> </u>		
8	Gross income from interest,						
	dividends, payments received on					ļ	
	securities loans, rents, royalties						
	and income from similar sources					-	
9	Net income from unrelated business					. :	
	activities, whether or not the					ţ	
	business is regularly carried on	: 				-	
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)	. #138 11 FL St. TV U/\$664 FE	전라 (A) 로마함당 (A) 작.	page to the section of the section of			
	Total support. Add lines 7 through 10		e conservation of		alteria	12	
	Gross receipts from related activities First five years. If the Form 990 is fo			rd fourth or fifth t			
13							
Sec	organization, check this box and stoction C. Computation of Pub	ic Support Pe	rcentage				
	Public support percentage for 2016			column (f))		14	%
	Public support percentage from 201					15	%
16:	33 1/3% support test - 2016. If the	organization did n	ot check the box of	on line 13, and line	14 is 33 1/3% or	more, check this bo	x and
100	stop here. The organization qualifies						
ŀ	33 1/3% support test - 2015. If the						
_	and stop here. The organization qua						
17:	10% -facts-and-circumstances tes						
	and if the organization meets the "fa						
	meets the "facts-and-circumstances"						
Ł	10% -facts-and-circumstances tes	at - 2015. If the on	ganization did not	check a box on lin	ne 13, 16a, 16b, or	17a, and line 15 is	10% or
-	more, and if the organization meets t						
	organization meets the "facts-and-cir						▶∐
18	Private foundation. If the organization						s ▶└
						edule A (Form 990	

Schedule A (Form 990 or 990-EZ) 2016 PHILADELPHIA FILM SOCIETY

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	ction A. Public Support	,						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total	
	Gifts, grants, contributions, and							
	membership fees received. (Do not							
	include any "unusual grants.")	866,728.	1088040.	1360173.	971,958.	860,924.	5147823.	
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	210,141.	201,495.	530,320.	1214218.	1777670.	3933844.	
3	Gross receipts from activities that	·	<u></u>	,	****			
J	are not an unrelated trade or bus- iness under section 513							
4	Tax revenues levied for the organ-							
	ization'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	1076869.	1289535.	1890493.	2186176.	2638594.	9081667.	
78	Amounts included on lines 1, 2, and					•		
	3 received from disqualified persons	30,039.	19,960.		123,000.	120,945.	293,944.	
k	n Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the	10/ 617	389,352.	625 772	378,280.	145,839.	1733860.	
	amount on line 13 for the year	224,656.	409,312.	625,772.		266,784		
	Add lines 7a and 7b	224,030.	409,312	023,112.	301,200	200,704	7053863.	
	Public support. (Subtract line 7c from line 6.)		a envaran Paul		MS = 5 Lg Ld 15 Ld 15 MS 15 MS		7033003.	
	endar year (or fiscal year beginning in)	(a) 2010	(h) 2012	(c) 2014	(4) 2015	(e) 2016	(f) Total	
		(a) 2012 1076869.	(b) 2013 1289535.	1890493.	(d) 2015 2186176.	2638594	9081667.	
	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1070005.	46.	1070473.	12.	34.	92.	
k	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975							
	Add lines 10a and 10b		46.		12.	34.	92.	
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				28,233.	43.	28,276.	
13	assets (Explain in Part VI.)	1076869.	1289581.	1890493.	2214421.	2638671	9110035.	
	First five years. If the Form 990 is fo	L		<u> </u>		<u> </u>		
	check this box and stop here						L	
	ction C. Computation of Pub	***************************************				T	77 42	
15	Public support percentage for 2016 (15	77.43 %	
16	Public support percentage from 2015					16	70.64 %	
_	ction D. Computation of Inve					T T	0.0	
17	Investment income percentage for 20	•	••			17	.00 %	
18								
198	a 33 1/3% support tests - 2016. If the						17 is not	
	more than 33 1/3%, check this box a							
ŀ	b 33 1/3% support tests - 2015. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and							
	line 18 is not more than 33 1/3%, che							
20		on did not check a	box on line 14, 19	a, or 19b, check t				
6200	22 00-21-16				Sch	edule A (Form 99	90 or 990-EZ) 2016	

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.)

Section A	A. All	Supporting	Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- **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.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 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).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 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.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 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).
- 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.
- **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**.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	s N	lo
1			
2			
 3a			15)
3b		1 5 2 40 2 40	
3c	NA.		
4a			* 1745 - 1745
4b			
4c			
		6.1	
5a 5b	7.52		in helegi Anna Laurine
5c			
8			<u> </u>
9a			
9b		\$4,51	
9c			
10a			
10b			. 20 <u>.</u> 2.3a

Par	t V Type III Non-Functionally Integrated 509(a)(3) Supporting	ng Orga	anizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	ng trust o	n Nov. 20, 1970 (explain in P	art VI.) See instructions. All
	other Type III non-functionally integrated supporting organizations must c			
Secti	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
_ <u></u>	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		
	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see	9 15 15 15 15 15 15 15 15 15 15 15 15 15		
	instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a		
$\overline{}$	Average monthly cash balances	1b		
	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		
	tion 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	图如此中的自由的特色	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	等。 第二十二章	
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-function	ally integ	rated Type III supporting org	anization (see
-	instructions).			

Par	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	nizations _(continued)	
	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exe	mpt purposes		
	Amounts paid to perform activity that directly furthers exemp			
	organizations, in excess of income from activity			
	Administrative expenses paid to accomplish exempt purpose	es of supported organization	S	
	Amounts paid to acquire exempt-use assets			
	Qualified set-aside amounts (prior IRS approval required)			
	Other distributions (describe in Part VI). See instructions			<u></u>
	Total annual distributions. Add lines 1 through 6			
	Distributions to attentive supported organizations to which the	ne organization is responsive)	
	(provide details in Part VI). See instructions			
9	Distributable amount for 2016 from Section C, line 6			
	Line 8 amount divided by Line 9 amount			
	21.100 41.100.104.104.104	(i)	(ii)	(iii)
		Excess Distributions	Underdistributions	Distributable
Secti	on E - Distribution Allocations (see instructions)		Pre-2016	Amount for 2016
1	Distributable amount for 2016 from Section C, line 6	Virginia (Mari		
	Underdistributions, if any, for years prior to 2016 (reason-			
	able cause required- explain in Part VI). See instructions	ad \$44.4 45.5 <u>3</u> 5.		
3	Excess distributions carryover, if any, to 2016:	The state of the state of		
a				
b				
	From 2013		Maraka Part	
	From 2014			
	From 2015			
·	Total of lines 3a through e		7 (Fig. 45)	
	Applied to underdistributions of prior years			
	Applied to 2016 distributable amount			
<u>'''</u>	Carryover from 2011 not applied (see instructions)			
<u>'</u>	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
<u></u>	Distributions for 2016 from Section D,			
4	line 7: \$			
	Applied to underdistributions of prior years		1 1000 - may 1	
	Applied to 2016 distributable amount			
	Remainder. Subtract lines 4a and 4b from 4	Control of the contro		
	Remaining underdistributions for years prior to 2016, if			
5	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions			
	Remaining underdistributions for 2016. Subtract lines 3h			
О	and 4b from line 1. For result greater than zero, explain in			
	<u>-</u>			
	Part VI. See instructions	The state of the s		Value Name of the
7	Excess distributions carryover to 2017. Add lines 3j			7 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
	and 4c			
	Breakdown of line 7:			
a				
	Excess from 2013			
	Excess from 2014			- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1
	Excess from 2015	 ● 1996年 第2章 日本の日本学校<u>会</u> ● 1996年 日本日本の日本学校会会 ● 1996年 日本日本日本の日本学会会会 		
е	Excess from 2016			The second of th

Schedule A (Form 990 or 990-EZ) 2016

Schedule A

Payments from Disqualified Persons Included on Part III, Line 7a

2016

** Do Not File **

*** Not Open to Public Inspection ***

Payer's Name	2012 Amount	2013 Amount	2014 Amount	2015 Amount	2016 Amount
	30,039.	19,960.	0.	0.	0.
STEVE / BETSY FILTON	0.	0.	0.	13,000.	35,000.
VICTOR KEEN	0.	0.	0.	10,000.	0.
RONALD L. KASIERMAN	0.	0.	0.	100,000.	0.
JACK ADLER	0.	0.	0.	0.	16,590.
RALPH HIRSHORN (HIRSHORN COMPANY)	0.	0.	0.	0.	6,250.
MARJORIE HONICKMAN	0.	0.	0.	0.	7,500.
JOSEPH MANKO	0.	0.	0.	0.	7,500.
SUZANNE NAPLES	0.	0.	0.	0.	18,000.
RUTH PERLMUTTER	0.	0.	0.	0.	5,105.
OSAGIE IMOSAGIE	0.	0.	0.	0.	25,000.

Total to Schedule A, Part III, Line 7a	30,039.	19,960.		123,000.	120,945

Schedule A

Excess Payments from Non-Disqualified Persons Included on Part III, Line 7b

2016

** Do Not File **

*** Not Open to Public Inspection ***

2012 Amount	2013 Amount	2014 Amount	2015 Amount	2016 Amount
194,617.	389,352.	625,772.	378,280.	145,839.
				//
	· · · · · · · · · · · · · · · · · · ·			

1.70				
			250 225	145,839
	Amount 194,617.	Amount 389,352.	Amount	Amount Amount Amount 194,617. 389,352. 625,772. 378,280.

Schedule A

Identification of Excess Support Payments Included on Part III, Line 7b, column (e)

2016

** Do Not File **

*** Not Open to Public Inspection ***

Payer's Name	Amount Received in 2016	2016 Excess Payments
VARIOUS	172,226.	145,839.
		-
	And the second s	
	<u> </u>	145 020

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

OMB No. 1545-0047

Name of the organization

Employer identification number

	PHILADELPHIA FILM SOCIETY	23-3077468
Organization type (chec	k one):	
Filers of:	Section:	
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundar	tion
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
	on is covered by the General Rule or a Special Rule. 1(c)(7), (8), or (10) organization can check boxes for both the General Rule and a	Special Rule. See instructions.
General Rule		
	ation filing Form 990, 990-EZ, or 990-PF that received, during the year, contribution any one contributor. Complete Parts I and II. See instructions for determining a c	
Special Rules		
sections 509(a any one contril	ation described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3 ()(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, lind butor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of 0-EZ, line 1. Complete Parts I and II.	ne 13, 16a, or 16b, and that received from
year, total con	ation described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that rec tributions of more than \$1,000 exclusively for religious, charitable, scientific, litera of cruelty to children or animals. Complete Parts I, II, and III.	eived from any one contributor, during the ary, or educational purposes, or for
year, contribut is checked, en purpose. Don'	ation described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that rections exclusively for religious, charitable, etc., purposes, but no such contributions there the total contributions that were received during the year for an exclusive to complete any of the parts unless the General Rule applies to this organization itable, etc., contributions totaling \$5,000 or more during the year	s totaled more than \$1,000. If this box ely religious, charitable, etc., because it received <i>nonexclusively</i>
but it must answer "No	on that isn't covered by the General Rule and/or the Special Rules doesn't file Sc on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ eet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	chedule B (Form 990, 990-EZ, or 990-PF), Z or on its Form 990-PF, Part I, line 2, to

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Employer identification number

PHILADELPHIA FILM SOCIETY

Part I	Contributors (See instructions). Use duplicate copies of Part I if a	additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	BETSY AND STEVE FILTON 1898 BLACK ROCK LANE PAOLI, PA 19301-1058	\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	THE PHILADELPHIA FOUNDATION 1835 MARKET STREET, SUITE 2410 PHILADELPHIA, PA 19103-2968	\$7,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	RUTH PERLMUTTER 130 S. 18TH STREET, APT 803 PHILADELPHIA, PA 19103	\$\$.	Person X Payroll X Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	PNC FOUNDATION 300 5TH AVE PITTSBURGH, PA 15222	\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	PHILADELPHIA CULTURAL FUND 1400 JOHN F KENNEDY BLVD PHILADELPHIA, PA 19107	\$\$ \$13,336.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
623452 10-	STEVEN POSES 1101 WASHINGTON AVE PHILADELPHIA, PA 19147	\$\$ 17,503.	Person Payroll Noncash X (Complete Part II for noncash contributions.)

Employer identification number

PHILADELPHIA FILM SOCIETY

Part I	Contributors (See instructions). Use duplicate copies of Part I if additional	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	HONICKMAN FOUNDATION 210 W RITTENHOUSE SQUARE # 3303 PHILADELPHIA, PA 19103	\$7,500.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8	PECO ENERGY COMPANY 2301 MARKET STREET, P.O. BOX 8699 PHILADELPHIA, PA 19103-1380	\$8,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9	AVC PICTURES 58 BROAD STREET WOODBURY, NJ 08096	\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10	COZEN O'CONNOR 601 ROUTE 130 S RIVERTON, NJ 08077	\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
11	COMCAST 1701 JFK BOULEVARD PHILADELPHIA, PA 19103	\$15,000.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
12	JACK ADLER 107 S BRUNSWICK AVE MARGATE CITY, NJ 08402-2817	\$ 16,590.	Person X Payroll

Employer identification number

PHILADELPHIA FILM SOCIETY

Part I	Contributors (See instructions). Use duplicate copies of Part I if addi	itional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13	ALBERT GREENFIELD FOUNDATION PO BOX 30267 PHILADELPHIA, PA 19103	\$125,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
14	DIETZ & WATSON 5701 TACONY ST PHILADELPHIA, PA 19135	\$25,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
15	DOLFINGER 30 S 17TH ST PHILADELPHIA, PA 19103	\$7,500.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
16	RALPH HIRSHORN (HIRSHORN COMPANY) 14 EAST HIGHLAND AVE PHILADELPHIA, PA 19118	\$6,250.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
17	OSAGIE IMOSAGIE 934 BLACK ROCK RD GLADWYNE, PA 19035	\$25,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
18	JOSEPH MANKO 440 S. BROAD STREET UNIT 2408 PHILADELPHIA, PA 19146	\$ 7,500.	Person Payroll Noncash (Complete Part II for noncash contributions.)

Employer identification number

PHILADELPHIA FILM SOCIETY

23-3077468

Part I	Contributors (See instructions). Use duplicate copies of Part I if addition	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
19	SUZANNE NAPLES RSN FOUNDATION, 411 WISTER ROAD WYNNEWOOD, PA 19096	\$18,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
20	TURNER CLASSIC MOVIES 1050 TECHWOOD DRIVE NW ATLANTA, GA 30318	\$13,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
21	UNIVERSAL HEALTH SERVICES 367 SOUTH GULPH ROAD KING OF PRUSSIA, PA 19406	\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
623452 10-	R-16	Schedule B (Form	Person Payroll Noncash (Complete Part II for noncash contributions.)

Employer identification number

PHILADELPHIA FILM SOCIETY

art II	Noncash Property (See instructions). Use duplicate copies of Par	t II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
3	170 SHARES COVANTA HOLDING CORP	_	
			10/18/16
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
6	126 SHARES WABCO HOLDINGS, INC	_	
			10/21/16
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
6	45 SHARES WABCO HOLDINGS, INC.	_	
		<u> </u>	_04/13/16
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
12	100 SHARES UNIVERSAL DISPLAY CORP		
		s6,435.	05/24/16
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
12	100 SHARES UNIVERSAL DISPLAY CORP		<u> </u>
		\$\$.	10/14/16
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
			- ····

Employer identification number

₹ III	PHIA FILM SOCIETY xclusively religious, charitable, etc., contr te year from any one contributor. Complete of the completing Part III, enter the total of exclusively religious	nlumne (a) through (a) and the following l	ction 501(c)(7), (8), or (10) that total more than \$1,000 line entry. For organizations or the year (Enter this info, once.)		
U	se duplicate copies of Part III if additiona	al space is needed.	Child and mo. vivo.		
No. m rt l	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
_					
		(e) Transfer of gift			
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee		
No. om rt I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
		(e) Transfer of gift			
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee		
No. om rt I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
		(e) Transfer of gift			
_	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee		
No. om art l	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
_ _					
		(e) Transfer of gift			
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee		

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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, 12à, or 12b.

► Attach to Form 990.

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

OMB No. 1545-0047 6 Open to Public Inspection

Employer identification number 23-3077468

Hair	PHILADELPHIA FILM	SOCIETY	23-307	
Par		d Funds or Other Similar Funds	or Accounts.Complete it	the
1 01.	organization answered "Yes" on Form 990, Part IV, lin			
	organization answered 100 on 1011 on 1000, 1 a. 1717, in	(a) Donor advised funds	(b) Funds and other acc	ounts
	Total number at end of year			
1	Aggregate value of contributions to (during year)			
2				
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year Did the organization inform all donors and donor advisors in	that the second hold in depar advise	d funde	
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advise	Yes	☐ No
	are the organization's property, subject to the organization's	exclusive legal control?		
6	Did the organization inform all grantees, donors, and donor a	advisors in writing that grant funds can be to	sed Only	
	for charitable purposes and not for the benefit of the donor of			☐ No
T-D-	impermissible private benefit? t II Conservation Easements. Complete if the organization	regization argument "Voo" on Form 900 D		110
Par			artiv, and 7.	
1	Purpose(s) of conservation easements held by the organizat		ically important land area	
	Preservation of land for public use (e.g., recreation or	′ [ically important land area	
	Protection of natural habitat	Preservation of a certif	ed historic structure	
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a quali	ified conservation contribution in the form o	f a conservation easement of	on the last
	day of the tax year.		Held at the End o	ille lax real
а	Total number of conservation easements			
b				
С	Number of conservation easements on a certified historic st	ructure included in (a)	2c	
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic structu	e	
	listed in the National Register		2d	
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by the	organization during the tax	
	year▶			
4	Number of states where property subject to conservation ea	asement is located >		
5	Does the organization have a written policy regarding the pe			
	violations, and enforcement of the conservation easements		Yes	∟ No
6	Staff and volunteer hours devoted to monitoring, inspecting	, handling of violations, and enforcing cons	ervation easements during t	he year
_	•			
7	Amount of expenses incurred in monitoring, inspecting, han	dling of violations, and enforcing conservation	ion easements during the ye	ear
-	▶ \$	· ·		
8	Does each conservation easement reported on line 2(d) about	ove satisfy the requirements of section 170	n)(4)(B)(i)	
Ŭ	and section 170(h)(4)(B)(ii)?			i L No
9	In Part XIII, describe how the organization reports conservar	tion easements in its revenue and expense	statement, and balance she	et, and
3	include, if applicable, the text of the footnote to the organiza	ation's financial statements that describes	he organization's accountin	g for
	conservation easements.			
Pa	rt III Organizations Maintaining Collections	of Art, Historical Treasures, or O	her Similar Assets.	
	Complete if the organization answered "Yes" on Form			
	If the organization elected, as permitted under SFAS 116 (A		ent and balance sheet work	s of art,
ıa	historical treasures, or other similar assets held for public ex	whilition education or research in furthera	nce of public service, provid	e, in Part XIII,
	the text of the footnote to its financial statements that desc		, , , , , , , , , , , , , , , , , , ,	,
	If the organization elected, as permitted under SFAS 116 (A	SC 059) to roport in its revenue statement	and balance sheet works of	f art. historical
b	if the organization elected, as permitted under SFAS 110 (A	advention or received in further and of pu	lic service, provide the follo	wing amounts
	treasures, or other similar assets held for public exhibition,	education, or research in furtherance of pu	Alic service, provide the folic	wing amounto
	relating to these items:		. •	
	(i) Revenue included on Form 990, Part VIII, line 1			<u> </u>
	(ii) Assets included in Form 990, Part X			
2	If the organization received or held works of art, historical tr		gain, provide	
	the following amounts required to be reported under SFAS	116 (ASC 958) relating to these items:		
а				
	Assets included in Form 990, Part X			
	For Paperwork Reduction Act Notice, see the Instructio		Schedule D (F	orm 990) 2016

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		1,600,000.		1,600,000.
b Buildings		4,299,760.	202,910.	4,096,850.
		626,432.	64,520.	561,912.
c Leasehold improvements d Equipment	· · · · · · · · · · · · · · · ·	2,522,667.	966,296.	1,556,371.
e Other		17,171.	7,381.	9,790.
Total. Add lines 1a through 1e. (Column (d) mus			-	7,824,923.
Iotal. Add lines to unrough te. (Column (dy mus	t oquari omi ooo, i aitii qoola	(=-/)		

Schedule D (Form 990) 2016 PHILADELPHI	A FILM SOCIET	Y <u>23</u>	-3077468 Page 3
Part VII Investments - Other Securities.			_
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11b. See Form 990, Part X, line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	1-of-year market value
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			18 July 18 July 18 18 18 18 18 18 18 18 18 18 18 18 18
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)		· 考集的,企業以及議院と、時代では関係し、強	
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11c. See Form 990, Part X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or en	d-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			-
(7)			
(8)			
(9)			The contract of the contract o
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		1. 1998 计最高可数的 1万 <u>1</u> 11整数	
Part IX Other Assets.			
Complete if the organization answered "Yes	on Form 990, Part IV, line	e 11d. See Form 990, Part X, line 15.	(b) Book value
(a)	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			<u>-</u>
(5)			
(6)			
(7)			
(8)			ļ

Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Part X

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

1.	(a) Description of liability	(b) Book value
(1) Federal incor	ne taxes	10 000
(2) CAPITA	LEASE OBLIGATION	19,922.
(3)	All processing the state of the	
(4)		
(5)		
(6)		
(7)		
(8)		
(9) Total, (Column (b) m	ust equal Form 990, Part X, col. (B) line 25.)	19,922.

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

3	PHILADELPHIA	F. T I'M	SOCIETA	
,				

Par	t XI Reconciliation of Revenue per Audited Financial Stateme		de per notarni	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.			2,638,671.
1	Total revenue, gains, and other support per audited financial statements			2,030,071.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 1		
а	Net unrealized gains (losses) on investments			
b	Donated services and use of facilities	2b		
С	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		0.
е	Add lines 2a through 2d			2,638,671.
3	Subtract line 2e from line 1		3	2,030,071.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)			0
С	Add lines 4a and 4b	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	. LEPTE	5	2,638,671.
Pa	rt XII Reconciliation of Expenses per Audited Financial Statem	ents with Expe	nses per Retur	11.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a		· · · · · · · · · · · · · · · · · · ·	3,976,191.
1	Total expenses and losses per audited financial statements			3,910,191.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 1	100	
а	Donated services and use of facilities			
b	Prior year adjustments			
С	Other losses			
d	Other (Describe in Part XIII.)	. 2d		0.
е			2e	
3	Subtract line 2e from line 1		3	3,976,191.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b	. 4a		
b				^
С	Add lines 4a and 4b		4c	0.
E	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	3,976,191.

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 X, LINE 2:

THE PHILADELPHA FILM SOCIETY IS A TAX EXEMPT ORGANIZATION UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE, AND IS NOT SUBJECT TO INCOME TAX, THE SOCIETY HAD NO UNRELATED EXCEPT ON UNRELATED BUSINESS INCOME. BUSINESS INCOME FOR THE YEARS ENDED DECEMBER 31, 2016 AND 2015. ACCOUNTING PRINCIPLES GENERALLY ACCEPTED IN THE UNITED STATES OF AMERICA REQUIRE MANAGEMENT TO EVALUATE TAX POSITIONS TAKEN AND RECOGNIZE A TAX LIABILITY, IF THE ORGANIZATION HAS TAKEN AN UNCERTAIN TAX POSITION THAT MORE LIKELY THAN NOT WOULD NOT BE SUSTAINED UPON EXAMINATION BY A MANAGEMENT HAS ANALYZED THE TAX POSITIONS TAKEN BY GOVERNMENT AUTHORITY. THE SOCIETY AND HAS CONCLUDED THAT AS OF DECEMBER 31, 2016 AND 2015 THERE ARE NO UNCERTAIN TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN THAT WOULD

SCHEDULE M (Form 990)

Department of the Treasury Internal Revenue Service

Noncash Contributions

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

Attach to Form 990.

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

OMB No. 1545-0047

Open To Public Inspection

Name of the organization

PHILADELPHIA FILM SOCIETY

Employer identification number 23-3077468

Part	t I Types of Property					(d)		
		(a) Check if	(b) Number of	(c) Noncash contribution	Metho	od of determin	ing	
		applicable	contributions or	amounts reported on	noncash o	contribution ar	nounts	
			items contributed	Form 990, Part VIII, line 1g				
1 .	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods						-	
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property			24 505	TT /T OV		CTI	2011
9	Securities - Publicly traded	Х	5	31,507.	HT\TOM	DATE OF	GII	<u> </u>
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory			<u> </u>				
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens				<u> </u>			
24	Archeological artifacts							
25	Other ()							
26	Other ()							
27	Other ()						-4-4	
28	Other (
29	Number of Forms 8283 received by the organ	ization duri	ng the tax year for	contributions				
	for which the organization completed Form 82	283, Part IV,	, Donee Acknowle	dgement 29				
	,						Yes	No
30a	During the year, did the organization receive b	y contribut	ion any property r	eported in Part I, lines 1 thro	ugh 28, that it	40		
	must hold for at least three years from the dat	te of the init	tial contribution, ar	nd which isn't required to be	used for			
	exempt purposes for the entire holding period	ł?				30a	<u> </u>	X
b	If "Yes." describe the arrangement in Part II.							
31	Does the organization have a gift acceptance	policy that	requires the review	w of any nonstandard contrib	outions?	31		X
322	Does the organization hire or use third parties	or related	organizations to so	olicit, process, or sell noncas	h		1	
-La	contributions?		-			32	<u> </u>	X
h	If "Yes," describe in Part II.					1 A 6		
33	If the organization didn't report an amount in	column (c) 1	for a type of prope	rty for which column (a) is ch	ecked,			it for
	describe in Part II.	.,,				- 144		
	A For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) (2016)							

Schedule M (Form 990) (2016)

632142 08-23-16

SCHEDULE 0

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

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

6 Open to Public

OMB No. 1545-0047

Inspection

Employer identification number

Name of the organization PHILADELPHIA	FILM SOCIETY	23-3077468
FORM 990, PART I, LINE 1, DE		ON MISSION:
THROUGH INITIATIVES THAT INS	PIRE, EDUCATE, CHALLENG	E AND ENTERTAIN.
FORM 990, PART III, LINE 1,	DESCRIPTION OF ORGANIZA	TION MISSION:
ORGANIZATION MISSION		
		<u> </u>
THE PHILADELPHIA FIRM SOCIET	Y (PFS)'S MISSION IS TO	UTILIZE FILM'S
UNIQUE CAPACITY TO ENGAGE A	BROAD CROSS-SECTION OF	THE COMMUNITY, WHILE
FURTHER PROVIDING ACCESS TO	POWERFUL FILMS FROM ARC	UND THE WORLD IN
ORDER TO INCREASE EDUCATION	AND UNDERSTANDING. IT D	OCES SO BY ANNUALLY
PRODUCING A TOP-TIER FILM FE	STIVAL FEATURING THE BE	ST OF AMERICAN AND
INTERNATIONAL CINEMA, AND OF	FERING PROGRAMMING AT T	HE PRINCE AND PFS
ROXY THEATERS, THEREBY PROVI	DING DAILY ACCESS TO FI	LMS AND EXPERIENCES
FROM WHICH THE PHILADELPHIA	COMMUNITY CAN BE FURTHE	R ENGAGED AND
EDUCATED, AS WELL AS BY OFFE	RING UNIQUE AND VARIED	SCREENINGS AND
EVENTS THROUGHOUT THE YEAR T	HAT FURTHERS THE AWAREN	NESS OF FILM AS AN
IMPORTANT FORM OF ARTISTIC E	XPRESSION AND INSTRUMEN	T OF CULTURAL
CHANGE.		and the second s
	and the second s	
PFS BELIEVES IN THE POWER OF	FILM TO BE BOTH EDUCAT	TIONAL AND
TRANSFORMATIVE. FILM IS AMON	IGST THE MOST ACCESSIBLE	OF ART FORMS,
OFFERING A NATURAL PLATFORM	NOT JUST FOR ENTERTAIN	MENT, BUT ALSO FOR
PERSONAL EXPLORATION AND ENG	AGEMENT. THROUGH THE II	DEAS, VOICES AND
IMAGES OF FILMMAKERS, FILMGO	DERS GAIN NEW PERSPECTIV	JES ON THE
EXTRAORDINARY DIVERSITY OF	THOUGHT, CULTURE, LANDSO	CAPE, AND EXPERIENCE
THROUGHOUT THE WORLD.		

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

Schedule O (Form 990 or 990-EZ) (2016)

IN ADDITION TO PROVIDING PHILADELPHIA ACCESS TO AND EDUCATION THROUGH
FILMS FROM AROUND THE WORLD, PFS IS LIKEWISE COMMITTED TO BUILDING IN
PHILADELPHIA A STRONG AND VIBRANT FILM COMMUNITY. THROUGH ITS PROGRAMS,
PFS WILL HELP CREATE AN EXCITING CITYWIDE FOCUS ON FILM AND ALSO HELP
BRING GREATER OUTSIDE ATTENTION TO PHILADELPHIA AS A PLACE WHERE FILM
IS FLOURISHING. TO THIS END, IN ADDITION TO THE PRINCE THEATER WHICH
WAS PURCHASED IN 2015, PFS IS CURRENTLY USING RENTAL AND OTHER VENUES
FOR FILM PRESENTATION. THROUGH THE ACQUISITION AND OPERATION OF AN
ADDITIONAL VENUE, PFS WILL BE EVEN BETTER ABLE TO FULFILL ITS MISSION
BY PROVIDING DAILY ACCESS TO FILMS AND EXPERIENCES FROM WHICH THE
PHILADELPHIA COMMUNITY CAN BE FURTHER ENGAGED AND EDUCATED.

AS A MEMBER OF THE REGION'S LARGE NON-PROFIT ARTS COMMUNITY, PFS

ACTIVELY COLLABORATES WITH OTHER FILM AND CULTURAL ORGANIZATIONS IN

ORDER TO EXPAND THE AUDIENCE FOR HIGH QUALITY FILMS, ESPECIALLY THOSE

THAT WOULD NOT OTHERWISE BE SEEN IN PHILADELPHIA. PFS ALSO AIMS TO MAKE

A SIGNIFICANT PORTION OF ITS PROGRAMMING AVAILABLE FREE OF CHARGE IN

ORDER TO REACH THE BROADEST CROSS-SECTION OF THE COMMUNITY.

PFS AIMS TO CREATE EXPERIENCES THAT DEEPLY ENRICH THE UNDERSTANDING AND ENJOYMENT OF FILM. IN DOING SO, PFS'S GOAL IS TO BECOME PHILADELPHIA'S LEADING RESOURCE ON FILM, COLLABORATING AND PARTNERING WITH OTHER INSTITUTIONS WHILE ALSO PROVIDING FILM GUIDANCE AND EXPERTISE.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

THROUGHOUT THE CITY. PFS REGULARLY PRESENTS FILM-AND-FILM-EVENTS IN A

632212 08-25-16

Schedule O (Form 990 or 990-EZ) (2016)

PHILADELPHIA FILM SOCIETY

Employer identification number 23-3077468

VARIETY OF SETTINGS, AND ENGAGES DIFFERENT COMMUNITIES IN THINKING AND LEARNING ABOUT VISUAL MEDIA. PFS IS COMMITTED TO FURTHERING THE AWARENESS OF FILM AS AN IMPORTANT VEHICLE FOR ARTISTIC EXPRESSION AND CULTURAL CHANGE, AND OFFERS A WIDE RANGE OF CURATED SCREENINGS, DISCUSSIONS, AND EVENTS TO THAT END.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

THE PHILADELPHIA FILM FESTIVAL

THE PHILADELPHIA FILM FESTIVAL IS A TEN-DAY EVENT HELD ANNUALLY IN OCTOBER. FOUNDED IN 1992, THE FESTIVAL IS THE CENTERPIECE OF THE FILM SOCIETY'S ANNUAL PROGRAMMING, CELEBRATING THE BEST OF FILM FROM AROUND THE WORLD. CONSISTING OF NEARLY 200 SCREENINGS, OF MORE THAN 100 DOMESTIC AND INTERNATIONAL FILMS (NARRATIVE, DOCUMENTARY, AND SHORTS), THE 2016 FESTIVAL ATTRACTED NEARLY 25,000 ATTENDEES WITH A RECORD NUMBER OF ALL-ACCESS BADGES SOLD, AS WELL AS NEARLY 10,000 COMPLIMENTARY TICKETS CLAIMED VIA THE PFS ON US FREE TICKETING PROGRAM. ADDITIONALLY, THROUGH THE STUDENT SCREENING PROGRAM, MORE THAN 1,600 STUDENTS ATTENDED SCREENINGS AT THE FESTIVAL, WITH ENGAGING DISCUSSION FOLLOWING FILMS.

FORM 990, PART VI, SECTION B, LINE 11B:

THE ACCOUNTANT PREPARES THE 990 AND SUBMITS IT TO THE EXECUTIVE DIRECTOR FOR REVIEW. ANY CHANGES ARE MADE AND THE 990 IS THEN GIVEN TO THE PRESIDENT AND TREASURER OF THE BOARD FOR REVIEW AND APPROVAL.

EXPENSES \$ 260,229. INCLUDING GRANTS OF \$ 0. REVENUE \$ 192,629.

FORM 990, PART VI, SECTION B, LINE 12C:

IN CONNECTION WITH ANY ACTUAL OR POSSIBLE CONFLICT OF INTEREST, AN

INTERESTED PERSON MUST DISCLOSE THE EXISTENCE OF THE FINANCIAL INTEREST AND
BE GIVEN THE OPPORTUNITY TO DISCLOSE ALL MATERIAL FACTS TO THE DIRECTORS

AND MEMBERS OF COMMITTEES WITH BOARD DELEGATED POWERS CONSIDERING THE

PROPOSED TRANSACTION OR ARRANGEMENT.

AFTER DISCLOSURE OF THE FINANCIAL INTEREST AND ALL MATERIAL FACTS, AND

AFTER ANY DISCUSSION WITH THE INTERESTED PERSON, HE/SHE SHALL LEAVE THE

BOARD OR COMMITTEE MEETING WHILE THE DETERMINATION OF A CONFLICT OF

INTEREST IS DISCUSSED AND VOTED UPON. THE REMAINING BOARD OR COMMITTEE

MEMBERS SHALL DECIDE IF A CONFLICT OF INTEREST EXISTS.

THE MINUTES OF THE BOARD AND ALL COMMITTEES WITH BOARD DELEGATED POWERS

SHALL CONTAIN:

A. THE NAMES OF THE PERSONS WHO DISCLOSED OR OTHERWISE WERE FOUND TO HAVE A

FINANCIAL INTEREST IN CONNECTION WITH AN ACTUAL OR POSSIBLE CONFLICT OF

INTEREST, THE NATURE OF THE FINANCIAL INTEREST, ANY ACTION TAKEN TO

COMMITTEE'S DECISION AS TO WHETHER A CONFLICT OF INTEREST IN FACT EXISTED.

B. THE NAMES OF THE PERSONS WHO WERE PRESENT FOR DISCUSSIONS AND VOTES

RELATING TO THE TRANSACTION OR ARRANGEMENT, THE CONTENT OF THE DISCUSSION,

INCLUDING ANY ALTERNATIVES TO THE PROPOSED TRANSACTION OR ARRANGEMENT, AND

A RECORD OF ANY VOTES TAKEN IN CONNECTION WITH THE PROCEEDINGS.

EACH DIRECTOR, PRINCIPAL OFFICER AND MEMBER OF A COMMITTEE WITH BOARD

DETERMINE WHETHER A CONFLICT OF INTEREST WAS PRESENT, AND THE BOARD'S OR

DELEGATED POWERS SHALL ANNUALLY SIGN A STATEMENT WHICH AFFIRMS SUCH PERSON:

- A. HAS RECEIVED A COPY OF THE CONFLICTS OF INTEREST POLICY,
- B. HAS READ AND UNDERSTANDS THE POLICY,
- C. HAS AGREED TO COMPLY WITH THE POLICY, AND
- D. UNDERSTANDS THE CORPORATION IS CHARITABLE AND IN ORDER TO MAINTAIN ITS

 Schedule O (Form 990 or 990-EZ) (2016)

PHILADELPHIA FILM SOCIETY

FEDERAL TAX EXEMPTION IT MUST ENGAGE PRIMARILY IN ACTIVITIES WHICH ACCOMPLISH ONE OR MORE OF ITS TAX-EXEMPT PURPOSES.

REVIEWS SHALL, AT A MINIMUM, INCLUDE THE FOLLOWING SUBJECTS:

TO ENSURE THE CORPORATION OPERATES IN A MANNER CONSISTENT WITH CHARITABLE PURPOSES AND DOES NOT ENGAGE IN ACTIVITIES THAT COULD JEOPARDIZE ITS TAX-EXEMPT STATUS, PERIODIC REVIEWS SHALL BE CONDUCTED. THE PERIODIC

A. WHETHER COMPENSATION ARRANGEMENTS AND BENEFITS ARE REASONABLE, BASED ON COMPETENT SURVEY INFORMATION, AND THE RESULT OF ARM'S LENGTH BARGAINING.

B. WHETHER PARTNERSHIPS, JOINT VENTURES, AND ARRANGEMENTS WITH MANAGEMENT ORGANIZATIONS CONFORM TO THE CORPORATION'S WRITTEN POLICIES, ARE PROPERLY RECORDED, REFLECT REASONABLE INVESTMENT OR PAYMENTS FOR GOODS AND SERVICES, FURTHER CHARITABLE PURPOSES AND DO NOT RESULT IN INUREMENT, IMPERMISSIBLE PRIVATE BENEFIT OR IN AN EXCESS BENEFIT TRANSACTION.

FORM 990, PART VI, SECTION B, LINE 15:

THE BOARD OF DIRECTORS APPROVE ALL SALARIES PAID TO THE EMPLOYEES OF THE ENTITY. THEY BASE SALARIES ON THE WAGES PAID FOR COMPARABLE POSITIONS AND INTERNAL BUDGET CONSTRAINTS.

FORM 990, PART VI, SECTION C, LINE 19:

THE ENTITY WILL PROVIDE INFORMATION TO THE PUBLIC WHEN IT RECEIVES A WRITTEN REQUEST OR A PHONE CALL REQUESTING SUCH INFORMATION.

PART XII, LINE 2C

THE BOARD OF DIRECTORS ASSUMES OVERSIGHT OF THE AUDIT AND SELECTION OF THE INDEPENDENT ACCOUNTANT. THIS PROCESS REMAINS UNCHANGED FROM THE PRIOR YEAR.

Form **8868**

(Rev. January 2017)

Department of the Treasury Internal Revenue Service

Application for Automatic Extension of Time To File an Exempt Organization Return

File a separate application for each return.

▶ Information about Form 8868 and its instructions is at www.irs.gov/form8868 .

OMB No. 1545-1709

Electro	nic filing (e-file). You can electronically file Form 8868 to	request a	6-month automatic extension of tim	le to file and Personal Re	y or the mefit	
forms lis	ted below with the exception of Form 8870, Information F ts, for which an extension request must be sent to the IRS	teturn for	format (see instructions). For more	details on t	he electro	nic
Contrac	ts, for which an extension request must be sent to the inc this form, visit <i>www.irs.gov/efile</i> , click on Charities & Non-F	Sin paper Profito, and	d click on e-file for Charities and Not	n-Profits.	110 0100110	
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	natic 6-Month Extension of Time. Only subm					
All corp	orations required to file an income tax return other than Fo	orm 990-T	(including 1120-C filers), partnership	s, REMICs	, and trus	ts
	e Form 7004 to request an extension of time to file incom					
	·			Enter filer	's identify	ying number
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Type or	Name of exempt organization of other filer, see that a	e mandonorio.				
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due date f	1412 CHESTNUT STREET					
return. Sec instruction		oreign add	lress, see instructions.			
	PHILADELPHIA, PA 19102					
Enter th	e Return Code for the return that this application is for (fil	e a separa	ate application for each return)			0 1
Applica	ition	Return	Application			Return
Is For		Code	Is For			Code
Form 99	90 or Form 990-EZ	01	Form 990-T (corporation)			07
Form 9	90-BL	02	Form 1041-A			08
Form 4	720 (individual)	03	Form 4720 (other than individual)			09
Form 9	90-PF	04	Form 5227			10
Form 9	90-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
Form 9	90-T (trust other than above)	06	Form 8870			12
			NG & ADVISORY CORP	•		
The	books are in the care of P.O. BOX 362 -	ROCK				
Tele	phone No. ► 302-543-4564		Fax No.			
• If th	e organization does not have an office or place of busines	s in the U	nited States, check this box	If this is for	the whole	aroup check this
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box 🕨	. If it is for part of the group, check this box	NOVE:				ation return
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2 1	f the tax year entered in line 1 is for less than 12 months,	· ·	T	Final retur	<u></u> n	
2 1	Change in accounting period					
3a	f this application is for Forms 990-BL, 990-PF, 990-T, 4720	or 6069,	enter the tentative tax, less any			
	nonrefundable credits. See instructions.	,		3a	\$	0.
	f this application is for Forms 990-PF, 990-T, 4720, or 606	9, enter ar	ny refundable credits and			
	estimated tax payments made. Include any prior year over			3b	\$	0.
c E	Balance due. Subtract line 3b from line 3a. Include your p	ayment wi	ith this form, if required,		ļ	•
ŀ	ov using FFTPS (Electronic Federal Tax Payment System).	. See instr	uctions.	3c	\$	0.
Cautio	n: If you are going to make an electronic funds withdrawa	al (direct de	ebit) with this Form 8868, see Form	8453-EO a	nd Form 8	879-EO for payment
instruc	tions.					
LHA	For Privacy Act and Paperwork Reduction Act Notice	, see inst	ructions.		Forn	n 8868 (Rev. 1-2017)