PUBLIC DISCLOSURE COPY - STATE REGISTRATION NO. 4789 | 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.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

A F	or the	2023 calendar year, or tax year beginning and e	ending					
	heck if oplicable	C Name of organization		D Employer identific	cation number			
	Addres	PHILADELPHIA BAR FOUNDATION						
	Name change Initial	Doing business as		23-1660797				
	_lreturn _Final _return/	Number and street (or P.0. box if mail is not delivered to street address) 1101 MARKET STREET, 11TH FLOOR	E Telephone number 215-238-6334					
	termin ated	, , , , , , , , , , , , , , , , , , , ,		G Gross receipts \$	1,822,429.			
	Ameno return Applic	PHILADELPHIA, PA 19107	H(a) Is this a group re					
	tion pendin	F Name and address of principal officer: UESSICA FILLBURN-RUL	for subordinates					
	'av av	empt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or	r 527	H(b) Are all subordinates in	cluded? Yes No list. See instructions			
	Vebsit		1 JZ1	H(c) Group exemption				
		organization: X Corporation Trust Association Other	L Year		1 State of legal domicile: PA			
		Summary						
•	1	Briefly describe the organization's mission or most significant activities: ${ m {f THROU}}$	IGH PR	OGRAMS, GRAN	NTS, AND			
Governance		PARTNERSHIPS, THE PHILADELPHIA BAR FOUNDAT	rion r	REMOVES BARR	IERS TO			
rne	2	Check this box if the organization discontinued its operations or dispose	ed of more	1 1				
ον				3	31			
<u>ھ</u>		Number of independent voting members of the governing body (Part VI, line 1b)			31			
ies		Total number of individuals employed in calendar year 2023 (Part V, line 2a)			0			
Activities &		Total number of volunteers (estimate if necessary)			54			
Ac		Total unrelated business revenue from Part VIII, column (C), line 12			0.			
	D	Net unrelated business taxable income from Form 990-T, Part I, line 11		7b Prior Year	Current Year			
	8	Contributions and grants (Part VIII, line 1h)		638,433.	987,004.			
Revenue		Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g)		0.	0.			
		Investment income (Part VIII, column (A), lines 3, 4, and 7d)		199,037.	260,632.			
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		-31,852.	-29,168.			
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		805,618.	1,218,468.			
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		442,000.	783,438.			
		Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.			
s		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		261,882.	421,162.			
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.			
É		Total fundraising expenses (Part IX, column (D), line 25) 154,49	3.					
Ú		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		261,294.	208,481.			
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		965,176.	1,413,081.			
		Revenue less expenses. Subtract line 18 from line 12		-159,558.	-194,613.			
Net Assets or Fund Balances			Ве	ginning of Current Year	End of Year			
Sset	20	Total assets (Part X, line 16)		8,635,491. 346,377.	6,520,183.			
let /	21 22	Total liabilities (Part X, line 26) Net assets or fund balances. Subtract line 21 from line 20		8,289,114.	5,673,160.			
Pa	rt II	Signature Block		0,200,114.	3,073,100.			
		ties of perjury, I declare that I have examined this return, including accompanying schedules	and stateme	ents, and to the best of my	knowledge and belief, it is			
	-	t, and complete. Declaration of preparer (other than officer) is based on all information of which		· · ·				
Sigr	1	Signature of officer		Date				
Her		JESSICA HILBURN-HOLMES, EXECUTIVE DIRECTOR	3.					
		Type or print name and title						
		Print/Type preparer's name Preparer's signature		Date Check	PTIN			
Paid		AUDREY E. KANDEL, CPA AUDREY E. KANDEL	, CP 0	7/11/24 self-employ				
	arer	Firm's name MERCADIEN, P.C.		Firm's EIN 2	2-3271712			
Use	Only	Firm's address P.O. BOX 7648			0 (00 0700			
		PRINCETON, NJ 08543-7648		Phone no. 6 0	9-689-9700			
May	the IF	S discuss this return with the preparer shown above? See instructions			X Yes No			

Pa	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:
	THROUGH PROGRAMS, GRANTS, AND PARTNERSHIPS, THE PHILADELPHIA BAR
	FOUNDATION REMOVES BARRIERS TO JUSTICE, ENGAGES THE COMMUNITY IN
	SUPPORT OF CIVIL LEGAL AID, AND BUILDS SYSTEM-WIDE CAPACITY IN ORDER
	TO STRENGTHEN THE PROVISION OF QUALITY LEGAL SERVICES AND TO ENSURE
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.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
3	· · · · · · · · · · · · · · · · · · ·
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 748,132. including grants of \$ 748,132.) (Revenue \$)
	GRANT PROGRAMS - SUPPORT FOR LOCAL CHARITABLE ORGANIZATIONS THAT
	PROVIDE LEGAL SERVICES TO THE POOR, DISABLED, ELDERLY AND CHILDREN,
	WHO, IF NOT FOR THESE AGENCIES, WOULD HAVE NOWHERE ELSE TO TURN.
4b	(Code:) (Expenses \$35,306. including grants of \$35,306.) (Revenue \$)
40	FELLOWSHIP, AWARD AND RECOGNITION PROGRAMS - PROMOTING PUBLIC INTEREST
	LEGAL SERVICE AS A VIABLE CAREER CHOICE FOR STUDENTS AND YOUNG LAWYERS.
	DEGAL DERVICE AD A VIADUE CAREER CHOICE FOR DIODENID AND TOONG DAWLERD.
	100 644
4c	
	PROGRAM DEVELOPMENT TO ASSESS CIVIL LEGAL NEEDS AND BUILDING TOOL TO
	ALLOW INDIVIDUALS TO ACESS THOSE SERVICES NEEDED AND ALL OTHER SERVICES
	INCLUDING PRO BONO NEEDS ASSESSMENT, EVENTS, AND OUTREACH.
4.4	Other program convices (Describe on Schedule O.)
40	Other program services (Describe on Schedule O.)
_	(Expenses \$ including grants of \$) (Revenue \$)
<u>4e</u>	Total program service expenses 964,082.
	Form 990 (2023)

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		_X_
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		_X_
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		_X_
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	X	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		_X_
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		_X_
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		<u>X</u>
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		х	
L	Part VI	11a	^	
D	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	441.		х
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		
C	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	11c		Х
А	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 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	110		
u		11d		Х
۵	Part X, line 16? If "Yes," complete Schedule D, Part IX Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	110		
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		Х
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
-	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
_	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I, Parts I and II	21	Х	

Part IV	Checklist of Required Schedules	(continued)

	·		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes." complete			
	Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>			
_	"Yes," complete Schedule L, Part IV	28a		Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If</i>			
•	"Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes," <i>complete</i>	<u> </u>		
-	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
-	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	Х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X	
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	000		
_	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
		38	Х	
Pai	Note: All Form 990 filers are required to complete Schedule O 't V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	
			000	(2022)

023) PHILADELPHIA BAR FOUNDATION Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V

			Yes	No						
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,									
	filed for the calendar year ending with or within the year covered by this return									
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b								
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X						
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b								
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a									
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X						
b	If "Yes," enter the name of the foreign country									
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).									
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X						
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х						
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c								
6a										
	any contributions that were not tax deductible as charitable contributions?	6a		X						
р	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts									
-	were not tax deductible?	6b								
7	Organizations that may receive deductible contributions under section 170(c). 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?	7-		Х						
a		7a 7b		Λ						
b	If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	7.5								
С	to file Form 8282?	7c		Х						
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d	70								
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х						
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								
h										
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the									
	sponsoring organization have excess business holdings at any time during the year?	8								
9	Sponsoring organizations maintaining donor advised funds.									
a Did the sponsoring organization make any taxable distributions under section 4966?										
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b								
10	Section 501(c)(7) organizations. Enter:									
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									
b	Gross income from other sources. (Do not net amounts due or paid to other sources against									
	amounts due or received from them.)									
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a								
	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. Is the organization licensed to issue qualified health plans in more than one state?	13a								
а	Note: See the instructions for additional information the organization must report on Schedule O.	ISa								
b	Enter the amount of reserves the organization is required to maintain by the states in which the									
-	organization is licensed to issue qualified health plans									
С	Enter the amount of reserves on hand 13c									
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х						
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b								
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or									
	excess parachute payment(s) during the year?	15		Х						
	If "Yes," see the instructions and file Form 4720, Schedule N.									
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х						
	If "Yes," complete Form 4720, Schedule O.									
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities									
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17								
	If "Yes," complete Form 6069.									

Form **990** (2023) 332005 12-21-23

PHILADELPHIA BAR FOUNDATION 23-1660797 Form 990 (2023) Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management No Yes 31 **1a** Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. 31 **b** Enter the number of voting members included on line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 Х of officers, directors, trustees, or key employees to a management company or other person? 3 X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? 6 6 Х 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? Х 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? X 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Х a The governing body? 8a **b** Each committee with authority to act on behalf of the governing body? Х 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes." provide the names and addresses on Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Nο 10a Did the organization have local chapters, branches, or affiliates? 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Х 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe on Schedule O the process, if any, used by the organization to review this Form 990. Х 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Х b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe Х 12c on Schedule O how this was done Did the organization have a written whistleblower policy? Х 13 13 14 Х Did the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? Х The organization's CEO, Executive Director, or top management official 15a Х Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a Х taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16h Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed PA, NJ Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. X Upon request Another's website ___ Other (explain on Schedule O) Own website Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

Form **990** (2023)

FLOOR, PHILADELPHIA,

State the name, address, and telephone number of the person who possesses the organization's books and records

PAUL KIRK - 215-238-6334 1101 MARKET STREET, 11TH

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

X Check this box if neither the organization ne	or any related	orga	niza	tion	con	nper	sat	ed any current officer, di	rector, or trustee.	
(A)	(B)	(C)						(D)	(E)	(F)
Name and title	Average	(do	Position (do not check more than one		Reportable	Reportable	Estimated			
	hours per	box, unless person is both an officer and a director/trustee)		compensation	compensation	amount of				
	week	_				1		from	from related organizations	other
	(list any hours for	director				_		the organization	(W-2/1099-MISC/	compensation from the
	related	9e or	stee			nsate		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	truste	al tru		oyee	n be		1099-NEC)	, , , , , , , , , , , , , , , , , , , ,	and related
	below	ndividual trustee or	Institutional trustee	er	Key employee	Highest compensated employee	Jer.			organizations
	line)	indi	Insti	Officer	Key	High	Former			
(1) JESSICA HILBURN-HOLMES	35.00									_
EXECUTIVE DIRECTOR	10.00			Х				0.	0.	0.
(2) PAUL KIRK	30.00	-		l						
DIRECTOR OF OPERATIONS	10.00			Х				0.	0.	0.
(3) NIKI T. INGRAM	5.00			l						•
PRESIDENT	F 00	Х		Х				0.	0.	0.
(4) JOSHUA D. SNYDER	5.00			,,						•
VICE PRESIDENT	F 00	Х		Х				0.	0.	0.
(5) MARK A. GITTELMAN	5.00	3,7		,,					0	•
TREASURER	F 00	Х		Х				0.	0.	0.
(6) WILL W. SACHSE	5.00	.,		,,						•
ASSISTANT TREASURER	F 00	Х		Х				0.	0.	0.
(7) LAWRENCE F. WALKER	5.00			,,						•
SECRETARY	F 00	Х		Х				0.	0.	0.
(8) LESLIE E. JOHN	5.00			,,						•
DIVERSITY EQUITY AND INCLUSION OFFIC	F 00	X		Х				0.	0.	0.
(9) JENNEDY S. JOHNSON	5.00	37		7,7					0	•
DIVERSITY EQUITY AND INCLUSION OFFIC	1 00	Х		Х				0.	0.	0.
(10) DANIEL AIKEN TRUSTEE	1.00	Х						0.	0.	0.
(11) MEREDITH S. AUTEN	1.00	Λ						1	0.	<u> </u>
TRUSTEE	1.00	Х						0.	0.	0.
(12) ROBERTA BARSOTTI	1.00	Λ						0.	0.	<u> </u>
TRUSTEE	1.00	Х						0.	0.	0.
(13) JENNIFER L. BEIDEL	1.00	21							.	<u></u>
TRUSTEE	1.00	Х						0.	0.	0.
(14) ANDREW W. BOCZKOWSKI	1.00							•	•	
TRUSTEE		х						0.	0.	0.
(15) CHRISTIAN W. CASTILE, ESQ	1.00									<u> </u>
TRUSTEE		Х						0.	0.	0.
(16) JENNIFER S. COATSWORTH	1.00									
TRUSTEE		Х						0.	0.	0.
(17) RASHEEN DAVIS MERRITT	1.00									
TRUSTEE		Х						0.	0.	0.

332007 12-21-23

Form 990 (2023)

Part VII Section A Officers Directors Trus	V F											i ago -
Occilon A. Omcers, Directors, 1143		ріоу І	ees,			gnes	St C		, ,	$\overline{}$	(F)	
(A)	(B) Average	(C) Position						(D)	(E)		(F)	
Name and title	hours per		not c	heck	more	than		Reportable compensation	Reportable compensation	.	Estima amour	
	week		, unle: cer ar					from	from related		othe	
	(list any	tor						the	organizations		compen	
	hours for	r director				pa		organization	(W-2/1099-MISC	/(from	
	related	stee o	ustee			ensat		(W-2/1099-MISC/	1099-NEC)		organiz	ation
	organizations	al trus	onal tı		employee	Som E		1099-NEC)			and rel	
	below line)	Individual trustee or	nstitutional trustee	Officer	y emp	Highest compensated employee	Former				organiza	ations
(18) JOHN W. DEVINE	1.00	드	드	₩	Key	를 들	요			\dashv		
TRUSTEE	1.00	Х						0.		٥.		0.
(19) CHRISTOPHER D. DURHAM	1.00					\vdash			<u>'</u>	" 		
TRUSTEE	1.00	Х						0.		٥.		0.
(20) MELANIE J. FOREMAN	1.00	25						•		-		
TRUSTEE	1.00	х						0.		٥.		0.
(21) MATTHEW A. GRUBMAN	1.00	25						•		-		
TRUSTEE	1.00	х						0.		٥.		0.
(22) MATTHEW A. HAMERMESH	1.00					\vdash		· ·		•		
TRUSTEE	1.00	х						0.		٥.		0.
(23) TIM J. HOBAN	1.00					\vdash		<u> </u>		" 		
TRUSTEE	100	х						0.		٥.		0.
(24) PATRICK HOWARD	1.00									*		
TRUSTEE		x						0.		٥.		0.
(25) HARVEY L. HURDLE JR.	1.00	1										
TRUSTEE		х						0.		0.		0.
(26) KATAYUN I. JAFFARI	1.00	1										
TRUSTEE		x						0.		0.		0.
1b Subtotal								0.		0.		0.
c Total from continuation sheets to Part VI								0.		0.		0.
d Total (add lines 1b and 1c)								0.		0.		0.
2 Total number of individuals (including but n								eceived more than \$100,	000 of reportable			
compensation from the organization						,			•			0
· · · · · · · · · · · · · · · · · · ·											Yes	s No
3 Did the organization list any former officer,	director, trust	ee, k	кеу е	empl	oye	e, or	hig	hest compensated emp	loyee on			
line 1a? If "Yes," complete Schedule J for si										[3	X
4 For any individual listed on line 1a, is the su	m of reportabl	le co	mpe	ensa	tion	and	oth	ner compensation from t	he organization			
and related organizations greater than \$150	0,000? If "Yes,	" co	mple	ete S	Sche	edule	J f	or such individual		[4	X
5 Did any person listed on line 1a receive or a												
rendered to the organization? If "Yes." com	plete Schedule	e J f	or su	ıch <u>ı</u>	oers	on					5	X
Section B. Independent Contractors												
1 Complete this table for your five highest co										nsat	ion from	
the organization. Report compensation for	the calendar ye	ear e	endir	ng w	ith c	or wi	thin	the organization's tax y	ear.			
(A)				_				(B)		_	(C)	
Name and business	address	N	INC	5			_	Description of s	services	Compensation		
							_					
							\dashv		+	—		
							-					

\$100,000 of compensation from the organization 0
SEE PART VII, SECTION A CONTINUATION SHEETS

Total number of independent contractors (including but not limited to those listed above) who received more than

Form **990** (2023)

Form 990 PHILADELPHIA BAR FOUNDATION								23-1660797					
Part VII Section A. Officers, Directors, Tr	ustees, Key Er	nplo	yee	s, aı	nd H	lighe	est (Compensated Employe	ees (continued)				
(A)	(B)				C)			(D) (E) (F)					
Name and title	Average				ition			Reportable	Reportable	Estimated			
	hours	(cl				hat apply)		compensation	compensation	amount of			
	per	Ť				Ė	<u> </u>	from	from related	other			
	week					yee		the	organizations	compensation			
	(list any	rector				em plc		organization	(W-2/1099-MISC)	from the			
	hours for	ordi	e e			ated		(W-2/1099-MISC)		organization			
	related organizations	ustee	trust		99	ubeus				and related organizations			
	below	dual tr	tional	١.	n ploy	stcon	_			organizations			
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former						
(27) KRYSTAL KANE	1.00												
TRUSTEE		Х						0.	0.	0.			
(28) BRENT W. LANDAU	1.00												
TRUSTEE		Х						0.	0.	0.			
(29) CHERYL D. MADDOX	1.00												
TRUSTEE		Х						0.	0.	0.			
(30) JEREMY A. MENKOWITZ	1.00								-	-			
TRUSTEE		Х						0.	0.	0.			
(31) HARSINIE W. PANDITARATNE	1.00												
TRUSTEE		Х						0.	0.	0.			
(32) JENNIE PHILIP	1.00												
TRUSTEE		Х						0.	0.	0.			
(33) MELISSA RUTH	1.00												
TRUSTEE		Х						0.	0.	0.			
(34) LISA M. SCIDURLO	1.00								_	_			
TRUSTEE		Х						0.	0.	0.			
(35) ZACHARY STRASSBURGER	1.00									•			
TRUSTEE	1 00	Х						0.	0.	0.			
(36) ROBIN P. SUMNER	1.00	~							_	0			
TRUSTEE (37) PATRICE A. TOLAND	1.00	Х						0.	0.	0.			
TRUSTEE	1.00	Х						0.	0.	0.			
(38) MARC J. ZUCKER	1.00	Λ						0.	0.	0.			
TRUSTEE	1.00	Х						0.	0.	0.			
THOU THE	+	22						•	•	0.			
		l											
Total to Part VII, Section A, line 1c													

Form 990 (2023) PHILADE
Part VIII Statement of Revenue

			Check if Schedule O contains a	response o	or note to any lin	e in this Part VIII			
					,	(A)	(B)	(C)	(D)
						Total revenue	Related or exempt	Unrelated	Revenue excluded from tax under
							function revenue	business revenue	sections 512 - 514
SS	1	_	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts			Membership dues	1b					
S S			Fundraising events		117,490.				
fts,			Related organizations	1d	111,450.				
ij gi									
ons,			Government grants (contributions)	1e					
utio er (T	All other contributions, gifts, grants, and		869,514.				
Ĕ			similar amounts not included above		009,514.				
ont		_	Noncash contributions included in lines 1a-1f	1g \$		007 004			
O g		n	Total. Add lines 1a-1f			987,004.			
	_				Business Code				
<u>ic</u>	2	а							
erv		b							
n S		С							
ran 3ev		d							
Program Service Revenue		е							_
Ē			All other program service revenue \dots						
		g	Total. Add lines 2a-2f						
	3		Investment income (including divider	nds, intere	st, and				
			other similar amounts)			193,961.			193,961.
	4		Income from investment of tax-exem	pt bond pr	roceeds				
	5		Royalties						
			(i)	Real	(ii) Personal				
	6	а	Gross rents 6a						
		b	Less: rental expenses 6b						
		С	Rental income or (loss) 6c						
		d	Net rental income or (loss)						
	7	а	Gross amount from sales of (i) Se	ecurities	(ii) Other				
			assets other than inventory 7a 641	,464.					
		b	Less: cost or other basis						
ē			and sales expenses 76 574	,793.					
her Revenue		С	Gain or (loss) 7c 66	,671.					
Je V			Net gain or (loss)			66,671.			66,671.
e	8		Gross income from fundraising events (n			·			
윰	_	-	including \$ 117,490.						
			contributions reported on line 1c). Se	I					
			Part IV, line 18	I	0.				
		h	Less: direct expenses		29,168.				
			Net income or (loss) from fundraising			-29,168.			-29,168.
			Gross income from gaming activities			==, ===			= 5 , = 0 0 0
	•	u	Part IV, line 19						
		h	Less: direct expenses						
			Net income or (loss) from gaming act						
			Gross sales of inventory, less returns						
	10	а	•						
		L-	and allowances						
			Less: cost of goods sold						
$\overline{}$		С	Net income or (loss) from sales of inv	entory	Business Code				
S					Dusiness Code				
Miscellaneous Revenue	11								
llan Ven		b							
sce Be		C	All ables a versions						
Ξ̈́			All other revenue						
			Total. Add lines 11a-11d			1 210 460	^	^	221 464
	12		Total revenue. See instructions	<u></u>		1,218,468.	0.	0.	231,464.

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (**D**) Fundraising expenses (C) Management and general expenses Do not include amounts reported on lines 6b. Total expenses Program service expenses 7b, 8b, 9b, and 10b of Part VIII. Grants and other assistance to domestic organizations 748,132. 748,132. and domestic governments. See Part IV, line 21 Grants and other assistance to domestic 35,306. 35,306. individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 62,292. 78,908. 193,054. 51,854. trustees, and key employees Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 195,064. 62,752. 79,978. 52,334. Other salaries and wages 7 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 5,970. 2,085. 2,183. 1,702. Other employee benefits 9 27,074. 8,766. 11,075. 10 Payroll taxes Fees for services (nonemployees): Management Legal 15,178. 4,897. 6,204. 4,077. Accounting Lobbying Professional fundraising services. See Part IV, line 17 49,333. 49,333. Investment management fees Other. (If line 11g amount exceeds 10% of line 25, 67,692. 21,842. 27,668. 18,182. column (A), amount, list line 11g expenses on Sch O.) 225. 225. Advertising and promotion 12 33,127. 10,105. 13,195. 9,827. Office expenses 13 30,871. 3,790. 21,035. 6,046. Information technology 14 15 Royalties 16 Occupancy 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 19 8,064. 2,602. 3,296. 2,166. 20 Payments to affiliates 21 365. 118. 149. 98. Depreciation, depletion, and amortization 22 3,626. 1,170. 1,482. 974. 23 Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.) All other expenses 1,413,081. 964,082. 294,506. 154,493. Total functional expenses. Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)

Form **990** (2023)

Form 990 (2023)
Part X | Balance Sheet

Par	rt 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			101,197.	1	46,362.
	2	Savings and temporary cash investments			16,890.	2	5,426.
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net		85,401.	4	75,520.	
	5	Loans and other receivables from any current					
		trustee, key employee, creator or founder, su					
		controlled entity or family member of any of t		5			
	6	Loans and other receivables from other disqu	sons (as defined				
		under section 4958(f)(1)), and persons describ		6			
<u>ν</u>	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
۲	9	Donate Salar and the salar and			6,305.	9	14,018.
	10a	Land, buildings, and equipment: cost or other	r				
		basis. Complete Part VI of Schedule D	10a	209,016.			
	b	Less: accumulated depreciation	10b	208,284.	1,097. 6,133,431.	10c	732. 6,378,125.
	11	Investments - publicly traded securities		6,133,431.	11	6,378,125.	
	12	Investments - other securities. See Part IV, lin			12		
	13	Investments - program-related. See Part IV, lii		13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11	2,291,170.	15	0.		
	16	Total assets. Add lines 1 through 15 (must e			8,635,491.	16	6,520,183. 66,395.
	17	Accounts payable and accrued expenses	 	113,182.	17	66,395.	
	18	Grants payable		18			
	19	Deferred revenue			19		
	20	Tax-exempt bond liabilities				20	F20 044
	21	Escrow or custodial account liability. Comple				21	529,844.
es	22	Loans and other payables to any current or fo					
Liabilities		trustee, key employee, creator or founder, su					
lak		controlled entity or family member of any of t				22	
_	23	Secured mortgages and notes payable to uni			159,808.	23	156,241.
	24	Unsecured notes and loans payable to unrela			133,000.	24	130,241
	25	Other liabilities (including federal income tax,					
		parties, and other liabilities not included on li			73,387.	25	94,543.
	26	of Schedule D			346,377.	25 26	847,023.
	20	Organizations that follow FASB ASC 958, or	hock hore	X	340,3774	20	047,025
Se l		and complete lines 27, 28, 32, and 33.	TICCK TICK				
Š	27	• , , ,			7,633,376.	27	5,536,443.
3ale	28				655,738.	28	136,717.
<u>Б</u>		Organizations that do not follow FASB ASG					
필		and complete lines 29 through 33.					
ō	29	Capital stock or trust principal, or current fun			29		
sets	30	Paid-in or capital surplus, or land, building, or				30	
Ass	31	Retained earnings, endowment, accumulated				31	
Net Assets or Fund Balances	32				8,289,114.	32	5,673,160.
_	33	Total liabilities and net assets/fund balances		8,635,491.	33	6,520,183.	

Form **990** (2023)

Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,21		
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,41	3,0	81.
3	Revenue less expenses. Subtract line 2 from line 1	3	-19	4,6	13.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	8,28	9,1	14.
5	Net unrealized gains (losses) on investments	5	37	2,2	10.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8	-49	2,7	28.
9	Other changes in net assets or fund balances (explain on Schedule O)	9	-2,30	0,8	23.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	coluṃn (B))	10	5,67	3,1	<u>60.</u>
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
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 on Schedule	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		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				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	Separate basis X Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	edule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				1
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		
			Form	990	(2023)

SCHEDULE A

(Form 990)

Total

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

Open to Public Inspection

Name of the organization

PHILADELPHIA BAR FOUNDATION

Employer identification number

OMB No. 1545-0047

23-1660797 Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 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.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X 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 10 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.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on 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 I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other in your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes above (see instructions))

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	ction A. Public Support						
	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and	. ,					
	membership fees received. (Do not						
	include any "unusual grants.")	615,616.	793,571.	806,667.	638,433.	987,004.	3841291.
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	615,616.	793,571.	806,667.	638,433.	987,004.	3841291.
	The portion of total contributions	,		•	,	•	
_	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4.						3841291.
	etion B. Total Support						001111
	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Amounts from line 4	615,616.	793,571.	806,667.	638,433.		3841291.
	Gross income from interest,		,			,	
_	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	191,068.	137.083.	161.436.	158,287.	193.961.	841.835.
9	Net income from unrelated business	,	,	,	,	,	,
_	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						4683126.
	Gross receipts from related activities,	etc. (see instructio	ns)			12	
	First 5 years. If the Form 990 is for th	•				-	
	organization, check this box and stor	-		· · · · · · · · · · · · · · · · · · ·			
Sec	ction C. Computation of Publi						
14	Public support percentage for 2023 (li	ine 6, column (f), di	vided by line 11, o	column (f))		14	82.02 %
15	Public support percentage from 2022	Schedule A, Part I	I, line 14			15	79.74 %
16a	33 1/3% support test - 2023. If the o	organization did no	t check the box or	n line 13, and line 1	14 is 33 1/3% or m	ore, check this box	k and
	stop here. The organization qualifies						77
b	33 1/3% support test - 2022. If the o	organization did no	t check a box on li	ne 13 or 16a, and	line 15 is 33 1/3%	or more, check thi	s box
	and stop here. The organization qual	ifies as a publicly s	upported organiza	tion			
17a	10% -facts-and-circumstances test						
	and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization						
	meets the facts-and-circumstances te			-			
b	10% -facts-and-circumstances test	_		• • •	-		
	more, and if the organization meets th	_					
	organization meets the facts-and-circu				· ·		
18	Private foundation. If the organization	n did not check a l	oox on line 13, 16a	a, <u>16b, 17a, or 1</u> 7b	, check this box ar	nd see instructions	
				· · · · · · · · · · · · · · · · · · ·			(Form 990) 2023

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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) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not	ļ					
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in any activity that is related to the	ļ					
	organization's tax-exempt purpose						
3	Gross receipts from activities that						
	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						
78	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
k	Amounts included on lines 2 and 3 received from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
	ction B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Amounts from line 6 Gross income from interest,						
IUa	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired ofter June 20, 1075						
,	Add lines 10a and 10b						
	Net income from unrelated business						
	activities not included on 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						
13	assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12.)						
	First 5 years. If the Form 990 is for the	ne organization's fir	rst. second. third. 1	ourth, or fifth tax	vear as a section 5	01(c)(3) organizatio	on.
	check this box and stop here			· · · · · · · · · · · · · · · · · · ·			
Se	ction C. Computation of Publi	c Support Per	centage				
15	Public support percentage for 2023 (I	ine 8, column (f), d	ivided by line 13, o	column (f))		15	%
	Public support percentage from 2022					16	%
Se	ction D. Computation of Inves	tment Income	Percentage				
17	7 Investment income percentage for 2023 (line 10c, column (f), divided by line 13, column (f)) 17 %						
	18 Investment income percentage from 2022 Schedule A, Part III, line 17						
19a	33 1/3% support tests - 2023. If the	organization did n	ot check the box o	on line 14, and line	15 is more than 3	3 1/3%, and line 1	7 is not
	more than 33 1/3%, check this box ar	nd stop here. The	organization qualit	fies as a publicly s	upported organiza	tion	
b	33 1/3% support tests - 2022. If the	organization did n	ot check a box on	line 14 or line 19a	, and line 16 is mo	re than 33 1/3%, a	nd
	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization	n did not check a	box on line 14, 19a	a, or 19b, check th	is box and see ins	tructions	

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Part IV | Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section 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 lines 3b and 3c 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 box 12a or 12b in Part I, answer lines 4b and 4c 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 lines 5b and 5c 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 (as 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).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7?

 If "Yes." complete Part I of Schedule L (Form 990).
- 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 on 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 on 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 line 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	No
1			
-			
2			
38	3		
3k)		
30	;		
48	3		
41)		
40	:		
58	3		
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ule A (F		n 9901	2023

332024 12-21-23 Schedule A (Form 990) 2023

Par	rt IV Supporting Organizations (continued)			
	Test a serv		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sect	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's office	ers,		
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one suppo	rted		
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among t			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
800	the supported organization(s). stion D. All Type III Supporting Organizations	1		
Sec	Stion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
•	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	2		
3	the organization maintained a close and continuous working relationship with the supported organization(s). By reason of the relationship described on line 2, above, did the organization's supported organizations have a	2		
3	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	stion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instru	uctions).		
a		,.		
b				
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity	/ (see instruction	ns)	
2	Activities Test. Answer lines 2a and 2b below.	(000 11.00 000.01	Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2 a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а				
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			

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of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.

Schedule	A (Form	990)	2023

5

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

<u>4</u> 5

6

Enter greater of line 2 or line 3

instructions).

Income tax imposed in prior year

emergency temporary reduction (see instructions)

Distributable Amount. Subtract line 5 from line 4, unless subject to

Par	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	inizations _{(continued}	<u>d)</u>	
Secti	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exe	mpt purposes		1	
2	Amounts paid to perform activity that directly furthers exemp	ot purposes of supported			
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpose	S	3		
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro		5		
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	ne organization is responsive			
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2023 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount		1	10	
		(i)	(ii)		(iii)
Secti	on E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions Pre-2023		Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2023 (reason-				
	able cause required - explain in Part VI). See instructions.			_	
3	Excess distributions carryover, if any, to 2023				
a	From 2018				
b	From 2019				
c	From 2020				
<u>d</u>	From 2021				
е	From 2022				
f_	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years			_	
<u>h</u>	Applied to 2023 distributable amount				
<u>i</u>	Carryover from 2018 not applied (see instructions)				
<u>i_</u>	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2023 from Section D,				
	line 7: \$			_	
<u>a</u>	Applied to underdistributions of prior years			_	
<u>b</u>	Applied to 2023 distributable amount				
<u> </u>	Remainder. Subtract lines 4a and 4b from line 4.			_	
5	Remaining underdistributions for years prior to 2023, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2023. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2024. Add lines 3j				
	and 4c.				
88	Breakdown of line 7:				
	Excess from 2019				
	Excess from 2020				
	Excess from 2021				
	Excess from 2022				
_	Excess from 2023				

Schedule A (Form 990) 2023

Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2023

Name of the organization

PHILADELPHIA BAR FOUNDATION

23-1660797

Organization type (check 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 foundation				
		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				
		covered by the General Rule or a Special Rule. 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.				
General	Rule					
	-	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.				
Special I	Rules					
	sections 509(a)(1) a contributor, during	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; line 1. Complete Parts I and II.				
	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.					
	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year\$					
Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).						

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

Schedule B (Form 990) (2023)

Schedule B (Form 990) (2023)

Name of organization Employer identification number

PHILADELPHIA BAR FOUNDATION

23-1660797

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$393,697.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$ 62,857.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$35,000.	Person X Payroll
(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 Oncash 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.)

Name of organization Employer identification number

PHILADELPHIA BAR FOUNDATION

23-1660797

Part II	Noncash Property (see instructions). Use duplicate copies of Part 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				
		\$					
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received				
		\$					
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received				
		\$					
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received				
		\$					
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received				
		\$					
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received				
		\$					

Schedule B (Form 990) (2023) Page **4**

Name of organization **Employer identification number** PHILADELPHIA BAR FOUNDATION 23-1660797 Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) \$ Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

323454 12-26-23

Schedule B (Form 990) (2023)

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

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

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

OMB No. 1545-0047 Inspection

Name of the organization

PHILADELPHIA BAR FOUNDATION

Employer identification number 23-1660797

Par			Accounts. Complete if the			
	organization answered "Yes" on Form 990, Part IV, lir	(a) Donor advised funds	(b) Funds and other accounts			
4	Total number at and of year	(a) Berief davised failed	6			
1 2	Total number at end of year Aggregate value of contributions to (during year)		55,845.			
3	Aggregate value of grants from (during year)		18,729.			
4	Aggregate value at end of year		529,844.			
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advised for				
J	are the organization's property, subject to the organization's	_				
6	Did the organization of property, subject to the organization of Did the organization inform all grantees, donors, and donor a		······································			
Ū	for charitable purposes and not for the benefit of the donor of					
			TT			
Par			IV, line 7.			
1	Purpose(s) of conservation easements held by the organizati		,			
	Preservation of land for public use (for example, recrea		storically important land area			
	Protection of natural habitat Preservation of a certified historic structure					
	Preservation of open space					
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form of a	conservation easement on the last			
	day of the tax year.		Held at the End of the Tax Year			
а	Total number of conservation easements		2a			
b						
С	Number of conservation easements on a certified historic str	ructure included on line 2a	2c			
d	Number of conservation easements included on line 2c acqu	ired after July 25, 2006, and not				
	on a historic structure listed in the National Register		2d			
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the orga	anization during the tax			
	year					
4	Number of states where property subject to conservation ea	sement is located				
5	Does the organization have a written policy regarding the pe	riodic monitoring, inspection, handling of				
	violations, and enforcement of the conservation easements i					
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing conserva	tion easements during the year			
7	Amount of our angeling inspirituring inspiri	dling of violetions and enforcing concernation	accompants during the year			
7	Amount of expenses incurred in monitoring, inspecting, hand	diling of violations, and emorcing conservation	easements during the year			
8	Does each conservation easement reported on line 2d above	e satisfy the requirements of section 170(h)(4)(F	3)(i)			
	and section 170(h)(4)(B)(ii)?					
9	In Part XIII, describe how the organization reports conservati					
	balance sheet, and include, if applicable, the text of the footi	•				
	organization's accounting for conservation easements.	3				
Par		f Art, Historical Treasures, or Other	Similar Assets.			
	Complete if the organization answered "Yes" on Form	n 990, Part IV, line 8.				
1a	If the organization elected, as permitted under FASB ASC 95	58, not to report in its revenue statement and b	valance sheet works			
	of art, historical treasures, or other similar assets held for pul	blic exhibition, education, or research in furthe	rance of public			
	service, provide in Part XIII the text of the footnote to its final	ncial statements that describes these items.				
b	If the organization elected, as permitted under FASB ASC 95	58, to report in its revenue statement and balar	nce sheet works of			
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in furtherar	nce of public service,			
	provide the following amounts relating to these items.					
	(i) Revenue included on Form 990, Part VIII, line 1		\$			
2	If the organization received or held works of art, historical tre					
	the following amounts required to be reported under FASB A	ASC 958 relating to these items:				
а	Revenue included on Form 990, Part VIII, line 1		\$			
b	Assets included in Form 990, Part X					
LHA	For Paperwork Reduction Act Notice, see the Instruction	s for Form 990.	Schedule D (Form 990) 2023			

332051 09-28-23

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

Schedule D (Form 990) 2023

732

e Other

209,016.

b Buildingsc Leasehold improvements

d Equipment

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

208,284

(a) Description of security or category (including name of security)	(b) Book value	11b. See Form 990, Part X, line 12. (c) Method of valuation: Cost or er	nd-of-vear market value
A) Francisco	(b) book value	(c) Method of Valuation. Cost of el	iu-oi-year market value
Financial derivatives			
Closely held equity interests			
Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
tal. (Col. (b) must equal Form 990, Part X, line 12, col. (B))			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" or	n Form 990, Part IV, line		
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or er	id-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
otal. (Col. (b) must equal Form 990, Part X, line 13, col. (B)) Part IX Other Assets Complete if the organization answered "Yes" or	n Form 990. Part IV. line	11d. See Form 990. Part X. line 15.	
	escription		(b) Book value
(1)			(, =
• •			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			1
(8)			
(9)			
otal. (Column (b) must equal Form 990, Part X, line 15, col.	(B))		
Part X Other Liabilities			
Complete if the organization answered "Yes" or	n Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 2	
(a) Description of liability			(b) Book value
(1) Federal income taxes			
(2) LINE OF CREDIT			54,00
(3) DUE TO PHILADELPHIA BAR			
(4) ASSOCIATION			40,54
(5)			1
(6)			1
(7)			†
· ·			
(8)			+
(0)			
(9) otal. (Column (b) must equal Form 990, Part X, line 25, col.	(D))		94,5

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 FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2023

Pai	Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return					
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.					
1	Total revenue, gains, and other support per audited financial statements			1	1,570,513.	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
а	Net unrealized gains (losses) on investments	2a	372,210.			
b	Donated services and use of facilities	2b				
С		2c				
d		2d				
е	Add lines 2a through 2d			2e	372,210.	
3	Subtract line 2e from line 1			3	1,198,303.	
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	49,333.			
b	Other (Describe in Part XIII.)	4b	-29,168.			
С	Add lines 4a and 4b			4c	20,165.	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	1,218,468.	
Pa	t XII Reconciliation of Expenses per Audited Financial Statement	s Wit	h Expenses per R	leturr	า	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.					
1	Total expenses and losses per audited financial statements			1	3,693,739.	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:					
а	Donated services and use of facilities	2a				
b	Prior year adjustments	2b				
С	Other losses	2c				
d	Other (Describe in Part XIII.)	2d	2,329,991.			
е	Add lines 2a through 2d			2e	2,329,991.	
3	Subtract line 2e from line 1			3	1,363,748.	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	49,333.			
b	Other (Describe in Part XIII.)	4b				
С	Add lines 4a and 4b			4c	49,333.	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	1,413,081.	
	t XIII Supplemental Information					
Prov	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, \parallel	lines 1	o and 2b; Part V, line 4;	; Part >	K, line 2; Part XI,	
lines	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any addition	al info	rmation.			
PAI	RT IV, LINE 2B:					

THE ORGANIZATION HOLDS INVESTMENTS FOR OTHER ORGANIZATIONS AND ADMINISTERS GRANTS/ DISBURSEMENTS PER THE OTHER ENTITIES INSTRUCTIONS.

PART V, LINE 4:

THE FOUNDATION'S BY-LAWS AND WRITTEN INVESTMENT POLICY LIMITS WITHDRAWALS FROM THE FUND FOR GRANT MAKING PURPOSES DEPENDING ON THE AVAILABILITY OF GENERAL OPERATING FUNDS. THE BY-LAWS AND INVESTMENT POLICY WERE AMENDED IN 2014 TO PERMIT AN EXTRAORDINARY WITHDRAWAL OF UP TO \$500,000 IN A FISCAL YEAR, TO COVER PAYMENT OF OPERATIONAL EXPENSES OR OTHER SPECIAL BOARD APPROVED RESTRICTED PURPOSES.

PART X, LINE 2:

U.S. GAAP REQUIRES MANAGEMENT TO EVALUATE TAX POSITIONS TAKEN BY THE

ORGANIZATION AND RECOGNIZE A TAX LIABILITY IF THE ORGANIZATION HAS TAKEN

AN UNCERTAIN POSITION THAT MORE LIKELY THAN NOT WOULD BE SUSTAINED UPON

EXAMINATION BY TAXING AUTHORITIES. MANAGEMENT EVALUATED THE ORGANIZATION'S

TAX POSITIONS AND CONCLUDED THAT THE ORGANIZATION HAD TAKEN NO UNCERTAIN

TAX POSITIONS THAT REQUIRE ADJUSTMENT TO THE FINANCIAL STATEMENTS TO

COMPLY WITH THE PROVISIONS OF THIS GUIDANCE.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

SPECIAL EVE	NT EXPENSES	-29,168.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

SPECIAL EVENT EXPENSES

FORGIVENESS OF AMOUNTS D	DUE TO PHILADELPHIA BAR FOUNDATION	2,300,823.
TOTAL TO SCHEDULE D, PAR	RT XII, LINE 2D	2,329,991.

Schedule D (Form 990) 2023

29,168.

SCHEDULE G (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2023

Open to Public Inspection

Name of the organization Employer identification number 23-1660797 PHILADELPHIA BAR FOUNDATION Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. а Mail solicitations е Solicitation of non-government grants b Internet and email solicitations Solicitation of government grants Phone solicitations Special fundraising events С g d In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (iii) Did fundraiser have custody or control of contributions? (v) Amount paid (vi) Amount paid (i) Name and address of individual (iv) Gross receipts to (or retained by) (ii) Activity to (or retained by) fundraiser or entity (fundraiser) from activity organization listed in col. (i) Yes No Total 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

LHA 332081 09-13-23

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

Schedule G (Form 990) 2023

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000

		of fundraising event contributions and gro	oss income on Form 990-	EZ, lines 1 and 6b. List e	events with gross receipt	ts greater than \$5,000.
			(a) Event #1 ACCESS TO	(b) Event #2	(c) Other events NONE	(d) Total events (add col. (a) through
			JUSTICE			col. (c))
(I)			(event type)	(event type)	(total number)	551. (0) /
Revenue	1	Gross receipts	117,490.			117,490.
ш	2	Less: Contributions	117,490.			117,490.
	3	Gross income (line 1 minus line 2)				
	4	Cash prizes				
		Noncash prizes				
Direct Expenses	6	Rent/facility costs	7,224.			7,224.
rect Ey	7	Food and beverages	15,836.			15,836.
	ı	Entertainment	3.211.			3.211.
	9	Other direct expenses				3,211.
	10	Direct expense summary. Add lines 4 through				29,168.
	11	Net income summary. Subtract line 10 from li				-29,168.
Pa	ırt I		answered "Yes" on Form	990, Part IV, line 19, or	reported more than	
	Ι	\$15,000 on Form 990-EZ, line 6a.	1	(In) Dull tobo/instant	Ī	(4) Total gaming (add
en			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue				3.41 3		(=)
æ	1	Gross revenue				
S	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
Direct E	4	Rent/facility costs				
	5	Other direct expenses				
	ľ	Outer amout expenses	Yes %	Yes %	Yes %	
	6	Volunteer labor	No No	No No	No No	
		Direct expense summary. Add lines 2 through	n 5 in column (d)			
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)			
9	En	ter the state(s) in which the organization condu	icts gaming activities:			
_		the organization licensed to conduct gaming a				Yes No
		No," explain:				
		ere any of the organization's gaming licenses re	· · · · · · · · · · · · · · · · · · ·			Yes No
b	lf "	Yes," explain:				
	_					

Schedule G (Form 990) 2023

332082 09-13-23

Sch	edule G (Form 990) 2023 PHILADELPHIA BAR FOUNDATION 2	<u> </u>	560797	Page 3
11	Does the organization conduct gaming activities with nonmembers?		Yes	No No
	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed			
	to administer charitable gaming?		Yes	☐ No
13	Indicate the percentage of gaming activity conducted in:			
а	The organization's facility		13a	%
b	An outside facility		13b	<u>%</u>
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:			
	Name			
	Address			
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?		Yes	☐ No
b	If "Yes," enter the amount of gaming revenue received by the organization \$ and the amou	unt		
	of gaming revenue retained by the third party \$			
С	If "Yes," enter name and address of the third party:			
	Name			
	Address			
16	Gaming manager information:			
	Name			
	Consider management and the constant of the co			
	Gaming manager compensation \$			
	Description of services provided			
	Director/officer Employee Independent contractor			
17	Mandatory distributions:			
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to			
	retain the state gaming license?		Yes	☐ No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in	:he		
	organization's own exempt activities during the tax year \$			
Pa	Tt IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); a	nd Part	III, lines 9,	9b, 10b,
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.			

Schedule G (Form 990) PHILADELPHIA BAR FOUNDATION	23-1660797 Page 4
Schedule G (Form 990) PHILADELPHIA BAR FOUNDATION Part IV Supplemental Information (continued)	

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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

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

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

PHILADELP	HIA BAR F	OUNDATION					23-1660797
Part I General Information on Grants a	nd Assistance						
1 Does the organization maintain records		•			•	*	
criteria used to award the grants or assis	stance?						X Yes No
2 Describe in Part IV the organization's pro	ocedures for monit	oring the use of grant	funds in the United	States.			
Part II Grants and Other Assistance to recipient that received more than \$\frac{1}{2}\$					anization answered "Y	es" on Form 990, Part	IV, line 21, for any
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
AIDS LAW PROJECT OF PENNSYLVANIA 1211 CHESTNUT STREET, SUITE 600							
PHILADELPHIA, PA 19107	23-2576149	501(C)(3)	33,828.	0.			NON-PROFIT LEGAL AID
CEASEFIRE PA 1518 WALNUT STREET, SUITE 1406 PHILADELPHIA, PA 19102	46-0483761	501(C)(3)	11,357.	0.			NON-PROFIT LEGAL AID
COMMUNITY LEGAL SERVICES OF PHILADELPHIA - 1424 CHESTNUT STREET - PHILADELPHIA, PA 19102	23-1671562	501(C)(3)	101,712.	0.			NON-PROFIT LEGAL AID
CONSUMER BANKRUPTCY ASSISTANCE PROJECT - 718 ARCH STREET, 200N - PHILADELPHIA, PA 19106	23-2694116	501(C)(3)	9,394.	0.			NON-PROFIT LEGAL AID
DISABILITY RIGHTS PENNSYLVANIA 1800 JFK BOULEVARD SUITE 900 PHILADELPHIA, PA 19103	23-2041538	501(C)(3)	23,990.	0.			NON-PROFIT LEGAL AID
EDUCATION LAW CENTER 1800 JFK BLVD - SUITE 1900A PHILADELPHIA, PA 19103	23-2581102	501(C)(3)	9,785.	0.			NON-PROFIT LEGAL AID
2 Enter total number of section 501(c)(3) a	•	•	ne line 1 table				28.
3 Enter total number of other organization							0 .
For Paperwork Reduction Act Notice, see the	ne Instructions for	Form 990.					Schedule I (Form 990) 2023

Part II Continuation of Grants and Other A	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ESPERANZA IMMIGRATION LEGAL							
SERVICES - 4261 N. 5TH STREET -							
PHILADELPHIA, PA 19140	30-0239154	501(C)(3)	11,357.	0.			NON-PROFIT LEGAL AID
,			,				
FACE TO FACE LEGAL CENTER							
123 EAST PRICE STREET							
PHILADELPHIA, PA 19144	23-2862064	501(C)(3)	15,725.	0.			NON-PROFIT LEGAL AID
WOMEN EGG. A DWOGA GV. DDO TEGE							
HOMELESS ADVOCACY PROJECT							
1429 WALNUT STREET 15TH FLOOR	23-2619480	501/C)/3)	26,351.	0.			NON-PROFIT LEGAL AID
PHILADELPHIA, PA 19102	23-2019480	501(C)(3)	20,351.	0.			NON-PROFIT LEGAL AID
JUSTICE AT WORK							
990 SPRING GARDEN STREET, SUITE 300							
PHILADELPHIA, PA 19123	51-0214321	501(C)(3)	70,661.	0.			NON-PROFIT LEGAL AID
JUVENILE LAW CENTER							
1800 JFK BOULEVARD SUITE 1900B							
PHILADELPHIA, PA 19103	23-1976386	501(C)(3)	12,945.	0.			NON-PROFIT LEGAL AID
LEGAL CLINIC FOR THE DISABLED							
1513 RACE STREET PHILADELPHIA, PA 19102	23-2460392	501/C)/3)	5,480.	0.			NON-PROFIT LEGAL AID
FRIDADEDFRIA, FA 19102	23-2400392	501(0)(3)	3,400.	0.			NON-FROFII LEGAL AID
MAZZONI CENTER							
1348 BAINBRIDGE STREET							
PHILADELPHIA, PA 19147	23-2176338	501(C)(3)	31,871.	0.			NON-PROFIT LEGAL AID
NATIONALITIES SERVICE CENTER							
1216 ARCH STREET 4TH FLOOR							
PHILADELPHIA, PA 19107	23-1352336	501(C)(3)	6,262.	0.			NON-PROFIT LEGAL AID
DENNIQUE VANTA HEALEN TAN DOCTOR							
PENNSYLVANIA HEALTH LAW PROJECT							
123 CHESTNUT STREET, SUITE 400 PHILADELPHIA, PA 19106	23-2744908	501 (C) (3)	7,828.	0.			NON-PROFIT LEGAL AID
INTERDEDITIO, IN 19100	43 4/44300	Pot(C)(3)	1,020.	U .		1	MON EKOPII DEGAD AID

Part II Continuation of Grants and Other A	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	<u> </u>
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PENNSYLVANIA HIAS INDIGENT IMMIGRANT LEGAL SERVICES, INC							
600 CHESTNUT STREET SUITE 500B -							
PHILADELPHIA, PA 19106	61-1697848	501(C)(3)	35,785.	0.			NON-PROFIT LEGAL AID
PENNSYLVANIA IMMIGRATION RESOURCE CENTER - 294 PLEASANT ACRES ROAD							
SUITE 202 - YORK, PA 17402	23-2851213	501(C)(3)	6,262.	0.			NON-PROFIT LEGAL AID
PENNSYLVANIA INSTITUTIONAL LAW PROJECT - 718 ARCH STREET SUITE	23-2811857	E01/G)/2)	12 554	0.			NON DROETH LEGAL ATD
304s - PHILADELPHIA, PA 19106	23-2011057	501(0)(3)	12,554.	0.			NON-PROFIT LEGAL AID
PHILADELPHIA LEGAL ASSISTANCE 718 ARCH STREET SUITE 300N							
PHILADELPHIA, PA 19106	23-2823744	501(C)(3)	72,363.	0.			NON-PROFIT LEGAL AID
PHILADELPHIA VIP 1500 WALNUT STREET SUITE 400							
PHILADELPHIA, PA 19102	23-2210390	501(C)(3)	32,095.	0.			NON-PROFIT LEGAL AID
PHILADELPHIA VOLUNTEER LAWYERS FOR THE ARTS - 200 SOUTH BROAD STREET SUITE 700 - PHILADELPHIA, PA 19102	23-2066564	501(C)(3)	28,427.	0.			NON-PROFIT LEGAL AID
PUBLIC INTEREST LAW CENTER 1500 JFK BOULEVARD, SUITE 802							
PHILADELPHIA, PA 19102	23-1923398	501(C)(3)	6,654.	0.			NON-PROFIT LEGAL AID
REGIONAL HOUSING LEGAL SERVICES 2 S. EASTON ROAD							
GLENSIDE, PA 19038	23-1901416	501(C)(3)	6,889.	0.			NON-PROFIT LEGAL AID
SENIORLAW CENTER 1650 ARCH STREET, SUITE 1820							
PHILADELPHIA, PA 19103	23-2169936	pu1(C)(3)	15,656.	0.			NON-PROFIT LEGAL AID

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)												
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance					
SUPPORT CENTER FOR CHILD ADVOCATES 1617 JOHN F. KENNEDY BLVD. SUITE 12 PHILADELPHIA, PA 19103	23-2048664	501(C)(3)	16,830.	0.			NON-PROFIT LEGAL AID					
WOAR - PHILADELPHIA CENTER AGAINST SEXUAL VIOLENCE - ONE PENN CENTER, 1617 JOHN F KENNEDY BLVD., SUITE 800 - PHILADELPHIA, PA 19103	23-2066564	501(C)(3)	16,957.	0.			NON-PROFIT LEGAL AID					
WOMEN AGAINST ABUSE 100 S. BROAD STREET, SUITE 1341 PHILADELPHIA, PA 19110	23-2604575	501(C)(3)	78,654.	0.			NON-PROFIT LEGAL AID					
WOMEN'S LAW PROJECT 125 SOUTH 9TH STREET SUITE 300 PHILADELPHIA, PA 19107	23-7354667	501(C)(3)	11,888.	0.			NON-PROFIT LEGAL AID					

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
WARDS	62	35,306.	0.		
		,			
Part IV Supplemental Information. Provide the information req	uired in Part I, lin	e 2; Part III, column	(b); and any other ac	Iditional information.	
PART I, LINE 2:					
GRANTS ARE MADE GENERALLY FOR THE (GRANTEE O	RGANIZATIO	ON'S UNREST	RICTED USE	
AND THEREFORE ARE NOT REGULARLY MOI	NITORED.				

SCHEDULE O (Form 990)

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 Form 990-EZ.

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

2023
Open to Public Inspection

OMB No. 1545-0047

Name of the organization

PHILADELPHIA BAR FOUNDATION

Employer identification number 23-1660797

INITIADEDITIES DAN FOUNDATION 25 1000757
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
JUSTICE, ENGAGES THE COMMUNITY IN SUPPORT OF CIVIL LEGAL AID, AND
BUILDS SYSTEM-WIDE CAPACITY IN ORDER TO STRENGTHEN THE PROVISION OF
QUALITY LEGAL SERVICES AND TO ENSURE THAT ALL INDIVIDUALS UNDERSTAND
THEIR RIGHTS TO EQUAL JUSTICE UNDER LAW.
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
THAT ALL INDIVIDUALS UNDERSTAND THEIR RIGHTS TO EQUAL JUSTICE UNDER
LAW.
FORM 990, PART VI, SECTION A, LINE 1A:
HONORARY AND DESIGNATED TRUSTEES ARE NON-VOTING MEMBERS OF THE BOARD
THEREFORE THESE INDIVIDUALS ARE NOT INCLUDED ON THE BOARD LISTING.
FORM 990, PART VI, SECTION B, LINE 11B:
THE GOVERNING BODY (BOARD OF DIRECTORS) WILL REVIEW THE PREPARED 990 IN
CONJUNCTION WITH THE FOUNDATION'S AUDITORS, PRIOR TO ITS FILING WITH THE
IRS.
FORM 990, PART VI, SECTION B, LINE 12C:
CONFLICTS ARE REQUIRED TO BE DISCLOSED. IF A CONFLICT IS DEEMED MATERIAL
(I.E., RISES TO A LEVEL THAT REQUIRES RECUSAL FROM DECISION-MAKING) , THE
TRUSTEE (OR KEY EMPLOYEE) WILL RECUSE HER/HIMSELF FROM THE DECISION. AND
ALL DECISION-MAKERS AND OTHER STAKEHOLDERS WILL BE INFORMED OF THE CONFLICT

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

AND ANY REMEDIAL ACTIONS TAKEN.

Schedule O (Form 990) 2023

Schedule O (Form 990) 2023 Page 2

Employer identification number Name of the organization PHILADELPHIA BAR FOUNDATION 23-1660797 FORM 990, PART VI, SECTION B, LINE 15: THE BOARD ESTABLISHES AND REVIEWS THE COMPENSATION OF THE TOP MANAGEMENT OFFICIAL (EXECUTIVE DIRECTOR) USING ALL NECESSARY REGIONAL NONPROFIT ORGANIZATION DATA TO SET A FAIR AND APPROPRIATE SALARY IN AN AGENCY THE SIZE AND COMPLEXITY OF THE PHILADELPHIA BAR FOUNDATION. FORM 990, PART VI, SECTION C, LINE 19: THE FORM 990, BYLAWS AND AUDITED FINANCIAL STATEMENTS ARE ALL POSTED TO OUR WEBSITE. FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS: FORGIVENESS OF AMOUNTS DUE TO PHILADELPHIA BAR FOUNDATION -2,300,823. FORM 990, PART IX, LINES 6-10 ALL SALARIES OF THE FOUNDATION ARE THOSE OF EMPLOYEES OF PHILADELPHIA BAR ASSOCIATION. THE FOUNDATION REIMBURSES THE PHILADELPHIA BAR ASSOCIATION FOR SALARIES AND RELATED EXPENSES. FORM 990 PART XII, LINE 2C THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR. SCHEDULE R: RELATED PARTY CLARIFICATION INFORMATION ALTHOUGH THE PHILADELPHIA BAR ASSOCIATION AND PHILADELPHIA BAR FOUNDATION DO NOT MEET THE IRS DEFINITION, PER THE FORM 990 INSTRUCTIONS, OF BEING "RELATED", THE ORGANIZATIONS ARE CLOSELY AFFILIATED AND CONSIDER THEMSELVES CLOSELY RELATED. THE ORGANIZATIONS

SHARE OFFICE SPACE, EMPLOYEES AND MANY OTHER RESOURCES TO ACCOMPLISH

Schedule O (Form 990) 2023	Page 2
Name of the organization PHILADELPHIA BAR FOUNDATION	Employer identification number 23-1660797
EACH ORGANIZATION'S MISSION. SINCE THIS IS A RELATIONSHIP	BETWEEN A
501(C)(3) AND A 501(C)(6) ORGANIZATION THERE ARE GOVERNING	STRUCTURES
IN PLACE TO ENSURE THAT THE FINANCIAL ASSETS OF THE TWO OR	GANIZATIONS
ARE SEPARATE AND DISTINCT.	

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships
Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Attach to Form 990.

Department of the Treasury Internal Revenue Service

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization PHILADELPHIA 1	BAR FOUNDATION				E	Employer identification numb			
Part I Identification of Disregarded Entities. Complete	ete if the organization answered "Ye	s" on Form 990, Part IV, line 3	3.						
(a) Name, address, and EIN (if applicable)	(b) Primary activity	(c) Legal domicile (state o	(d) or Total inco	(e) me End-of-yea		s Direct co		9	
of disregarded entity		foreign country)				en	tity		
	_								
Part II Identification of Related Tax-Exempt Organiz organizations during the tax year.	ations. Complete if the organization	n answered "Yes" on Form 990	0, Part IV, line 34, I	pecause it had one	or mor	re related tax-exer	npt		
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	Dir	(f) rect controlling entity	cont	g) 512(b)(13) rolled :ity?	
		is sign seaminy)		501(c)(3))			Yes	No	
PHILADELPHIA EQUAL JUSTICE CENTER, INC									
82-4734669, 1101 MARKET STREET, 11TH FLOOR,					PHILA	DELPHIA BAR			
PHILADELPHIA, PA 19107	SUPPORTING ORGANIZATION	PENNSYLVANIA	501(C)(3)	LINE 7	FOUND	DATION	X		
	\dashv								

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

Schedule R (Form 990) 2023

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

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(I	h)	(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total income	Share of end-of-year assets	Disproportionate allocations?		Code V-UBI amount in box 20 of Schedule		Percentage ownership
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes I	10

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

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

Page 3

Yes No

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

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

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity

b	b Gift, grant, or capital contribution to related organization(s)				1b	X		
c	c Gift, grant, or capital contribution from related organization(s)				1c		X	
c	d Loans or loan guarantees to or for related organization(s)				1d	Х		
e	e Loans or loan guarantees by related organization(s)				1e		X	
f	f Dividends from related organization(s)				1f		X	
	g Sale of assets to related organization(s)				1g		X	
h	h Purchase of assets from related organization(s)				1h		X	
i	i Exchange of assets with related organization(s)				1i		X	
j	j Lease of facilities, equipment, or other assets to related organization(s)				1j		_X_	
k	k Lease of facilities, equipment, or other assets from related organization(s)				1k		_X_	
ı	I Performance of services or membership or fundraising solicitations for related organization(s)				11		X	
n	m Performance of services or membership or fundraising solicitations by related organization(s)				1m	Х		
n	n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n	Х		
c	o Sharing of paid employees with related organization(s)				10	Х		
p	p Reimbursement paid to related organization(s) for expenses				1p	X		
q Reimbursement paid by related organization(s) for expenses								
r	r Other transfer of cash or property to related organization(s)				1r		X	
	s Other transfer of cash or property from related organization(s)				1s		X	
2	2 If the answer to any of the above is "Yes," see the instructions for information on who must com	nplete this	line, including covered rel	ationships and transaction thresholds.				
	(a) Name of related organization (b) Transact type (a-		(c) Amount involved	(d) Method of determining amount inv	olved			
1)	PHILADELPHIA EQUAL JUSTICE CENTER, INC. B		2,300,823.0	OST				
2)								
<u>~)</u>								
3)								
<u>o,</u>								
4)								
*/								
5)								
<u>~,</u>								
6)								
3216	2163 09-28-23		L	Schedule	R (For	n 990	2023	
"	····	_		Schodulo		555		

Page 4

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	Are all partners sec 501(c)(3) orgs.?	(g) Share of end-of-year assets	Dispretion allocat	opor- late tions?	General manage partner	(k) Percentage ownership
								000) 0000

Form **8868**

(Rev. January 2024)

Application for Extension of Time To File an Exempt Organization Return or Excise Taxes Related to Employee Benefit Plans

Department of the Treasury Internal Revenue Service File a separate application for each return.

Go to www.irs.gov/Form8868 for the latest information.

OMB No. 1545-0047

Electronic filing (e-file). You can electronically file Form 8868 to request up to a 6-month extension of time to file any of the forms listed below except for Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts. An extension request for Form 8870 must be sent to the IRS in a paper format (see instructions). For more details on the electronic filing of Form 8868, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits. Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Part I - Identification Name of exempt organization, employer, or other filer, see instructions. Taxpayer identification number (TIN) Type or **Print** 23-1660797 PHILADELPHIA BAR FOUNDATION File by the Number, street, and room or suite no. If a P.O. box, see instructions. due date for filina vour 1101 MARKET STREET, 11TH FLOOR return. See instructions. City, town or post office, state, and ZIP code. For a foreign address, see instructions. PHILADELPHIA, PA 19107 Enter the Return Code for the return that this application is for (file a separate application for each return) 01 Application Is For Return | Application Is For Return Code Code Form 990 or Form 990-EZ 01 Form 4720 (other than individual) 09 Form 4720 (individual) 03 Form 5227 10 Form 990-PF 04 Form 6069 11 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 8870 12 Form 990-T (trust other than above) 06 Form 5330 (individual) 13 07 Form 5330 (other than individual) 14 Form 990-T (corporation) Form 1041-A 80 After you enter your Return Code, complete either Part II or Part III. Part III, including signature, is applicable only for an extension of time to file Form 5330. • If this application is for an extension of time to file Form 5330, you must enter the following information. Plan Name Plan Number Plan Year Ending (MM/DD/YYYY) Part II - Automatic Extension of Time To File for Exempt Organizations (see instructions) The books are in the care of PAUL KIRK 1101 MARKET STREET, 11TH FLOOR - PHILADELPHIA, PA 19107 Telephone No. 215-238-6334 Fax No. If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four-digit Group Exemption Number (GEN)
 If this is for the whole group, check this . If it is for part of the group, check this box and attach a list with the names and TINs of all members the extension is for. I request an automatic 6-month extension of time until NOVEMBER 15 , 20 24 , to file the exempt organization return for the organization named above. The extension is for the organization's return for: X calendar year 20 23 or tax year beginning , 20 , and ending If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return Change in accounting period 3a If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. Зс