

Form **990**
 Department of the Treasury
 Internal Revenue Service

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)
 The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0047
2009
Open to Public Inspection

A For the 2009 calendar year, or tax year beginning 07-01-2009 and ending 06-30-2010

- B** Check if applicable:
 Address change
 Name change
 Initial return
 Terminated
 Amended return
 Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization
 EPISCOPAL COMMUNITY SERVICES OF THE DIOCESE OF PENNSYLVANIA
 Doing Business As
 Number and street (or P O box if mail is not delivered to street address) Room/suite
 225 South 3rd Street
 City or town, state or country, and ZIP + 4
 Philadelphia, PA 191063910

D Employer identification number
 23-1352290
E Telephone number
 (215) 351-1400
G Gross receipts \$ 8,379,268

F Name and address of principal officer
 Episcopal Community Services of the Diocese of Pennsylvania
 225 South 3rd Street
 Philadelphia, PA 191063910

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

I Tax-exempt status 501(c) (3) ◀ (insert no) 4947(a)(1) or 527
J Website: ▶ www.ecs1870.org

K Form of organization Corporation Trust Association Other ▶ **L** Year of formation 1877 **M** State of legal domicile PA

Part I Summary

1 Briefly describe the organization's mission or most significant activities
 See Schedule O

2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets

3 Number of voting members of the governing body (Part VI, line 1a)	3	23
4 Number of independent voting members of the governing body (Part VI, line 1b)	4	23
5 Total number of employees (Part V, line 2a)	5	210
6 Total number of volunteers (estimate if necessary)	6	400
7a Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	0
b Net unrelated business taxable income from Form 990-T, line 34	7b	0

		Prior Year	Current Year
Revenue	8 Contributions and grants (Part VIII, line 1h)	7,457,691	6,607,052
	9 Program service revenue (Part VIII, line 2g)	222,530	203,866
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	844,000	1,443,302
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	205,826	125,048
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	8,730,047	8,379,268
	Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	0
14 Benefits paid to or for members (Part IX, column (A), line 4)		0	0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)		6,491,451	6,524,917
16a Professional fundraising fees (Part IX, column (A), line 11e)		0	0
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 359,328			
17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)		3,274,273	3,110,462
18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)		9,765,724	9,635,379
19 Revenue less expenses Subtract line 18 from line 12	-1,035,677	-1,256,111	
Net Assets or Fund Balances		Beginning of Current Year	End of Year
	20 Total assets (Part X, line 16)	44,795,980	47,066,862
	21 Total liabilities (Part X, line 26)	565,259	451,136
22 Net assets or fund balances Subtract line 21 from line 20	44,230,721	46,615,726	

Part II Signature Block

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

Sign Here
 Signature of officer _____ Date 2010-11-22
 Arthur Eyre Dir Financial Administration
 Type or print name and title

Paid Preparer's Use Only
 Preparer's signature _____ Date _____ Check if self-employed
 Firm's name (or yours if self-employed), address, and ZIP + 4 _____ Preparer's identifying number (see instructions)
 EIN ▶ _____ Phone no ▶ _____

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

Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission

Episcopal Community Services (ECS) empowers vulnerable individuals and families by providing high-quality social and educational services that affirm human dignity and promote social justice. ECS is a multipurpose social service agency.

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

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

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

If "Yes," describe these changes on Schedule O

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts 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 \$ 1,847,860 including grants of \$ 0) (Revenue \$ 0)

ECS Foster/Kinship Care. ECS has more than 70 years of experience providing foster care in Philadelphia and pioneered service to foster children with special medical needs in the 1980s. ECS' goal is to achieve a permanent outcome (reunification, adoption or long-term custody) for each child in foster or kinship care as quickly as possible. In 2010, ECS provided safe, caring homes to 133 children and coordinated eight adoptions and six permanent legal custody arrangements. By working closely with birth parents to resolve situations leading to a child's placement in foster care, ECS reunited 12 children with their birth families. Two teens graduated from high school and entered college.

4b (Code) (Expenses \$ 1,665,747 including grants of \$ 0) (Revenue \$ 0)

ECS Home Care. For more than 20 years, ECS Home Care has provided compassionate in-home services to low-income, frail elderly persons. The program provides nursing assessments every 90 days and homemaker/home health aide services as needed to insure client health, safety and comfort. In 2010, ECS provided more than 48,000 hours of homemaker services to 154 clients, helping 75% remain in their homes for a full year or more. ECS Home Care enables individuals to continue living independently, averting the need for nursing home care.

4c (Code) (Expenses \$ 1,525,648 including grants of \$ 0) (Revenue \$ 0)

ECS St. Barnabas Mission. ECS St. Barnabas Mission provides safe shelter, nutritious meals, and social and educational services for homeless women and their children. In 2010, ECS St. Barnabas celebrated its tenth year at its current location, during which time more than 1,300 families have been served. The 20,000-square-foot facility houses approximately 40 families daily, and the program's goal is to prepare clients to move on to self-sufficiency. This year, 135 female-headed families (including 171 children) found a safe haven at ECS St. Barnabas. The program surpassed its targeted outcome: of the 99 families who discharged last year, 68% moved into safe, stable housing.

4d Other program services (Describe in Schedule O) **See also Additional Data for Description**
(Expenses \$ 2,737,028 including grants of \$ 0) (Revenue \$ 0)

4e **Total program service expenses** \$ 7,776,283

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)? <i>If "Yes," complete Schedule A</i> <input checked="" type="checkbox"/>	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? <input checked="" type="checkbox"/>	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? <i>If "Yes," complete Schedule C, Part II</i>		No
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? <i>If "Yes," complete Schedule C, Part III</i>		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i> <input checked="" type="checkbox"/>	Yes	
11	Is the organization's answer to any of the following questions "Yes"? <i>If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.</i> <input checked="" type="checkbox"/>	Yes	
	• Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI.</i>		
	• Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII.</i>		
	• Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII.</i>		
	• Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX.</i>		
	• Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X.</i>		
	• Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? <i>If "Yes," complete Schedule D, Part X.</i>		
12	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i> <input checked="" type="checkbox"/>	Yes	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? <input checked="" type="checkbox"/>	Yes	No
	<i>If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional</i> <input checked="" type="checkbox"/>		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?		No
14b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If "Yes," complete Schedule F, Part I</i>		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S ? <i>If "Yes," complete Schedule F, Part II</i>		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? <i>If "Yes," complete Schedule F, Part III</i>		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		No
20	Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>		No

Part IV Checklist of Required Schedules *(continued)*

21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21		No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23		No
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? <i>If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25</i>	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	34		No
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
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? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, <i>Annual Summary and Transmittal of U.S. Information Returns</i> . Enter -0- if not applicable		
	1a 11		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
	1b 0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	Yes	
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return		
	2a 210		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		No
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		
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)?		No
b	If "Yes," enter the name of the foreign country: _____ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		No
d	If "Yes," indicate the number of Forms 8282 filed during the year		
	7d _____		
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		No
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the organization make any taxable distributions under section 4966?		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	Section 501(c)(12) organizations. Enter		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	

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

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body (23); 1b Enter the number of voting members that are independent (23); 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? (No); 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? (No); 4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? (No); 5 Did the organization become aware during the year of a material diversion of the organization's assets? (No); 6 Does the organization have members or stockholders? (No); 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? (No); 7b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? (No); 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a The governing body? (Yes); 8b Each committee with authority to act on behalf of the governing body? (Yes); 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O (No).

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

Table with 3 columns: Question, Yes, No. Rows include: 10a Does the organization have local chapters, branches, or affiliates? (No); 10b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?; 11 Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? (Yes); 11A Describe in Schedule O the process, if any, used by the organization to review the Form 990; 12a Does the organization have a written conflict of interest policy? If "No," go to line 13 (Yes); 12b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? (Yes); 12c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done (Yes); 13 Does the organization have a written whistleblower policy? (Yes); 14 Does the organization have a written document retention and destruction policy? (Yes); 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 15a The organization's CEO, Executive Director, or top management official (Yes); 15b Other officers or key employees of the organization (No); 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? (No); 16b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

Table with 2 columns: Question, Answer. Rows include: 17 List the States with which a copy of this Form 990 is required to be filed (PA); 18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply: [X] Own website, [X] Another's website, [X] Upon request; 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table; 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: EPISCOPAL COMMUNITY SERVICES OF THE DIOCESE OF PENNSYLVANIA, 225 SOUTH 3RD STREET, PHILADELPHIA, PA 191063910, (215) 351-1400.

1b Total	210,048	0	69,898
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2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization **2**

		Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3		No
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	4		No
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	5		No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

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

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

Part VIII Statement of Revenue

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514		
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns 1a <u>0</u>						
	b	Membership dues 1b <u>0</u>						
	c	Fundraising events 1c <u>0</u>						
	d	Related organizations 1d <u>0</u>						
	e	Government grants (contributions) 1e <u>4,948,869</u>						
	f	All other contributions, gifts, grants, and similar amounts not included above 1f <u>1,658,183</u>						
	g	Noncash contributions included in lines 1a-1f \$ <u>0</u>						
	h	Total. Add lines 1a-1f ▶	6,607,052					
Program Service Revenue	2a	_____ Business Code _____						
	b	_____						
	c	_____						
	d	_____						
	e	_____						
	f	All other program service revenue	203,866	203,866	0	0		
	g	Total. Add lines 2a-2f ▶	203,866					
Other Revenue	3	Investment income (including dividends, interest and other similar amounts) ▶	1,443,302	1,443,302	0	0		
	4	Income from investment of tax-exempt bond proceeds ▶	0	0	0	0		
	5	Royalties ▶	0	0	0	0		
	6a	(i) Real		0	0	0	0	
		b	(ii) Personal					
			Gross Rents					0
			Less rental expenses					0
	Rental income or (loss)		0					
	d	Net rental income or (loss) ▶	0	0	0	0		
	7a	(i) Securities		0	0	0	0	
		b	(ii) Other					
			Gross amount from sales of assets other than inventory					0
			Less cost or other basis and sales expenses					0
Gain or (loss)	0							
d	Net gain or (loss) ▶	0	0	0	0			
8a	Gross income from fundraising events (not including \$ <u>0</u> of contributions reported on line 1c) See Part IV, line 18 a <u>0</u>							
b	Less direct expenses b <u>0</u>							
c	Net income or (loss) from fundraising events ▶	0	0	0	0			
9a	Gross income from gaming activities See Part IV, line 19 a <u>0</u>							
b	Less direct expenses b <u>0</u>							
c	Net income or (loss) from gaming activities ▶	0	0	0	0			
10a	Gross sales of inventory, less returns and allowances a <u>0</u>							
b	Less cost of goods sold b <u>0</u>							
c	Net income or (loss) from sales of inventory ▶	0	0	0	0			
Miscellaneous Revenue		Business Code						
11a	Trusts <u>525,920</u>	88,837	88,837	0	0			
b	Miscellaneous Income <u>900,099</u>	36,211	36,211	0	0			
c	_____							
d	All other revenue	0	0	0	0			
e	Total. Add lines 11a-11d ▶	125,048						
12	Total revenue. See Instructions ▶	8,379,268	1,772,216	0	0			

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) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	0	0		
2	Grants and other assistance to individuals in the U S See Part IV, line 22	0	0		
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16	0	0		
4	Benefits paid to or for members	0	0		
5	Compensation of current officers, directors, trustees, and key employees	210,048	0	210,048	0
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0	0	0	0
7	Other salaries and wages	4,806,374	4,211,663	400,445	194,266
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	120,301	79,002	36,640	4,659
9	Other employee benefits	1,020,069	871,168	107,319	41,582
10	Payroll taxes	368,125	309,069	44,800	14,256
11	Fees for services (non-employees)				
a	Management	0	0	0	0
b	Legal	11,068	0	11,068	0
c	Accounting	67,397	40,796	26,167	434
d	Lobbying	0	0	0	0
e	Professional fundraising See Part IV, line 17	0			0
f	Investment management fees	0	0	0	0
g	Other	176,350	106,744	56,991	12,615
12	Advertising and promotion	51,459	0	25,729	25,730
13	Office expenses	96,243	65,247	27,134	3,862
14	Information technology	91,847	9,806	75,715	6,326
15	Royalties	0	0	0	0
16	Occupancy	371,662	298,610	64,359	8,693
17	Travel	77,228	46,732	26,801	3,695
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	0	0	0
19	Conferences, conventions, and meetings	0	0	0	0
20	Interest	320	0	320	0
21	Payments to affiliates	0	0	0	0
22	Depreciation, depletion, and amortization	342,944	237,501	93,627	11,816
23	Insurance	98,629	80,080	17,729	820
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
a	Specific Assistance Foster Care/FAST/SBM	1,268,797	1,258,797	10,000	0
b	Program Supplies/Expenses	130,049	130,049	0	0
c	Appeals - Fund Raising	28,104	0	0	28,104
d	Service Contracts	61,410	0	61,410	0
e	Other	81,525	31,019	48,036	2,470
f	All other expenses	155,430	0	155,430	0
25	Total functional expenses. Add lines 1 through 24f	9,635,379	7,776,283	1,499,768	359,328
26	Joint costs. Check here <input type="checkbox"/> if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

		(A)		(B)
		Beginning of year		End of year
Assets	1 Cash—non-interest-bearing	466,208	1	92,497
	2 Savings and temporary cash investments	0	2	0
	3 Pledges and grants receivable, net	395,000	3	281,909
	4 Accounts receivable, net	782,154	4	862,927
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L	0	5	0
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L	0	6	0
	7 Notes and loans receivable, net	0	7	0
	8 Inventories for sale or use	0	8	0
	9 Prepaid expenses and deferred charges	181,695	9	415,010
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	6,647,100		
	b Less accumulated depreciation	3,242,263	10c	3,192,500
	11 Investments—publicly traded securities	39,728,660	11	42,222,019
	12 Investments—other securities See Part IV, line 11	0	12	
	13 Investments—program-related See Part IV, line 11	0	13	
	14 Intangible assets	0	14	0
	15 Other assets See Part IV, line 11	0	15	
16 Total assets. Add lines 1 through 15 (must equal line 34)	44,795,980	16	47,066,862	
Liabilities	17 Accounts payable and accrued expenses	565,259	17	451,136
	18 Grants payable	0	18	0
	19 Deferred revenue	0	19	0
	20 Tax-exempt bond liabilities	0	20	0
	21 Escrow or custodial account liability Complete Part IV of Schedule D	0	21	0
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L	0	22	0
	23 Secured mortgages and notes payable to unrelated third parties	0	23	0
	24 Unsecured notes and loans payable to unrelated third parties	0	24	0
	25 Other liabilities Complete Part X of Schedule D		25	0
	26 Total liabilities. Add lines 17 through 25	565,259	26	451,136
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	18,815,363	27	19,650,397
	28 Temporarily restricted net assets	13,196,815	28	14,746,786
	29 Permanently restricted net assets	12,218,543	29	12,218,543
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	44,230,721	33	46,615,726	
34 Total liabilities and net assets/fund balances	44,795,980	34	47,066,862	

Part XI Financial Statements and Reporting

		Yes	No
1	Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? . . .		No
2b	Were the organization's financial statements audited by an independent accountant?	Yes	
2c	If "Yes," to 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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
2d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separated basis		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	Yes	
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits . . .	Yes	

SCHEDULE A
(Form 990 or 990EZ)

Public Charity Status and Public Support

OMB No 1545-0047

2009

Open to Public Inspection

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. ▶ See separate instructions.

Department of the Treasury
Internal Revenue Service

Name of the organization
EPISCOPAL COMMUNITY SERVICES OF THE DIOCESE OF PENNSYLVANIA

Employer identification number

23-1352290

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 11, check only one box)

- 1 A church, convention of churches, or association of churches **section 170(b)(1)(A)(i).**
- 2 A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state

- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 8 A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 9 An 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)
- 10 An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h
 a Type I b Type II c Type III - Functionally integrated d Type III - Other
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)
- f If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 (i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?
 (ii) a family member of a person described in (i) above?
 (iii) a 35% controlled entity of a person described in (i) or (ii) above?
- h Provide the following information about the supported organization(s)

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of support?
			Yes	No	Yes	No	Yes	No	
Total									

Part II Support Schedule for Organizations Described in IRC 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.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	6,218,847	6,291,924	6,842,364	6,251,569	6,150,905	31,755,609
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	0	0	0	0	0
3 The value of services or facilities furnished by a governmental unit to the organization without charge	0	0	0	0	0	0
4 Total. Add lines 1 through 3	6,218,847	6,291,924	6,842,364	6,251,569	6,150,905	31,755,609
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						0
6 Public Support. Subtract line 5 from line 4						31,755,609

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4	6,218,847	1,152,000	6,842,364	6,251,569	6,150,905	31,755,609
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	941,577	1,152,000	1,236,628	844,000	1,443,302	5,617,507
9 Net income from unrelated business activities, whether or not the business is regularly carried on	0	0	0	0	0	0
10 Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets	0	0	0	0	0	0
11 Total support (Add lines 7 through 10)						37,373,116
12 Gross receipts from related activities, etc (See instructions)					12	5,617,507

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

Section C. Computation of Public Support Percentage

14 Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f))	14	84.969 %
15 Public Support Percentage for 2008 Schedule A, Part II, line 14	15	86.07 %

16a 33 1/3% support test—2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

b 33 1/3% support test—2008. If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

17a 10%-facts-and-circumstances test—2009. If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization

b 10%-facts-and-circumstances test—2008. If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization

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

Part III Support Schedule for Organizations Described in IRC 509(a)(2)

(Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public Support (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support (Add lines 9, 10c, 11 and 12)						

14 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public Support Percentage for 2009 (line 8 column (f) divided by line 13 column (f))	15	
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2009 (line 10c column (f) divided by line 13 column (f))	17	
18 Investment income percentage from 2008 Schedule A, Part III, line 17	18	

19a 33 1/3% support tests—2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests—2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

20 Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Part IV **Supplemental Information.** Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. See instructions

SCHEDULE D (Form 990)

OMB No 1545-0047

Supplemental Financial Statements

2009

Open to Public Inspection

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12. Attach to Form 990. See separate instructions.

Department of the Treasury Internal Revenue Service

Name of the organization EPISCOPAL COMMUNITY SERVICES OF THE DIOCESE OF PENNSYLVANIA

Employer identification number 23-1352290

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows 1-4: Total number at end of year, Aggregate contributions to (during year), Aggregate grants from (during year), Aggregate value at end of year.

- 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

- 1 Purpose(s) of conservation easements held by the organization (check all that apply): Preservation of land for public use, Protection of natural habitat, Preservation of open space, Preservation of an historically important land area, Preservation of a certified historic structure.

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

Table with 2 columns: Description, Held at the End of the Year. Rows 2a-2d: Total number of conservation easements, Total acreage restricted by conservation easements, Number of conservation easements on a certified historic structure included in (a), Number of conservation easements included in (c) acquired after 8/17/06.

- 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year
4 Number of states where property subject to conservation easement is located
5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?
6 Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year
7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year
8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?
9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

- 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items
b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1; (ii) Assets included in Form 990, Part X
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items: a Revenues included in Form 990, Part VIII, line 1; b Assets included in Form 990, Part X

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

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

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

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

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

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

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

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

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

2a Did the organization include an amount on Form 990, Part X, line 21? Yes No

b If "Yes," explain the arrangement in Part XIV

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

	(a) Current Year	(b) Prior Year	(c) Two Years Back	(d) Three Years Back	(e) Four Years Back
1a Beginning of year balance	39,728,660	48,574,513			
b Contributions	386,641	1,064,029			
c Investment earnings or losses	2,549,718	-9,715,682			
d Grants or scholarships	0	0			
e Other expenditures for facilities and programs	443,000	194,200			
f Administrative expenses	0	0			
g End of year balance	42,222,019	39,728,660			

2 Provide the estimated percentage of the year end balance held as

- a** Board designated or quasi-endowment ▶ 36.2 %
- b** Permanent endowment ▶ 34.9 %
- c** Term endowment ▶ 28.9 %

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

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

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

Part VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (Investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land	0	45,000		45,000
b Buildings	0	2,229,856	551,666	1,678,190
c Leasehold improvements	0	2,358,557	1,371,873	986,684
d Equipment	0	2,013,687	1,531,061	482,626
e Other	0	0	0	0
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).)				3,192,500

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	8,379,268
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	9,635,379
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-1,256,111
4	Net unrealized gains (losses) on investments	4	0
5	Donated services and use of facilities	5	0
6	Investment expenses	6	0
7	Prior period adjustments	7	0
8	Other (Describe in Part XIV)	8	0
9	Total adjustments (net) Add lines 4 - 8	9	0
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-1,256,111

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	12,020,384
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	0
b	Donated services and use of facilities	2b	0
c	Recoveries of prior year grants	2c	0
d	Other (Describe in Part XIV)	2d	3,641,116
e	Add lines 2a through 2d	2e	3,641,116
3	Subtract line 2e from line 1	3	8,379,268
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1 :		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	0
b	Other (Describe in Part XIV)	4b	0
c	Add lines 4a and 4b	4c	0
5	Total Revenue Add lines 3 and 4c . (This should equal Form 990, Part I, line 12)	5	8,379,268

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	9,635,379
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	0
b	Prior year adjustments	2b	0
c	Other losses	2c	0
d	Other (Describe in Part XIV)	2d	0
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	9,635,379
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 :		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	0
b	Other (Describe in Part XIV)	4b	0
c	Add lines 4a and 4b	4c	0
5	Total expenses Add lines 3 and 4c . (This should equal Form 990, Part I, line 18)	5	9,635,379

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

Identifier	Return Reference	Explanation
SchD_P05_S00_L04	Schedule D, Part V, Line 4	ECS utilizes the "total return concept" for administering its permanently restricted endowment portfolio This allows cumulative income and gains form permanently restricted endowments to be utilized for operating purposes subject to donor restrictions and state statutes Under current Pennsylvania Statute, the Board of Trustees of ECS has the opportunity in each fiscal year to elect to transfer between 2% and 7% of the fair market value of those investments (based upon a thirteen quarter rolling average) During the year ended June 30, 2010, the Trustees authorized 5 2% transfer in the amount of \$2,535,000 The amount can be utilized for operating purposes or the satisfaction of donor restrictions
SchD_P12_S00_L02d	Schedule D, Part XII, Line 2d	Effective January 1, 2008, ECS adopted the guidance under FASB Statement No 157, Fair Value Measurements FAS 157 establishes a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair market value ECS uses Level 1 Fair Value Measurements in which common stocks and domestic bond mutual funds are value based on quoted net asset values of the shares held by ECS at year-end Money market funds are valued based on quoted prices in active markets for identical assets For the year-ended June 30, 2010, ECS had a net realized/unrealized gain on investments of \$3,641,116

SCHEDULE O
(Form 990)

Supplemental Information to Form 990

OMB No 1545-0047

2009

Open to Public Inspection

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.
▶ **Attach to Form 990.**

Name of the organization

EPISCOPAL COMMUNITY SERVICES OF THE DIOCESE OF PENNSYLVANIA

Employer identification number

23-1352290

Identifier	Return Reference	Explanation
F990_P01_S00_L01	Form 990, Part I, Line 1	Episcopal Community Services (ECS) is faith in action and leads the way in responding to changing human needs. A multi-service organization, ECS empowers vulnerable individuals and families by providing high-quality social and educational services that affirm human dignity and promote social justice.
F990_P01_S00_L06	Form 990, Part I, Line 6	Approximately 400 volunteers contributed their time to ECS in FY10. ECS tracks volunteer involvement through time sheets which are entered into a database. Volunteers working on site are required to sign in and out, and volunteers working from other sites submit their hours to ECS administration. At ECS, volunteers work directly with clients, tutoring adult learners and helping children with homework, serve on committees, and collect and deliver donated goods for client families. Before beginning work, all volunteers receive training and are subject to a rigorous screening and government clearance process.
F990_P06_S0B_L11	Form 990, Part VI, Section B, Line 11	The 990 is prepared by the Director of Financial Administration. The filing date for the 990 is 11/15/2010. ECS requested an extension of time to 2/15/2011 to file the return and extension was granted by the IRS. The 990 is then submitted to ECS's external tax advisor (Asher and Company LTD) for review and corrections. The 990 and the audited financial statements are then reviewed (11/1/2010) by the Audit Committee of the ECS Board of Trustees in conjunction with the Auditors, the Executive Director and Finance Director. If the Audit Committee approves both the audited financial statements and the 990, they are then sent to all the ECS Board of Trustees members prior to the November 2010 Board meeting. At the Board meeting, the audited financial statements and 990 are reviewed and discussed, and then the Board makes a motion to accept both reports (11/18/2010). After the 990 is accepted by the Board, it is filed with the IRS and is also posted on the ECS website along with the audited financial statements.
F990_P06_S0B_L12c	Form 990, Part VI, Section B, Line 12c	ECS has an Ethical Conduct of Business and Services policy. The Conflicts of Interest and Access to Agency Services reads as: Article XII of the By-laws requires each Trustee, officer, or key clinical or administrative manager employed by the corporation to submit an annual conflict of interest statement in a form prescribed by the Conflict of Interest Oversight Policy of the Audit Committee. Article XII contains the policy, procedure, and definition of interested persons. The policy is reviewed annually with each Trustee, officer, and key clinical or administrative managers. Each Trustee, officer, and key clinical or administrative manager signs a statement as to conflict of interest annually. Article XII also describes the process whereby transactions involving a Disqualified Person may be approved by the Board of Trustees. Board adopted policies also cover Access to Agency Services covering Episcopal Community Services representatives and Employment of Personnel Related to Board Members, Administrators and Supervisors.
F990_P06_S0B_L15	Form 990, Part VI, Section B, Line 15	The annual evaluation of the Executive Director is prepared by the President of the ECS Board of Trustees. The President reviews the evaluation with the Executive Committee of the Board and then reviews it with the Executive Director. The Executive Director's annual increase is approved by the President and is usually the same percentage increase that all staff would receive for the upcoming year.
F990_P06_S0C_L19	Form 990, Part VI, Section C, Line 19	ECS' audited financial statements and Form 990 are posted on the agency's website, and the governing documents and conflict of interest policy are available upon request.

Additional Data

Software ID:

Software Version:

EIN: 23-1352290

Name: EPISCOPAL COMMUNITY SERVICES OF THE DIOCESE
OF PENNSYLVANIA

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other program services

(Code) (Expenses \$ 411,493 including grants of \$ 0) (Revenue \$ 0)

This year, the after-school program for homeless children at ECS St Barnabas Mission served 24 children during the high-risk after-school hours. The Mission's Butterfly preschool prepared 48 children for kindergarten. These programs also enabled mothers to participate in education or employment during the day.

(Code) (Expenses \$ 1,025,851 including grants of \$ 0) (Revenue \$ 0)

ECS FAST Housing provides chronically homeless families with a permanent home and intensive case management. In 2010, FAST served 42 families (with 155 children) who had an extended history of homelessness and behavioral health issues. Despite these challenges, the program helped 95% maintain their housing throughout the year.

(Code) (Expenses \$ 126,362 including grants of \$ 0) (Revenue \$ 0)

Volunteers and Gifts in Kind are critical to the success of many ECS programs. In 2010, the volunteer services program coordinated the efforts of 400 individuals who provided more than 5,000 hours of service valued at over \$130,000 and secured donated items for clients valued at \$131,000.

(Code) (Expenses \$ 111,077 including grants of \$ 0) (Revenue \$ 0)

ECS Health Services promotes and protects the health and safety of program participants and agency employees. In 2010, the program conducted 650 health assessments and medical referrals for clients. Thanks to education and infection control measures implemented this year, ECS participants have had fewer episodes and/or severe outbreaks of communicable diseases.

(Code) (Expenses \$ 159,266 including grants of \$ 0) (Revenue \$ 0)

Pilot programs and workshops. ECS provided parenting education workshops for 139 parents and caregivers, and 91% of participants rated the program as helpful. The weekly ECS Teens Takin' Over program helped 25 teens build life skills for independence and success as adults.

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other program services			
(Code) (Expenses \$	244,830	including grants of \$ 0) (Revenue \$ 0)
ECS Urban Bridges provided adult education courses to 170 adults last year. The program surpassed its targeted outcomes, with 80% of adult basic education and GED learners improving their test scores by at least 5 grade level and 65% of ESL students improving their test scores by at least 3 points, equivalent to half a grade level.			
(Code) (Expenses \$	87,593	including grants of \$ 0) (Revenue \$ 0)
ECS Chaplaincy provides pastoral care training to lay and clergy persons and provides chaplaincy services at Philadelphia's juvenile detention center. In 2010, ECS served 1,230 youth during 52 Sunday worship services. Two series of chaplaincy training classes were offered, and 13 graduates completed the program.			
(Code) (Expenses \$	570,556	including grants of \$ 0) (Revenue \$ 0)
ECS Out of School Time (OST) program provided after-school, summer and youth development programs for 355 children and youth. The program emphasized project-based learning, which integrates skills in math, reading and other academic subjects into creative group projects. The OST surpassed its goal for 80% of children to complete homework daily.			

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Kurt W Brunner President	0	X		X				0	0	0
Miriam Kepner Vice President	0	X		X				0	0	0
Raymond H Welsh Vice President	0	X		X				0	0	0
Earl M Forte III Treasurer	0	X		X				0	0	0
Adrienne Yost Hart Assistant Treasurer	0	X		X				0	0	0
Gail H Trimble Secretary	0	X		X				0	0	0
Rev John E Midwood Executive Director/CEO	0	X		X			102,997	0	45,229	
Richard A Ashley Board Member	0	X						0	0	0
Nolan N Atkinson Jr Board Member	0	X						0	0	0
Rev E Clifford Cutler Board Member	0	X						0	0	0
Darryl J Ford Board Member	0	X						0	0	0
Rev Sunny Hallanan Board Member	0	X						0	0	0
Rev Alison Harrity Board Member	0	X						0	0	0
Gordon L Keen Jr Board Member	0	X						0	0	0
James Kelch Board Member	0	X						0	0	0
Rt Rev Rodney Michel Board Member	0	X						0	0	0
John Pickering Board Member	0	X						0	0	0
Richard G Schneider Board Member	0	X						0	0	0
Rev Judith Sullivan Board Member	0	X						0	0	0
L Frederick Sutherland Board Member	0	X						0	0	0
Rush B Smith Board Member	0	X						0	0	0
Elizabeth L Useem Board Member	0	X						0	0	0
Sharon K Webster Board Member	0	X						0	0	0
Rev Keith March Board Member	0	X						0	0	0
James H Anderson Associate Director	40				X			107,051	0	24,669

Form 990, Part IX - Statement of Functional Expenses - 24a - 24e Other Expenses

<i>Do not include amounts reported on line 6b, 8b, 9b, and 10b of Part VIII.</i>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Specific Assistance Foster Care/FAST/SBM	1,268,797	1,258,797	10,000	0
Program Supplies/Expenses	130,049	130,049	0	0
Appeals - Fund Raising	28,104	0	0	28,104
Service Contracts	61,410	0	61,410	0
Other	81,525	31,019	48,036	2,470