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Form **990-P**F

Department of the Treasury Internal Revenue Service

Return of Private Foundation

or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0052

Open to Public Inspection

Nai	For calendar year 2012 or tax year beginning		, 2012, and ending			, 20		
	me of for	undation	-			A Employer	identification number	
Pau	ul Lync	h Foundation				1	25-6583550	
		d street (or P O box number if mail is	not delivered to street address)		Room/suite	B Telephone	number (see instruction	ns)
201	N Me	rcer Street				1	724-202-6161	
		n, state, and ZIP code				C If exempt	ion application is pend	ing check here ▶ □
Ne	w Casti	e, PA 16101				5/15/19/		g, c
		all that apply Initial ret	urn	of a former p	oublic charity	D 1. Foreigi	n organizations, check l	here ►
_		Final retu	<u>—</u>					
		☐ Address		nge			n organizations meeting here and attach compu	
н	Check		ection 501(c)(3) exempt p		ition	E if private	foundation status was	terminated under
		n 4947(a)(1) nonexempt chari				section 5	07(b)(1)(A), check here	▶□
	_	arket value of all assets at	J Accounting method			1		
		year (from Part II, col. (c),	Other (specify)				ndation is in a 60-mont ction 507(b)(1)(B), chect	
	line 16		(Part I, column (d) must be	on cash basis	:)	+		_
	_	Analysis of Revenue and E				<u> </u>		(d) Disbursements
		amounts in columns (b), (c), and (d)		(a) Revenue a expenses p	Or (D) INE	t investment income	(c) Adjusted net income	for charitable purposes
		the amounts in column (a) (see insti		books	'	income	Micome	(cash basis only)
	1	Contributions, gifts, grants, etc.,	received (attach schedule)	37.5	88 49	,		4,8
	2	Check ► ☐ If the foundation is r		0.7,50			΄ (ξε	323
	3	Interest on savings and temp	•				***	* *
	4	Dividends and interest from	-			-	-	· .4. 4 .3
	5a	Gross rents					RECEI	
	b	Net rental income or (loss)			7 5	* i r=	"EVEIVED	
ø)	6a	Net gain or (loss) from sale of	f assets not on line 10		* -	m -2	*** ***	70/ 3
evenue	b	Gross sales price for all assets on					PR 2 2 2012	18
Ş	7	Capital gain net income (from			30	*/ L	- - 2013	19
Revenue	8	Net short-term capital gain .	-	*37 - 1/2	- 1	10	200	181
	9	_	,	\$ ·.*	!	-/ <u>-</u>	BUEN. IT	N 5. 4
	10a	Gross sales less returns and allo	1			> & >	-	
	ь	Less: Cost of goods sold						
	1	Gross profit or (loss) (attach	·		*******			
	11	Other income (attach schedu	•	1.0	00.00	1,000.00	1,000.00	\$
	12	Total. Add lines 1 through 1			88.49	1,000.00	1,000 00	-
_	13	Compensation of officers, di		0,00	00.40	1,000.00	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<u> </u>
es	14	Other employee salaries and					••••	
ž	15	Pension plans, employee be	-		<u> </u>			
ğ	16a	Legal fees (attach schedule)						
Ω	ь	Accounting fees (attach sche						
tive Expenses		Other professional fees (atta						
at	17	Interest	· · · · · · · · · · · · · · · · · · ·					
St	18	Taxes (attach schedule) (see ins						
=	19	Depreciation (attach schedul		2.9	86.12	2,986.12	2,986.12	
Operating and Administral	20	Occupancy	•		28.86	3,328.86		
Ž	21	Travel, conferences, and me		5,0		<u> </u>	2,020.00	-,,,,,,,,,
5	22			·				
e G	23	Other expenses (attach sche						
ِي _ّ	24	Total operating and adn						
<u> </u>		Add lines 13 through 23		6.3	14.98	6,314.98	6,314.98	3,328.86
þe	25	Contributions, gifts, grants p			70.00	3,0.4.00	5,514.50	5,525.56
0	26	Total expenses and disbursem			84.98	6,314.98	6,314.98	28,798.86
	27	Subtract line 26 from line 12		31,7	7.55	0,514.30	0,314.30	20,730.00
	l	Excess of revenue over exper		0 2	03.51			
			und dispuisements	1 0,0	UJ.J I		l	I
	a b					^		
	ь	Net investment income (if ned	negative, enter -0-) .			0	0	

1

De	art II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year		nd of year	
	21 C 11	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value	
	,1	Cash – non-interest-bearing	147.31	809.93	809.93	
	2	Savings and temporary cash investments				
	3	Accounts receivable ▶				
		Less: allowance for doubtful accounts ▶		· <u></u> -		
	4	Pledges receivable ▶				
		Less: allowance for doubtful accounts ▶				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other				
		disqualified persons (attach schedule) (see instructions)				
	7	Other notes and loans receivable (attach schedule) ▶		~	* '*	
		Less: allowance for doubtful accounts ▶				
ţ	8	Inventories for sale or use				
Assets	9	Prepaid expenses and deferred charges				
Ä	10a	Investments—U.S. and state government obligations (attach schedule)				
	b	Investments—corporate stock (attach schedule)				
	С	Investments—corporate bonds (attach schedule)				
	11	Investments—land, buildings, and equipment: basis ▶				
		Less accumulated depreciation (attach schedule) ▶				
	12	Investments – mortgage loans				
	13	Investments—other (attach schedule)				
	14	Land, buildings, and equipment: basis ► 360,462.50	∛ ′	~ / % 5/*	, , ,	
		Less. accumulated depreciation (attach schedule) ► 61,952 58	292,516.34	298,509 92	425,000.00	
	15					
	16	Total assets (to be completed by all filers—see the				
		instructions. Also, see page 1, item I)	292,516.34	299,319 85	425,809.93	
	17	Accounts payable and accrued expenses			* * * * * * * * * * * * * * * * * * * *	
'	18	Grants payable			'. '\$'	
Liabilities	19	Deferred revenue		- · · ·		
Ē	20	Loans from officers, directors, trustees, and other disqualified persons				
ā	21	Mortgages and other notes payable (attach schedule)				
_	22	Other liabilities (describe ▶)				
	23	Total liabilities (add lines 17 through 22)				
		Foundations that follow SFAS 117, check here . ▶ □			* * * *	
nd Balances		and complete lines 24 through 26 and lines 30 and 31.			l t	
Ē	24	Unrestricted				
a	25	Temporarily restricted			į	
<u>m</u>	26	Permanently restricted				
2		Foundations that do not follow SFAS 117, check here ▶ □				
屲		and complete lines 27 through 31.			* *,	
ō	27	Capital stock, trust principal, or current funds]	
ts	28	Paid-in or capital surplus, or land, bldg., and equipment fund			. 1	
ŠŠ	29	Retained earnings, accumulated income, endowment, or other funds				
Ä	30	Total net assets or fund balances (see instructions)	292,516.34	299,319.85		
Net Assets or Fu	31	Total liabilities and net assets/fund balances (see				
~		instructions)	292,516 34	299,319.85		
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances				
	Tota	Il net assets or fund balances at beginning of year-Part II, colu				
		-of-year figure reported on prior year's return)			292,516.34	
2		er amount from Part I, line 27a			6,803 51	
3				<u> </u>		
4		lines 1, 2, and 3		4	299,319.85	
_				5	I	
6	Tota	reases not included in line 2 (itemize) If net assets or fund balances at end of year (line 4 minus line 5)—	Part II, column (b), li	ne 30 6	299,319.85	
					~~~	

	(a) List and describe the king 2-story brick warehouse,	nd(s) of property sold (e g , real est or common stock, 200 shs MLC C	ate, o)	(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr )
<u>1a</u>				ļ		
<u>_b</u>						
C		_ <del>.</del>	<del> </del>			
<u>d</u>		· · · · · · · · · · · · · · · · · · ·		-		
e		49 Decreasing allowed	(a) Cost or	other basis	(h) Co	un or (loss)
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		ense of sale		(f) minus (g)
<u>а</u>	-		<u> </u>			
_ <u>a</u> b		·····				
c						_
d						
e						
	Complete only for assets shown	ng gain in column (h) and owne	d by the foundation	on 12/31/69	(I) Gains (Co	ol (h) gain minus
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Exces	ss of col (i) (j), if any	col (k), but no	ot less than -0-) or (from col (h))
а			<u> </u>			
b						
С						·
d						
е						
2	Capital gain net income or (r		n, also enter in Pa s), enter -0- in Pa		2	
3	Net short-term capital gain of If gain, also enter in Part I, Part I, line 8	line 8, column (c) (see instr	ns 1222(5) and (6) uctions) If (loss	). ), enter -0- in }	3	
				,	0	
or o	V Qualification Under ptional use by domestic priva	Section 4940(e) for Recte foundations subject to the			Income	
or o sect	V Qualification Under	Section 4940(e) for Recte foundations subject to the his part blank.	e section 4940(a) outable amount o	tax on net invest	t Income tment income.)	☐ Yes ☐ N
or o sect	Qualification Under ptional use by domestic privation 4940(d)(2) applies, leave the foundation liable for the se	Section 4940(e) for Recte foundations subject to the his part blank.  In the distribution 4942 tax on the distribution 4940 tax on 4940(e).	e section 4940(a) outable amount o Do not complete	tax on net invest f any year in the lethis part.	t Income tment income.) base period?	
sect /as t "Ye:	Qualification Under ptional use by domestic privation 4940(d)(2) applies, leave the foundation liable for the ses," the foundation does not qualification.	Section 4940(e) for Recte foundations subject to the his part blank.  In the distribution 4942 tax on the distribution 4940 tax on 4940(e).	outable amount o Do not complete rear; see the instr	tax on net invest f any year in the lethis part.	t Income tment income.)  base period?  aking any entries	
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Part \		ınstrı	iction	ns)
	Exempt operating foundations described in section 4940(d)(2), check here \( \bigcup \) and enter "N/A" on line 1.  Date of ruling or determination letter.  (attach copy of letter if necessary—see instructions)	~ * <s.< th=""><th>4</th><th></th></s.<>	4	
	Domestic foundations that meet the section 4940(e) requirements in Part V, check		0	
	here ▶ □ and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of J			
_	Part I, line 12, col. (b).			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)  Add lines 1 and 2			<b>-</b>
3	Add midd fund 2		-	<u> </u>
4	7 (mostrie) tax (sometime sometime most (s), (s)		-	<del></del> -
5	Tax bacca of invocation income desirate into the interest in t			-
6	Credits/Payments:		5	
a	2012 estimated tax payments and 2011 overpayment credited to 2012 6a			- Q
b				
۳ C	, ,		ļ	3
d 7	Backup withholding erroneously withheld			
7 8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here if Form 2220 is attached		-	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		-	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid . > 10		-	
11	Enter the amount of line 10 to be. Credited to 2013 estimated tax   Refunded  11		0	
	VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	1 4	Yes	No
	participate or intervene in any political campaign?	1a		1
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?	1b		1
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials		1.45%	
	published or distributed by the foundation in connection with the activities.			", <i>(</i> 20-7)
С	Division of the state of the st			
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	***		1
	(1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$	ľ	ŵ	-Cjara
е	e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		1
	If "Yes," attach a detailed description of the activities.	1		?*.
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			
4a				
	· · · · · · · · · · · · · · · · · · ·			
5				
6	If "Yes," attach the statement required by General Instruction T.  Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either.			,
U	By language in the governing instrument, or	*		
	<ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions that</li> </ul>			ĺ .
	conflict with the state law remain in the governing instrument?			
7				
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶	***		
	Donneylyania			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		<u> </u>	
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	1	<u> </u>
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or		<b> </b>	
	4942(j)(5) for calendar year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes,"			_
	complete Part XIV	9	┼	<u> </u>
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	4.5		,
	names and addresses	10	<u></u>	(0010)

Part	VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		<b>✓</b>
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		<b>✓</b>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	1	
	Website address ▶			
14	The books are in said or i	-202	6161	
	Located at ► 201 N Mercer Street, New Castle, PA ZIP+4 ►	1610	1	<u></u>
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here and enter the amount of tax-exempt interest received or accrued during the year <b>  15  </b>	٠	•	▶ □
16	At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		1
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of		454	
	the foreign country ►			
Part	VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	4	Yes	No
1a	During the year did the foundation (either directly or indirectly).	-		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes No.			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?		>>	1 m
		*>	*	* **
	<ul> <li>(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? ☐ Yes</li> <li>(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☐ Yes</li> <li>✓ No</li> </ul>	× ×*	-34.	* 1
	(4) Pay compensation to, or pay or reimburse the expenses or, a disqualified person?	,	'	
	the benefit or use of a disqualified person)?	An An	(3)	- F
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the	1000	•	. 4
	foundation agreed to make a grant to or to employ the official for a period after	29 .		1 . 3
	termination of government service, if terminating within 90 days.)	** /		
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations	*	,	3. 7
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here ▶□		44	<u></u>
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	3	<i></i>	
	were not corrected before the first day of the tax year beginning in 2012?	1c		✓
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)).		ş	*, 1
а	At the end of tax year 2012, did the foundation have any undistributed income (lines 6d and	ĺ "		
	6e, Part XIII) for tax year(s) beginning before 2012?		\$	~ 1
	If "Yes," list the years ▶ 20 , 20 , 20 , 20			
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)	,		
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement—see instructions.)	2b	<u> </u>	<b>✓</b>
С	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here 20 , 20 , 20 , 20 , 20, 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise		,	
	at any time during the year?	ľ	l	
b	If "Yes," did it have excess business holdings in 2012 as a result of (1) any purchase by the foundation or			
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of			
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			<b> </b>
	foundation had excess business holdings in 2012)	3b	-	<u> </u>
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	<del>                                     </del>	<b>/</b>
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2012?			├ <b>-</b>
	chantable purpose that had not been removed from jeopardy before the first day of the tax year deginning in 2012?	4b	L	

Dogg 6		
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	ane t	140

Part	VII-B	Statements Regarding Activities	for W	hich Form	4720 I	May Be R	equire	<b>d</b> (contir	nued)			
5a	(1) Carr (2) Influ	he year did the foundation pay or incur a y on propaganda, or otherwise attempt to ence the outcome of any specific public city or indirectly, any voter registration dri	o influe election	nce legislation on (see secti	on 495		arry on,	☐ Yes	✓ No ✓ No		:	,
	(4) Prov	ide a grant to an individual for travel, stude a grant to an organization other than ion 509(a)(1), (2), or (3), or section 4940(d	a char	ritable, etc.,	organiz		 ibed in 	☐ Yes	✓ No ✓ No	۲	,	2
	purp	ide for any purpose other than religious, oses, or for the prevention of cruelty to c	hildren	or animals?				☐Yes	✓ No	› 9	<b>\$</b> ~	>
Ь		nswer is "Yes" to 5a(1)–(5), did <b>any</b> of the ons section 53.4945 or in a current notice							ibed in	5b		_&
С	If the ar	ations relying on a current notice regardii nswer is "Yes" to question 5a(4), does t e it maintained expenditure responsibility	he four	ndation claim			 the tax 		<ul><li>▶ □</li><li>□ No</li></ul>	å	* 5	Market A Market
6a	Did the on a per		funds, (	directly or inc	directly			☐ Yes	<b></b> ✓ No			*
b		foundation, during the year, pay premium to 6b, file Form 8870.	ns, dire	ctly or indire	ctly, on	a personal	benefit	contract	? .	6b	ő	, j
7a b	At any tu	me during the tax year, was the foundation a did the foundation receive any proceeds	s or hav	e any net inc	come at	ttributable t	to the tr	☐ Yes ansaction	✓ No n? .	7b	-	
	VIII	Information About Officers, Direct and Contractors								mploy	ees,	
1	List all	officers, directors, trustees, foundation	n mana	gers and th								
		(a) Name and address	hou	e, and average rs per week ed to position	i (lfr	mpensation not paid, ter -0-)	emplo	Contribution yee benefit erred compe	plans	(e) Exper other a		
Paul L	ynch, 134	9 Chapin Road, New Castle, PA 16105	Trustee	e, 5 hours		0			0		•-	0
								···				
2	Compe "NONE	nsation of five highest-paid employed	es (oth	er than tho	se incl	uded on li	ne 1—:	see instr	uctions	s). If no	one,	enter
	(a) Name a	nd address of each employee paid more than \$50,00	00	(b) Title, and a hours per v devoted to p	week ¯	(c) Comper	nsation	(d) Contribi employee plans and compens	benefit deferred	(e) Expe other a		
NONE												
Total	number	of other employees paid over \$50,000 .		<u> </u>				<u> </u>	. ▶	Form 99	0.05	•
										Form <b>49</b>	ひーピト	• (2012

Par	t VIII. Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Em and Contractors (continued)	ıployees,
3	Five highest-paid independent contractors for professional services (see instructions). If none, enter "NON	E."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NON	E	
Tota	Il number of others receiving over \$50,000 for professional services	İ
Pai	TIX-A Summary of Direct Charitable Activities	
Lis	st the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of ganizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	NONE	
2		
3		
4		
	t IX-B Summary of Program-Related Investments (see instructions)	Amount
	escribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	NONE	
_		-
2		
	I other program-related investments. See instructions	
3	NONE	
J	NOIL	
Tota	il. Add lines 1 through 3	
		Corm 990-DE /201

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Part	X . Minimum Investment Return (All domestic foundations must complete this part. Foreign	gn fou	indations,
	see instructions.)		
1 ·	, , , , , , , , , , , , , , , , , , , ,		
	purposes:		
а	Average monthly fair market value of securities	1a	0
þ	Average of monthly cash balances	1b	0
C	Fair market value of all other assets (see instructions)	1c	0
d	<b>Total</b> (add lines 1a, b, and c)	1d	0
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)	ļl	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see		
	ınstructions)	4	
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	0
_6_	Minimum investment return. Enter 5% of line 5	6	0
Part	XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ► ☐ and do not complete this part.)		
		1	***
1	Minimum investment return from Part X, line 6	N	
2a	Tax on investment income for 2012 from Part VI, line 5		
b	Income tax for 2012. (This does not include the tax from Part VI.)		21/4
C	Add lines 2a and 2b	2c	<u>N/A</u>
3	Distributable amount before adjustments. Subtract line 2c from line 1	4	
4	Recoveries of amounts treated as qualifying distributions	5	_
5	Add lines 3 and 4	6	
6 7	Deduction from distributable amount (see instructions)	B	
•	line 1	7	0
		1 1	
Part	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	÷	
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	N/A
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
ъ	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
	Enter 1% of Part I, line 27b (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating	g whet	ther the foundation
	qualifies for the section 4940(e) reduction of tax in those years.		5 000 PE (0010)

art	Villa Undistributed income (see instruction	ons)			
1 ·		(a) Corpus	(b) Years prior to 2011	(c) 2011	(d) 2012
			<del></del>		0
2	Undistributed income, if any, as of the end of 2012.				
a	Enter amount for 2011 only			0	- · · · · · · · · · · · · · · · · · · ·
b	Total for prior years: 20,20,20		0		
3	Excess distributions carryover, if any, to 2012:				
а	From 2007				
Ь	From 2008				
C	From 2009				
đ	From 2010	]			3
е	From 2011				
f	Total of lines 3a through e				~_ <u>-                                   </u>
4	Qualifying distributions for 2012 from Part XII, line 4: ► \$				`
а	Applied to 2011, but not more than line 2a .				
b	Applied to undistributed income of prior years	35,		<	
	(Election required—see instructions)	``		Ì	
С	Treated as distributions out of corpus (Election required—see instructions)			v	
d	Applied to 2012 distributable amount		` 2		0
e	Remaining amount distributed out of corpus	***************************************	······		
5	Excess distributions carryover applied to 2012			<b>.</b>	0
•	(If an amount appears in column (d), the same				. <u>-</u>
	amount must be shown in column (a).)	\$ 4 4 A		, i	<b>₩</b> 2 €
6	Enter the net total of each column as indicated below:	<b>*</b>	***	*	*
_	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5			~	
a b	Prior years' undistributed income. Subtract line 4b from line 2b	<b>**</b> ;		* *	₹ .
С	Enter the amount of prior years' undistributed	34 %	<del>-</del>	8	7 3
·	income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed	* * *		\$	٠
d	Subtract line 6c from line 6b. Taxable	;	·-		
u	amount-see instructions	ud-da-da			
е	Undistributed income for 2011. Subtract line 4a from line 2a. Taxable amount—see				. ν
	instructions				
f	Undistributed income for 2012. Subtract lines 4d and 5 from line 1 This amount must be distributed in 2013.				0
7	Amounts treated as distributions out of corpus	<u> </u>			
•	to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions).				
8	Excess distributions carryover from 2007 not				
_	applied on line 5 or line 7 (see instructions).				
9	Excess distributions carryover to 2013.				
-	Subtract lines 7 and 8 from line 6a				
10	Analysis of line 9:				
а	Excess from 2008				
b	Excess from 2009	1			
C	Excess from 2010	†			
d	Excess from 2011	4			1
e	Excess from 2012	-			
_		t .	i	i e	·

Page 10
4942(j)(5)
Total
<u> </u>

Part	XIV Private Operating Founda	tions (see instru	ctions and Part	VII-A, question 9	)	
1a	If the foundation has received a ruling	or determination	letter that it is a	private operating		
	foundation, and the ruling is effective for	r 2012, enter the da	te of the ruling	•		
b	Check box to indicate whether the four	ndation is a private	operating foundat	ion described in se	ection	3) or 🔲 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for	(a) 2012	<b>(b)</b> 2011	(c) 2010	(d) 2009	(e) 10tm
	each year listed .					
ь	85% of line 2a		-			
С	Qualifying distributions from Part XII,					
	line 4 for each year listed .					
d	Amounts included in line 2c not used directly					
	for active conduct of exempt activities .					
е	Qualifying distributions made directly	-	-			
	for active conduct of exempt activities					
	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the					
	alternative test relied upon:					
а	"Assets" alternative test-enter					
	(1) Value of all assets .					
	(2) Value of assets qualifying under	-				
	section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test—enter 2/3 of minimum investment return shown in					
	Part X, line 6 for each year listed					
С	"Support" alternative test-enter					
	(1) Total support other than gross					
	investment income (interest,					
	dividends, rents, payments on securities loans (section					
	512(a)(5)), or royalties)					
	(2) Support from general public					
	and 5 or more exempt organizations as provided in					
	section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from					
	an exempt organization .					
	(4) Gross investment income .					<del></del>
Part				ne foundation h	ad \$5,000 or m	ore in assets at
	any time during the year-		<u> </u>			
1	Information Regarding Foundation			/ _f ab _ d _ d	الممسموس مسمئلا بطائد	by the foundation
а	List any managers of the foundation of before the close of any tax year (but of					by the foundation
	before the close of any tax year (out t	mly if they have co	ontributed more th	an \$5,000). (See S	ection 507(d)(2))	
Paul L	ynch  List any managers of the foundation	ba aa 100/ a	of the etec	le of a parmaration	o for an aqually la	ran portion of the
b	ownership of a partnership or other el					ige portion of the
	ownership of a partite ship of other of	intry) or willow the	Touridation ride a	royo or grouter and	J. 551.	
N/A 2	Information Regarding Contribution	Grant Gift Los	n Scholarshin a	to Programs:	<u>-</u>	
_	Check here ▶ ☐ if the foundation				organizations and	does not accept
	unsolicited requests for funds. If the f					
	other conditions, complete items 2a,		ge, g.ae, e.e.	(000 111011101110)		<b>3</b>
a	The name, address, and telephone no		the person to who	om applications sh	ould be addresse	d:
_			, , , , , , , , , , , , , , , , , , ,			
Paul L	ynch, 201 N. Mercer Street, New Castle, F	PA 16101				
	The form in which applications should		d information and	materials they sho	uld include:	
	nes, Transcripts from schools, Admission	1 Letters				
С	Any submission deadlines:					
No	And an analysis of the state of			one sheddele &	alda kuada af '	titutions or other
d	Any restrictions or limitations on av factors:	varos, such as b	y geographical ai	eas, chantable fi	eius, kirius of ins	atuations, or other
N.	1401015.					
No						

Supplementary Information (continued) Part XV Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to Foundation Recipient Purpose of grant or status of Amount any foundation manager contribution Name and address (home or business) recipient or substantial contributor a Paid during the year 501 Contribution 225.00 **Neshannock Basketball Boosters Human Services Center** 501 Contribution 200 00 501 Contribution 100.00 **Opportunity Center Anthony Cioffi Benefit (cancer)** 501 Contribution 100.00 10,000.00 Ellis School 501 Scholarship 501 Contribution 2,149.00 **Lawrence County Historical Society** Contribution **New Castle Arts** 501 200.00 500 00 **YMCA** 501 Contribution West Virginia University 501 Scholarship 7,000 00 501 Contribution **Cancer Victim** 500.00 **Lodge of Craft** 501 Contribution 125.00 Contribution 100.00 **Knights of Columbus** 501 **Lawrence County Junior Miss** 501 Contribution 100.00 3311 00 501 Contribution **Penn State University Albert Getting Memorial** 501 Contribution 300 00 560.00 See Attached List Contributions Total . 25,400 00 Approved for future payment Total

nte	r gross amounts unless otherwise indicated.	Unrelated bu	siness income	Excluded by section	on 512, 513, or 514	⊣ (e)
		(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	(d) Amount	Related or exemp function income (See instructions.)
1	Program service revenue:					<u> </u>
	a NONE			ļ <u>-</u>		
	b			<del> </del>		
	·			<u> </u>		<u> </u>
	d			<u> </u>		<u> </u>
	e			<del> </del>	_	
	f					
	<b>g</b> Fees and contracts from government agencies					
2	Membership dues and assessments					
3	Interest on savings and temporary cash investments					
4	Dividends and interest from securities					
5	Net rental income or (loss) from real estate:	, ,	•	1/1/		****
	a Debt-financed property					
	<b>b</b> Not debt-financed property					
6	Net rental income or (loss) from personal property					
7	Other investment income					
8	Gain or (loss) from sales of assets other than inventory					†
9	Net income or (loss) from special events	-		<del>                                     </del>	-	
				T		
11						
••	L			+		
				+		
	<u> </u>			<del>                                     </del>		
	d	-				
	e	1		1		ļ
4.0	O 1-1-1-1 A 1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	Too	· · · · · · · · · · · · · · · · · · ·	30 av 3 86 a		į .
	Subtotal. Add columns (b), (d), and (e)	31 15	-	* 3. <b>*</b> /	40	
13	Total. Add line 12, columns (b), (d), and (e)		-	* 3.27	13	
<b>13</b> See	<b>Total.</b> Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation	 ns.)			13	
13 See Par	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation to XVI-B Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp	ot Purposes		
13 See Par Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation to XVI-B Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp	ot Purposes		mportantly to th
13 See Par Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp	ot Purposes		mportantly to th
13 See Par Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation to XVI-B Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp	ot Purposes		mportantly to th
13 See Par Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation to XVI-B Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp	ot Purposes		mportantly to th
13 See Par Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation to XVI-B Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp	ot Purposes		mportantly to th
13 See Par Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation to XVI-B Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp	ot Purposes		mportantly to th
13 See Par Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation to XVI-B Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp	ot Purposes		mportantly to the
13 See Par Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation to XVI-B Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp	ot Purposes		mportantly to the
13 See Par Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation to XVI-B Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp	ot Purposes		mportantly to the
13 See Par Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation to XVI-B Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp	ot Purposes		mportantly to thotions.)
13 See Par Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation to XVI-B Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp	ot Purposes		mportantly to th
13 See Par Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation to XVI-B Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp	ot Purposes		mportantly to the
13 See Par Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation to XVI-B Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp	ot Purposes		mportantly to thotions.)
13 See Par Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation to XVI-B Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp	ot Purposes		mportantly to thotions.)
13 See Par Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation to XVI-B Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp	ot Purposes		mportantly to thotions.)
13 See Par Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation to XVI-B Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp	ot Purposes		mportantly to thotions.)
13 See Par Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation to XVI-B Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp	ot Purposes		mportantly to th
13 See Par Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation to XVI-B Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp	ot Purposes		mportantly to th
13 See Par Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation to XVI-B Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp	ot Purposes		mportantly to the
13 See Par Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation to XVI-B Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp	ot Purposes		mportantly to the
13 See Par Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation to XVI-B Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp	ot Purposes		mportantly to the
13 See Par Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation to XVI-B Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp	ot Purposes		mportantly to the
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation to XVI-B Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp	ot Purposes		mportantly to the
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation to XVI-B Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp	ot Purposes		mportantly to the
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation to XVI-B Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp	ot Purposes		mportantly to the

Part	XVII		n Regarding Trar ganizations	sfers To and Trans	actions and R	elationships	With Nonch	aritabl	е	
1	ın se	ne organization o	directly or indirectly	engage in any of the fo section 501(c)(3) organ					Yes	No
а		sfers from the repash		o a noncharitable exem		of:		1a(1)		1
		ther assets .					•	1a(2)		<del>                                     </del>
ь	. ,	r transactions:						10(2)	~	
-	(1) S	ales of assets to	a noncharitable exe	empt organization .				1b(1)		1
				able exempt organizati				1b(2)		7
			, equipment, or othe					1b(3)		<b>1</b>
	(4) R	eimbursement ai	rrangements					1b(4)		1
		oans or loan gua	•					1b(5)		1
		_		nip or fundraising solici				1b(6)		1
С				sts, other assets, or pa				1c		<b>✓</b>
				s," complete the follow				w the	faır m	arket
	value	of the goods, o	ther assets, or servi	ces given by the reportement, show in column	ting foundation.	If the foundati	on received les	s than	faır m	narket
(a) Line		b) Amount involved		haritable exempt organization	<del>``</del> ,		ransactions, and sh			
				· · · · · · · · · · · · · · · · · · ·						
		**								
				<del></del>						
			,							
						-				
				<del></del>						
	desc	ribed in section 5	501(c) of the Code (d	filiated with, or related other than section 501(				☐ Yes		No
b	IT "YE		following schedule				2			
		(a) Name of organ	sization	(b) Type of organ	nization	(c)	Description of relati	onsnip		
				· · · · · · · · · · · · · · · · · · ·						
		_ <del>_</del>								
	Hade	er negatives of negative t	declare that I have examine	 ed this return, including accomp	nanying schedules and	statements and to	he hest of my knowl	edge and I	nelief it	t is true
Sign Here	согге	ect, and complete. Decl	preparer (other th	an taxpayer) is based on all info	Trustee		ge. May the with the	IRS discu preparer ructions)?	ss this	return below
	Sign	ature of officer or trus		Date	Title				_	=
Paid Prepa	arer	Print/Type preparer	's name	Preparer's signature		Date	Check if self-employed	PTIN		
Use (		Firm's name ▶	=11			Fii	m's EIN ▶			
`	y	Firm's address ▶				Pi	one no			

#### Schedule B

(Form 990; 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

### **Schedule of Contributors**

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

OMB No 1545-0047

2012

name of	the organization			Employer Identification futiber
Paul Lyr	nch Foundation			25-6583550
Organiz	zation type (check on	e).		
Filers o	f:	Section:		
Form 99	90 or 990-EZ	☐ 501(c)(	) (enter number) organization	
		☐ 4947(a)(1) no	onexempt charitable trust <b>not</b> treated as a private fo	undation
		☐ 527 political	organization	
Form 99	90-PF	√ 501(c)(3) exe	empt private foundation	
		☐ 4947(a)(1) no	onexempt charitable trust treated as a private found	ation
		☐ 501(c)(3) tax	able private foundation	
	Only a section 501(c)(7)	•	eneral Rule or a Special Rule. nization can check boxes for both the General Rule	and a Special Rule. See
Genera	l Rule			
<b>V</b>			90-EZ, or 990-PF that received, during the year, \$5, omplete Parts I and II.	,000 or more (in money or
Special	Rules			
	under sections 509(a	a)(1) and 170(b)(1) ,000 or <b>(2)</b> 2% of	ing Form 990 or 990-EZ that met the 331/3 % suppo (A)(vi) and received from any one contributor, during the amount on (i) Form 990, Part VIII, line 1h, or (ii) F	g the year, a contribution of
	during the year, total	I contributions of	anization filing Form 990 or 990-EZ that received from more than \$1,000 for use exclusively for religious, challon of cruelty to children or animals. Complete Par	naritable, scientific, literary,
	during the year, cont not total to more tha year for an exclusive	tributions for use an \$1,000. If this b ely religious, chari nization because i	anization filing Form 990 or 990-EZ that received freexclusively for religious, charitable, etc., purposes, box is checked, enter here the total contributions that table, etc., purpose. Do not complete any of the part received nonexclusively religious, charitable, etc.,	but these contributions did at were received during the rts unless the <b>General Rule</b> contributions of \$5,000 or
		it is not covered b	by the General Rule and/or the Special Rules does non Part IV, line 2 of its Form 990; or check the box o	ot file Schedule B (Form 990,

Part I, line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Employer identification number

(a)	(b)	(c) Total contributions	(d)
No.	Name, address, and ZIP + 4		Type of contribution
1	Paul Lynch  1349 Chapin Road  New Castle, PA 16105	\$ 37,588.49	Person  Payroll  Noncash  (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a)	(b)	(c) Total contributions	(d)
No.	Name, address, and ZIP + 4		Type of contribution
		\$	Person
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person
(a)	(b)	(c) Total contributions	(d)
No.	Name, address, and ZIP + 4		Type of contribution
		\$	Person
(a)	(b)	(c) Total contributions	(d)
No.	Name, address, and ZIP + 4		Type of contribution
		\$	Person

# Form **4562**

# **Depreciation and Amortization**(Including Information on Listed Property)

OMB No 1545-0172 20**12** 

Department of the Treasury Internal Revenue Service (99

► See separate instructions.

► Attach to your tax return.

Attachment Sequence No 179

Name	(s) shown on return		Buşın	ess or activity to w	hich this form re	ates	Identi	fying number
Paul	Lynch Foundation		Offic	е			_	25-6583550
Pai	t Election To		rtain Property U					
	Note: If you	have any liste	ed property, comp	lete Part V be	efore you co	mplete Part I		
1	Maximum amount (	see instruction	s)				1	
2	Total cost of section	n 179 property	placed in service (s	ee instructions	s)		2	
3			•			ions)	3	
4	Reduction in limitat	•	•		4			
5	Dollar limitation fo	r tax year. Sul	otract line 4 from	line 1. If zero	or less, ente	er -0 If married filing		
	separately, see inst						5	
6	(a) De	escription of proper	ty	(b) Cost (busi	ness use only)	(c) Elected cost		*
								** /
7	Listed property. En	ter the amount	from line 29		7			
	Total elected cost of				c), lines 6 an	d7	8	
9	Tentative deduction						9	
10							10	
11	-					line 5 (see instructions)	11	
							12	_
	Carryover of disallo					13		(v. 💘 💖)
	e: Do not use Part II							
						clude listed property.)	(See i	nstructions.)
14	Special depreciation	on allowance 1	or qualified proper	ty (other than	listed prope	erty) placed in service	Ì	,
	during the tax year						14	
15	Property subject to						15	
	Other depreciation		-				16	
	t III MACRS De							
		, , , , , , , , , , , , , , , , , , ,		Section A	(			
17	MACRS deductions	for assets pla	ced in service in tax		na before 20	12	17	2,986.12
						o one or more general	<b>%</b> -	41 4
	asset accounts, ch					` ~	1	*
			ed in Service Duri	ng 2012 Tax Y	ear Using th	e General Depreciation	1 Syst	em
		(b) Month and year				(0.14.1)	1	
(a)	Classification of property	placed in service	(business/investment use only—see instructions)	period	(e) Convention	on (f) Method	(9)	epreciation deduction
19a	3-year property			-				
t		*						
	10-year property							
		E .					†	
	15-year property	1					1	
1	15-year property							
	20-year property			25 yrs		5/L		
	<del></del>			25 yrs 27 5 yrs	MM	5/L 5/L		
	20-year property 25-year property			275 yrs	MM MM			
<u>g</u>	20-year property 25-year property Residential rental			275 yrs 275 yrs		5/L		
<u>g</u>	f 20-year property 25-year property Residential rental property			275 yrs	ММ	5/L 5/L		
<u>g</u>	f 20-year property 25-year property Residential rental property Nonresidential real property		d in Service Durin	275 yrs 275 yrs 39 yrs	MM MM MM	5/L 5/L 5/L 5/L	on Sys	stem
	f 20-year property 25-year property Residential rental property Nonresidential real property Section C-		d in Service Durin	275 yrs 275 yrs 39 yrs	MM MM MM	5/L 5/L 5/L	on Sys	stem
202	f 20-year property 25-year property Residential rental property i Nonresidential real property Section C- Class life		d in Service Durin	27 5 yrs 27 5 yrs 39 yrs <b>g 2012 Tax Ye</b>	MM MM MM	S/L S/L S/L S/L S/L S/L S/L	on Sys	stem
20a	f 20-year property 25-year property Residential rental property i Nonresidential real property Section C- Class life 12-year		d in Service Durin	27 5 yrs 27 5 yrs 39 yrs <b>g 2012 Tax Ye</b> 12 yrs	MM MM MM	S/L   S/L	on Sys	stem
20a	f 20-year property 25-year property Residential rental property i Nonresidential real property Section C- Class life 12-year 40-year	-Assets Place		27 5 yrs 27 5 yrs 39 yrs <b>g 2012 Tax Ye</b>	MM MM MM ar Using the	5/L 5/L 5/L 5/L 6/L Alternative Depreciati	on Sys	stem
20a	f 20-year property 25-year property Residential rental property i Nonresidential real property Section C- Class life 12-year 40-year	-Assets Place	ons.)	27 5 yrs 27 5 yrs 39 yrs <b>g 2012 Tax Ye</b> 12 yrs	MM MM MM ar Using the	S/L   S/L	on Sys	stem
20a	f 20-year property 25-year property Residential rental property i Nonresidential real property Section C- Class life 12-year 40-year Listed property. En	-Assets Place See instruction ter amount from	ons.) n line 28	27 5 yrs 27 5 yrs 39 yrs <b>g 2012 Tax Ye</b> 12 yrs 40 yrs	MM MM MM ar Using the	S/L   S/L		stem
20a	f 20-year property 25-year property Residential rental property i Nonresidential real property Section C- Class life 12-year 40-year Listed property. En	Assets Place See instruction ter amount from the from line 12	ons.) In line 28	27 5 yrs 27 5 yrs 39 yrs <b>g 2012 Tax Ye</b> 12 yrs 40 yrs 7, lines 19 and	MM MM MM ar Using the MM	S/L   S/L		stem
20a	f 20-year property 25-year property Residential rental property i Nonresidential real property Section C- Class life 12-year 40-year t IV Summary ( Listed property. En Total. Add amount	See Instruction ter amount from the from line 12 propriate lines	ons.) π line 28 , lines 14 through 1 of your return. Parti	27 5 yrs 27 5 yrs 39 yrs  g 2012 Tax Ye  12 yrs 40 yrs  7, lines 19 and serships and S	MM MM ar Using the MM  MM  1 20 in colum corporations	S/L	21	stem

to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.  30 Total business/investment miles driven during the year (do not include commuting miles).  31 Total commuting miles driven during the year at 10 Total other personal (noncommuting) miles driven		24b, columns (a	<del></del> _									f			<u></u>	
feat	24															□ No
Section B - Information on Use of Vehicles   Section for vehicles used by a sele proporeto, particularly of the set of the selection of the	24		<del></del>	ousiness/inves	sunem use	ciaime		Yes				s trie evi		viitteri?		L. NO
the tax year and used more than 50% in a qualified business use:    Property used more than 50% in a qualified business use:   96		e of property (list Date place	ea investment	use Cost or o			ess/inves	stment	Recover	у Ме	ethod/		preciation	Ele	ected sect	
94    94    94    97    97    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98    98		the tax year and use	d more tha	an 50% in a	qualifie	d busii	ness us									
27 Property used 50% or less in a qualified business use:	26	Property used more t	than 50% i		d busine	ess use	): 									<u>-</u>
Property used 50% or less in a qualified business use:			<del> </del>			-										
Property used 50% or less in a qualified business use:   S/L			<del></del>			+		- +				<del></del> -		+		
96   S/L -	27	Property used 50% c			ısıness ı	use:										
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1			1			T	_			S/L -					7.49	144
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1				%					·							
Section B — Information on Use of Vehicles  Section B — Information on Use of Vehicles  Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicle to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.  30 Total business/investment miles driven during the year did not include commuting miles).  31 Total commuting miles driven during the year. Add lines 30 through 32 .  32 Total miles driven during the year. Add lines 30 through 32 .  33 Was the vehicle available for personal use during off-duty hours?  35 Was the vehicle available for personal use during off-duty hours?  36 Is another vehicle available for personal use?  Section C — Questions for Employers Who Provide Vehicles for Use by Their Employees  Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are no more than 5% owners or related persons (see instructions).  37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?  38 Do you maintain a written policy statement that prohibits personal use of vehicles, including commuting, by your employees?  39 Do you treat all use of vehicles by employees as personal use?  40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?  41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions).  42 Amortization of costs that begins during your 2012 tax year (see instructions):						Ш.					<del></del>			المواقعة ال المواقعة المواقعة ال		
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your employees?  38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners.  39 Do you treat all use of vehicles by employees as personal use?  40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?  41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions.)  Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles.  Part VI Amortization  (a)  Description of costs  (b)  Date amortization begins  (c)  Amortizable amount  (d)  Amortization period or percentage  (f)  Amortization for this year (see instructions):		wer these questions to	determine	of you mee	t an exc	eption									who <b>ar</b>	e not
employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners	37	your employees? .													Yes	No
Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?  1 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions.)  Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles.  Part VI Amortization  (a)  Description of costs  Date amortization begins  (b)  Date amortization begins  Amortizable amount  Code section  Code section  Code section  Amortization for this yeer entage  42 Amortization of costs that begins during your 2012 tax year (see instructions):	38															
Anortization of costs that begins during your 2012 tax year (see instructions):  Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles.  (a) (b) (c) (d) Amortization period or period		Do you provide more	e than five	vehicles to	your e	mploye	es, obt	 tain inf	 ormatic	 n from	your er	 mploye	es abou	 ut the		
Part VI Amortization  (a) Description of costs  (b) Date amortization begins  (c) Amortizable amount Code section Code section Code section Percentage  42 Amortization of costs that begins during your 2012 tax year (see instructions):	41	Do you meet the requ	uirements (	concerning	qualifie	d autor	mobile (	 demon	stration	 use? (5	See inst	truction	s.) .		. 2.0659	m 68444274
(a) Description of costs (b) Date amortization begins (c) Amortizable amount (d) Amortization period or percentage (f) Amortization for this year (see instructions):	Pa			39, 40, or 4	+1 IS TYE	:s, ao	HOL COL	ripiete	Section	i D IOI t	ne cove	eu ve	nicies.		1 40 2 3 3 4 5 7	· Capterat
42 Amortization of costs that begins during your 2012 tax year (see instructions):	1 6	(a)		Date amortiz	ation	Amo		mount			ion	Amortiz	ation	Amortiza		hıs year
					ur 2012	tax ve	ear (see	instruc	ctions):			percen	tage			
	42	Amortization of costs	that begin	is during yo	Jul 2012											
43 Amortization of costs that began before your 2012 tax year	42	Amortization of costs	s that begin	is during yo	Jul 2012											
44 Total. Add amounts in column (f). See the instructions for where to report	43	Amortization of costs	s that bega	ın before yo	our 2012	tax ye	ar						43			

# Form **8868**

(Rev January 2013)

Department of the Treasury Internal Revenue Service

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

► File a separate application for each return.

OMB No. 1545-1709

	e filing for an Automatic 3-Month Extension, of filing for an Additional (Not Automatic) 3-Mo					
	mplete Part II unless you have already been <u>c</u>					
a corporat 8868 to re Return for	s filing (e-file). You can electronically file Form ion required to file Form 990-T), or an addition quest an extension of time to file any of the form Transfers Associated With Certain Personals). For more details on the electronic filing of the	al (not auto forms listed l Benefit C	omatic) 3-month ext d in Part I or Part II Contracts, which m	ension of time. You ca with the exception of ust be sent to the IF	an ele f Forr RS in	ectronically file Form m 8870, Information paper format (see
Part I	Automatic 3-Month Extension of Time	. Only sul	omit original (no co	opies needed).		
Part I only		<b>.</b>				▶ 🗆
	orporations (including 1120-C filers), partnersh	ips, REMIC	Cs, and trusts must	use Form 7004 to req	uest a	an extension of time
to file inco	me tax returns.			Post of Claude Sala assistate		
	Name of exempt organization or other filer, see in	setnuctione		Enter filer's identifying Employer identification		
Type or		isti uctions.		' '		, ,
print	Paul Lynch Foundation  Number, street, and room or suite no. If a P.O. bo	ox. see instri	uctions	Social security number	55835 (SSN)	
File by the due date for	201 N. Mercer Street	,		Coolar coolarily riambor	(00)	,
filing your	City, town or post office, state, and ZIP code. For	r a foreign a	ddress, see instruction	)S.		
return See instructions	New Castle, PA 16101					
Enter the F	Return code for the return that this application i	s for (file a	separate application	n for each return) .		0 4
Applicati	on	Return	Application			Return
Is For		Code	Is For			Code
Form 990	or Form 990-EZ	01	Form 990-T (corpo	oration)		07
Form 990	-BL	02	Form 1041-A			08
Form 472	0 (individual)	03	Form 4720			09
Form 990	-PF	04	Form 5227			10
Form 990	-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
Form 990	-T (trust other than above)	06	Form 8870			12
Telephor  If the org If this is 1 If the who a list with t I re- unt	re No.   724-202-5161  anization does not have an office or place of book or a Group Return, enter the organization's found group, check this box If the names and EINs of all members the extension guest an automatic 3-month (6 months for a consist of the organization's return for:    calendar year 20 or	usiness in ir digit Ground it is for par on is for. orporation is	AX No. ▶ the United States, c up Exemption Numb t of the group, chec required to file Form	heck this box	▶ [	If this is _] and attach
2 If th	tax year beginning he tax year entered in line 1 is for less than 12 r	, 20 nonths, ch	, and ending eck reason:	al return	um	, 20
3a If th	Change in accounting period his application is for Form 990-BL, 990-PF, 990 his application of the Section of t	D-T, 4720,	or 6069, enter the te	entative tax, less any		
	refundable credits. See instructions.	4700 0	2000	and the second of	3a	\$ 0
esti	his application is for Form 990-PF, 990-T, or mated tax payments made. Include any prior y	ear overpa	lyment allowed as a	credit.	3b	\$
	ance due. Subtract line 3b from line 3a. Includ PS (Electronic Federal Tax Payment System).	See instruc	ctions.	if required, by using	3с	

Part II	e filing for an Automatic 3-Month Extension, co Additional (Not Automatic) 3-Month Ext			the original (no cop	ies ne	eeded).
				Enter filer's identifyin		
Type or	Name of exempt organization or other filer, see ins	tructions		Employer identification	numb	er (EIN) or
print	<u></u>					
File by the due date for	Number, street, and room or suite no. If a P O box	, see instr	uctions	Social security number	r (SSN)	
filing your return See instructions	City, town or post office, state, and ZIP code. For a	a foreign a	ddress, see instruction	ns		
Enter the F	Return code for the return that this application is	for (file a	separate applicatio	n for each return) .		
Application Is For	on	Return Code	Application Is For		•	Return Code
Form 990	or Form 990-EZ	01			-	
Form 990	)-BL	02	Form 1041-A			08
	20 (individual)	03	Form 4720			09
Form 990		04	Form 5227			10
	0-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
Form 990	0-T (trust other than above)	06	Form 8870			12
If the org If this is for the who	ks are in the care of ▶	FAX siness in digit Gro is for par	No. ► the United States, c up Exemption Num	check this box ber (GEN)		▶ [ If this is
• If the org • If this is f for the who list with the  4	ks are in the care of  ne No.  ganization does not have an office or place of bus for a Group Return, enter the organization's four ole group, check this box	FAX siness in digit Gro is for par is for.	No. ► the United States, oup Exemption Number of the group, checomposite of the group, checomposite of the group.	check this box ber (GEN)	▶ [	▶ □ If this is □ and attach a _ , 20
e If the org e If this is f for the who list with the  4	ks are in the care of ne No. and the care of ne No. and the care of ne No. and the care of particular of the care	FAX siness in digit Gro is for par is for.  ntil	No. ▶ the United States, of up Exemption Numit of the group, check reason: ☐ In  or 6069, enter the terpayment allowed	check this box ber (GEN) ck this box	▶ [	▶ □ If this is □ and attach a _ , 20
e If the org If this is f for the who list with the  4	ks are in the care of  ne No.  panization does not have an office or place of bus for a Group Return, enter the organization's four ole group, check this box	FAX siness in digit Gro is for par is for.  ntil	No. ▶ the United States, of up Exemption Numit of the group, check reason: □ In  or 6069, enter the terpayment allowed	check this box ber (GEN) ck this box	8a 8b	

Form **8868** (Rev 1-2013)

# PART XV 3a

Red Hurricane Club	501	Contribution	200.00
Pittsburgh Foundation	501	Contribution	180.00
Neshannock Touchdown Club	501	Contribution	125.00
New Castle Ballet	501	Contribution	35.00
New Castle Basketball Booster	501	Contribution	20.00