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Process as original.

Form **990**

Return of Organization Exempt From Income Tax

OMB No 1545-0047

2013

Open to Public Inspection

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter Social Security numbers on this form as it may be made public.

Information about Form 990 and its instructions is at www.irs.gov/form990.

Department of the Treasury
Internal Revenue Service

A For the 2013 calendar year, or tax year beginning 4/1/2013, and ending 3/31/2014	
B Check if applicable: ☐ Address change ☐ Name change ☐ Initial return ☐ Terminated ☐ Amended return ☐ Application pending	C Name of organization ESTHER H LUDWIG SCHOLARSHIPS Doing Business As Number and street (or P O box if mail is not delivered to street address) Room/suite 1 W 4th St 4th Floor MAC D4000-041 City or town State ZIP code Winston Salem NC 27101-3818 Foreign country name Foreign province/state/county Foreign postal code F Name and address of principal officer WELLS FARGO BANK, N A 1 W 4TH ST 4TH Floor MAC D4000-041, D Employer identification number 25-6884372 E Telephone number 888-730-4933 G Gross receipts \$ 8,102,588 H(a) Is this a group return for subordinates? ☐ Yes ☒ No H(b) Are all subordinates included? ☐ Yes ☒ No If "No," attach a list (see instructions) H(c) Group exemption number ▶ I Tax-exempt status ☒ 501(c)(3) ☐ 501(c) () ◀ (insert no) ☐ 4947(a)(1) or ☐ 527 J Website: ▶ N/A K Form of organization ☐ Corporation ☒ Trust ☐ Association ☐ Other ▶ L Year of formation 2005 M State of legal domicile PA

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities	TO PROVIDE FINANCIAL AID AND SCHOLARSHIPS TO DESERVING YOUNG MEN AND WOMEN OF PERRY TOWNSHIP AND SHOEMAKERSVILLE BOROUGH, BERKS COUNTY, PA. OR MUNICIPALITIES SERVED BY HAMBURG AREA HIGH SCHOOL	
	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	0
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	0
	5	Total number of individuals employed in calendar year 2013 (Part VII, line 2a)	5	0
	6	Total number of volunteers (estimate if necessary)	6	0
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
Revenue	b	Net unrelated business taxable income from Form 990-T, line 34	7b	0
	8	Contributions and grants (Part VIII, line 1h)	12,734	0
	9	Program service revenue (Part VIII, line 2g)	0	0
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	635,655	2,091,274
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0	17,175
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	648,389	2,108,449
	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	1,284,000	1,121,250
	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)	0	0
	Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0
b		Total fundraising expenses (Part IX, column (D), line 25) ▶	0	0
17		Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	314,082	287,609
18		Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	1,598,082	1,408,859
19		Revenue less expenses Subtract line 18 from line 12	-949,693	699,590
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21	Total liabilities (Part X, line 26)	25,395,771	26,092,582
	22	Net assets or fund balances Subtract line 21 from line 20	0	0
			25,395,771	26,092,582

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 JOHN SULENTIC	Date 10/22/2014			
	Type or print name and title SVP Wells Fargo Bank N A				
Paid Preparer Use Only	Print/Type preparer's name JOSEPH J CASTRIANO	Preparer's signature <i>Joseph J Castriano</i>	Date 10/22/2014	Check ☒ if self-employed	PTIN P01251603
	Firm's name ▶ PricewaterhouseCoopers, LLP	Firm's EIN ▶ 13-4008324			
	Firm's address ▶ 600 GRANT ST, PITTSBURGH, PA 15219-2777	Phone no 412-355-6000			

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

☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2013)

HTA

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