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Federal

Form **990-PF**Department of the Treasury  
Internal Revenue Service**Return of Private Foundation**

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

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▶ Information about Form 990-PF and its separate instructions is at [www.irs.gov/form990pf](http://www.irs.gov/form990pf)

OMB No. 1545-0052

**2016**

Open to Public Inspection

For calendar year 2016 or tax year beginning

, 2016, and ending

, 20

|                                                                                                                                                                                                                                                                                                                           |            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Name of foundation<br><b>POLLY LEEVE CHAR FOR R KRANCER</b>                                                                                                                                                                                                                                                               |            | A Employer identification number<br><b>23-2735661</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| Number and street (or P O box number if mail is not delivered to street address)                                                                                                                                                                                                                                          | Room/suite | B Telephone number (see instructions)<br><b>215-749-7534</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| 8800 TINICUM BOULEVARD -2ND FL                                                                                                                                                                                                                                                                                            |            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| City or town, state or province, country, and ZIP or foreign postal code<br><b>PHILADELPHIA, PA 19153</b>                                                                                                                                                                                                                 |            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| G Check all that apply<br><input type="checkbox"/> Initial return<br><input type="checkbox"/> Final return<br><input checked="" type="checkbox"/> Address change<br><input type="checkbox"/> Initial return of a former public charity<br><input type="checkbox"/> Amended return<br><input type="checkbox"/> Name change |            | C If exemption application is pending, check here . . . . . <input type="checkbox"/><br>D 1 Foreign organizations, check here . . . . . <input type="checkbox"/><br>2 Foreign organizations meeting the 85% test, check here and attach computation . . . . . <input type="checkbox"/><br>E If private foundation status was terminated under section 507(b)(1)(A), check here . . . . . <input type="checkbox"/><br>F If the foundation is in a 60-month termination under section 507(b)(1)(B) check here . . . . . <input type="checkbox"/> |
| H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation<br><input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation                                                                          |            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| I Fair market value of all assets at end of year (from Part II, col (c), line 16) ▶ \$ <b>10,784,688.</b>                                                                                                                                                                                                                 |            | J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual<br><input type="checkbox"/> Other (specify) _____<br>(Part I, column (d) must be on cash basis)                                                                                                                                                                                                                                                                                                                                                 |

| Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions)) |                                                                                                       | (a) Revenue and expenses per books | (b) Net investment income | (c) Adjusted net income | (d) Disbursements for charitable purposes (cash basis only) |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|------------------------------------|---------------------------|-------------------------|-------------------------------------------------------------|
| 1                                                                                                                                                                  | Contributions, gifts, grants, etc. received (attach schedule)                                         | 5,029.                             |                           |                         |                                                             |
| 2                                                                                                                                                                  | Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch. B. . . . . |                                    |                           |                         |                                                             |
| 3                                                                                                                                                                  | Interest on savings and temporary cash investments                                                    |                                    |                           |                         |                                                             |
| 4                                                                                                                                                                  | Dividends and interest from securities . . . . .                                                      | 315,657.                           | 315,657.                  |                         | STMT 1                                                      |
| 5a                                                                                                                                                                 | Gross rents . . . . .                                                                                 |                                    |                           |                         |                                                             |
| b                                                                                                                                                                  | Net rental income or (loss)                                                                           |                                    |                           |                         |                                                             |
| 6a                                                                                                                                                                 | Net gain or (loss) from sale of assets not on line 10                                                 | 888,412.                           |                           |                         |                                                             |
| b                                                                                                                                                                  | Gross sales price for all assets on line 6a <b>4,732,256.</b>                                         |                                    |                           |                         |                                                             |
| 7                                                                                                                                                                  | Capital gain net income (from Part IV, line 2) .                                                      |                                    | 888,412.                  |                         |                                                             |
| 8                                                                                                                                                                  | Net short-term capital gain                                                                           |                                    |                           |                         |                                                             |
| 9                                                                                                                                                                  | Income modifications                                                                                  |                                    |                           |                         |                                                             |
| 10a                                                                                                                                                                | Gross sales less returns and allowances                                                               |                                    |                           |                         |                                                             |
| b                                                                                                                                                                  | Less Cost of goods sold                                                                               |                                    |                           |                         |                                                             |
| c                                                                                                                                                                  | Gross profit or (loss) (attach schedule)                                                              |                                    |                           |                         |                                                             |
| 11                                                                                                                                                                 | Other income (attach schedule)                                                                        |                                    |                           |                         |                                                             |
| 12                                                                                                                                                                 | <b>Total</b> Add lines 1 through 11 <b>GOLDEN, UT.</b>                                                | 1,209,098.                         | 1,204,069.                |                         |                                                             |
| 13                                                                                                                                                                 | Compensation of officers, directors, trustees, etc.                                                   | 33,761.                            | 27,009.                   |                         | 6,752.                                                      |
| 14                                                                                                                                                                 | Other employee salaries and wages . . . . .                                                           |                                    | NONE                      | NONE                    |                                                             |
| 15                                                                                                                                                                 | Pension plans, employee benefits . . . . .                                                            |                                    | NONE                      | NONE                    |                                                             |
| 16a                                                                                                                                                                | Legal fees (attach schedule) . . . STMT. 5 .                                                          | 2,100.                             | NONE                      | NONE                    | 2,100.                                                      |
| b                                                                                                                                                                  | Accounting fees (attach schedule) . . . . .                                                           |                                    |                           |                         |                                                             |
| c                                                                                                                                                                  | Other professional fees (attach schedule) . . .                                                       |                                    |                           |                         |                                                             |
| 17                                                                                                                                                                 | Interest . . . . .                                                                                    |                                    |                           |                         |                                                             |
| 18                                                                                                                                                                 | Taxes (attach schedule) (see instructions) . 6 .                                                      | 4,804.                             | 628.                      |                         |                                                             |
| 19                                                                                                                                                                 | Depreciation (attach schedule) and depletion .                                                        |                                    |                           |                         |                                                             |
| 20                                                                                                                                                                 | Occupancy . . . . .                                                                                   |                                    |                           |                         |                                                             |
| 21                                                                                                                                                                 | Travel, conferences, and meetings . . . . .                                                           |                                    | NONE                      | NONE                    |                                                             |
| 22                                                                                                                                                                 | Printing and publications . . . . .                                                                   |                                    | NONE                      | NONE                    |                                                             |
| 23                                                                                                                                                                 | Other expenses (attach schedule) STMT. 7 .                                                            | 467.                               | 467.                      |                         |                                                             |
| 24                                                                                                                                                                 | <b>Total operating and administrative expenses.</b><br>Add lines 13 through 23. . . . .               | 41,132.                            | 28,104.                   | NONE                    | 8,852.                                                      |
| 25                                                                                                                                                                 | Contributions, gifts, grants paid . . . . .                                                           | 765,000.                           |                           |                         | 765,000.                                                    |
| 26                                                                                                                                                                 | <b>Total expenses and disbursements.</b> Add lines 24 and 25                                          | 806,132.                           | 28,104.                   | NONE                    | 773,852.                                                    |
| 27                                                                                                                                                                 | Subtract line 26 from line 12                                                                         |                                    |                           |                         |                                                             |
| a                                                                                                                                                                  | Excess of revenue over expenses and disbursements . .                                                 | 402,966.                           |                           |                         |                                                             |
| b                                                                                                                                                                  | Net investment income (if negative, enter -0-)                                                        |                                    | 1,175,965.                |                         |                                                             |
| c                                                                                                                                                                  | Adjusted net income (if negative, enter -0-)                                                          |                                    |                           |                         |                                                             |

JSA For Paperwork Reduction Act Notice, see instructions.

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| Part II Balance Sheets                                                  |                                                                                                                             | Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)                | Beginning of year                                                          | End of year    |                       |  |
|-------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------|----------------|-----------------------|--|
|                                                                         |                                                                                                                             |                                                                                                                                   | (a) Book Value                                                             | (b) Book Value | (c) Fair Market Value |  |
| Assets                                                                  | 1                                                                                                                           | Cash - non-interest-bearing . . . . .                                                                                             |                                                                            | 623,849.       | 623,849.              |  |
|                                                                         | 2                                                                                                                           | Savings and temporary cash investments . . . . .                                                                                  |                                                                            |                |                       |  |
|                                                                         | 3                                                                                                                           | Accounts receivable ▶ . . . . .                                                                                                   |                                                                            |                |                       |  |
|                                                                         |                                                                                                                             | Less allowance for doubtful accounts ▶ . . . . .                                                                                  |                                                                            |                |                       |  |
|                                                                         | 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 ▶ . . . . . NONE                                                                             |                                                                            |                |                       |  |
|                                                                         | 8                                                                                                                           | Inventories for sale or use . . . . .                                                                                             |                                                                            |                |                       |  |
|                                                                         | 9                                                                                                                           | Prepaid expenses and deferred charges . . . . .                                                                                   |                                                                            |                |                       |  |
|                                                                         | 10a                                                                                                                         | Investments - U.S. and state government obligations (attach schedule) . . . . .                                                   |                                                                            |                |                       |  |
|                                                                         | b                                                                                                                           | Investments - corporate stock (attach schedule) . . . . .                                                                         | 1,996,979.                                                                 | 332,703.       | 339,400.              |  |
|                                                                         | c                                                                                                                           | Investments - corporate bonds (attach schedule) . . . . .                                                                         | 4,903,570.                                                                 | 3,247,707.     | 5,495,381.            |  |
|                                                                         | Liabilities                                                                                                                 | 11                                                                                                                                | Investments - land, buildings, and equipment basis ▶ . . . . .             |                |                       |  |
|                                                                         |                                                                                                                             | Less accumulated depreciation (attach schedule) ▶ . . . . .                                                                       |                                                                            |                |                       |  |
| 12                                                                      |                                                                                                                             | Investments - mortgage loans . . . . .                                                                                            |                                                                            |                |                       |  |
| 13                                                                      |                                                                                                                             | Investments - other (attach schedule) . . . . .                                                                                   | 2,616,606.                                                                 | 4,179,188.     | 4,326,058.            |  |
| 14                                                                      |                                                                                                                             | Land, buildings, and equipment basis ▶ . . . . .                                                                                  |                                                                            |                |                       |  |
|                                                                         |                                                                                                                             | Less accumulated depreciation (attach schedule) ▶ . . . . .                                                                       |                                                                            |                |                       |  |
| 15                                                                      |                                                                                                                             | Other assets (describe ▶ . . . . . )                                                                                              |                                                                            |                |                       |  |
| 16                                                                      |                                                                                                                             | <b>Total assets</b> (to be completed by all filers - see the instructions Also, see page 1, item I) . . . . .                     | 9,517,155.                                                                 | 8,383,447.     | 10,784,688.           |  |
| 17                                                                      |                                                                                                                             | Accounts payable and accrued expenses . . . . .                                                                                   |                                                                            |                |                       |  |
| 18                                                                      |                                                                                                                             | Grants payable . . . . .                                                                                                          |                                                                            |                |                       |  |
| Net Assets or Fund Balances                                             | 19                                                                                                                          | Deferred revenue . . . . .                                                                                                        |                                                                            |                |                       |  |
|                                                                         | 20                                                                                                                          | Loans from officers, directors, trustees, and other disqualified persons . . . . .                                                |                                                                            |                |                       |  |
|                                                                         | 21                                                                                                                          | Mortgages and other notes payable (attach schedule) . . . . .                                                                     |                                                                            |                |                       |  |
|                                                                         | 22                                                                                                                          | Other liabilities (describe ▶ . . . . . )                                                                                         |                                                                            |                |                       |  |
| 23                                                                      | <b>Total liabilities</b> (add lines 17 through 22) . . . . .                                                                |                                                                                                                                   | NONE                                                                       |                |                       |  |
| Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/> | 24                                                                                                                          | Unrestricted . . . . .                                                                                                            |                                                                            |                |                       |  |
|                                                                         | 25                                                                                                                          | Temporarily restricted . . . . .                                                                                                  |                                                                            |                |                       |  |
|                                                                         | 26                                                                                                                          | Permanently restricted . . . . .                                                                                                  |                                                                            |                |                       |  |
|                                                                         | Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. ▶ <input checked="" type="checkbox"/> | 27                                                                                                                                | Capital stock, trust principal, or current funds . . . . .                 | 9,517,155.     | 7,775,793.            |  |
|                                                                         |                                                                                                                             | 28                                                                                                                                | Paid-in or capital surplus, or land, bldg. and equipment fund . . . . .    |                |                       |  |
|                                                                         |                                                                                                                             | 29                                                                                                                                | Retained earnings, accumulated income, endowment, or other funds . . . . . |                | 607,654.              |  |
|                                                                         |                                                                                                                             | 30                                                                                                                                | <b>Total net assets or fund balances</b> (see instructions) . . . . .      | 9,517,155.     | 8,383,447.            |  |
|                                                                         | 31                                                                                                                          | <b>Total liabilities and net assets/fund balances</b> (see instructions) . . . . .                                                | 9,517,155.                                                                 | 8,383,447.     |                       |  |

## Part III Analysis of Changes in Net Assets or Fund Balances

|   |                                                                                                                                                                      |   |            |
|---|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|------------|
| 1 | Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) . . . . . | 1 | 9,517,155. |
| 2 | Enter amount from Part I, line 27a . . . . .                                                                                                                         | 2 | 402,966.   |
| 3 | Other increases not included in line 2 (itemize) ▶ SEE STATEMENT 8                                                                                                   | 3 | 44,730.    |
| 4 | Add lines 1, 2, and 3 . . . . .                                                                                                                                      | 4 | 9,964,851. |
| 5 | Decreases not included in line 2 (itemize) ▶ SEE STATEMENT 9                                                                                                         | 5 | 1,581,404. |
| 6 | <b>Total net assets or fund balances at end of year</b> (line 4 minus line 5) - Part II, column (b), line 30 . . . . .                                               | 6 | 8,383,447. |

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**Part IV Capital Gains and Losses for Tax on Investment Income**

| (a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co.)                                                                                  |                                            |                                                 | (b) How acquired<br>P - Purchase<br>D - Donation                                                | (c) Date acquired<br>(mo., day, yr.) | (d) Date sold<br>(mo., day, yr.) |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------|-------------------------------------------------|-------------------------------------------------------------------------------------------------|--------------------------------------|----------------------------------|
| <b>1 a PUBLICLY TRADED SECURITIES</b>                                                                                                                                                                              |                                            |                                                 |                                                                                                 |                                      |                                  |
| <b>b</b>                                                                                                                                                                                                           |                                            |                                                 |                                                                                                 |                                      |                                  |
| <b>c</b>                                                                                                                                                                                                           |                                            |                                                 |                                                                                                 |                                      |                                  |
| <b>d</b>                                                                                                                                                                                                           |                                            |                                                 |                                                                                                 |                                      |                                  |
| <b>e</b>                                                                                                                                                                                                           |                                            |                                                 |                                                                                                 |                                      |                                  |
| (e) Gross sales price                                                                                                                                                                                              | (f) Depreciation allowed<br>(or allowable) | (g) Cost or other basis<br>plus expense of sale | (h) Gain or (loss)<br>(e) plus (f) minus (g)                                                    |                                      |                                  |
| <b>a</b> 4,732,256.                                                                                                                                                                                                |                                            | 3,843,844.                                      | 888,412.                                                                                        |                                      |                                  |
| <b>b</b>                                                                                                                                                                                                           |                                            |                                                 |                                                                                                 |                                      |                                  |
| <b>c</b>                                                                                                                                                                                                           |                                            |                                                 |                                                                                                 |                                      |                                  |
| <b>d</b>                                                                                                                                                                                                           |                                            |                                                 |                                                                                                 |                                      |                                  |
| <b>e</b>                                                                                                                                                                                                           |                                            |                                                 |                                                                                                 |                                      |                                  |
| Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69                                                                                                                        |                                            |                                                 |                                                                                                 |                                      |                                  |
| (i) F.M.V. as of 12/31/69                                                                                                                                                                                          | (j) Adjusted basis<br>as of 12/31/69       | (k) Excess of col. (i)<br>over col. (j), if any | (l) Gains (Col. (h) gain minus<br>col. (k), but not less than -0-) or<br>Losses (from col. (h)) |                                      |                                  |
| <b>a</b>                                                                                                                                                                                                           |                                            |                                                 | 888,412.                                                                                        |                                      |                                  |
| <b>b</b>                                                                                                                                                                                                           |                                            |                                                 |                                                                                                 |                                      |                                  |
| <b>c</b>                                                                                                                                                                                                           |                                            |                                                 |                                                                                                 |                                      |                                  |
| <b>d</b>                                                                                                                                                                                                           |                                            |                                                 |                                                                                                 |                                      |                                  |
| <b>e</b>                                                                                                                                                                                                           |                                            |                                                 |                                                                                                 |                                      |                                  |
| <b>2 Capital gain net income or (net capital loss)</b> { If gain, also enter in Part I, line 7<br>If (loss), enter -0- in Part I, line 7 }                                                                         |                                            |                                                 | <b>2</b>                                                                                        | 888,412.                             |                                  |
| <b>3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6).</b><br>If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in<br>Part I, line 8 . . . . . |                                            |                                                 | <b>3</b>                                                                                        |                                      |                                  |

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

| (a)<br>Base period years<br>Calendar year (or tax year beginning in)                                                                                                                                                           | (b)<br>Adjusted qualifying distributions | (c)<br>Net value of noncharitable-use assets | (d)<br>Distribution ratio<br>(col. (b) divided by col. (c)) |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|----------------------------------------------|-------------------------------------------------------------|
| 2015                                                                                                                                                                                                                           | 722,581.                                 | 11,346,633.                                  | 0.063682                                                    |
| 2014                                                                                                                                                                                                                           | 204,857.                                 | 5,788,136.                                   | 0.035393                                                    |
| 2013                                                                                                                                                                                                                           | 16,047.                                  | 5,424,751.                                   | 0.002958                                                    |
| 2012                                                                                                                                                                                                                           | 467,822.                                 | 5,365,782.                                   | 0.087186                                                    |
| 2011                                                                                                                                                                                                                           | 435,893.                                 | 5,236,455.                                   | 0.083242                                                    |
| <b>2 Total of line 1, column (d)</b>                                                                                                                                                                                           |                                          |                                              | <b>2</b> 0.272461                                           |
| <b>3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the<br/>number of years the foundation has been in existence if less than 5 years.</b>                                     |                                          |                                              | <b>3</b> 0.054492                                           |
| <b>4 Enter the net value of noncharitable-use assets for 2016 from Part X, line 5</b>                                                                                                                                          |                                          |                                              | <b>4</b> 10,848,047.                                        |
| <b>5 Multiply line 4 by line 3.</b>                                                                                                                                                                                            |                                          |                                              | <b>5</b> 591,132.                                           |
| <b>6 Enter 1% of net investment income (1% of Part I, line 27b).</b>                                                                                                                                                           |                                          |                                              | <b>6</b> 11,760.                                            |
| <b>7 Add lines 5 and 6.</b>                                                                                                                                                                                                    |                                          |                                              | <b>7</b> 602,892.                                           |
| <b>8 Enter qualifying distributions from Part XII, line 4.</b><br>If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the<br>Part VI instructions |                                          |                                              | <b>8</b> 773,852.                                           |

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 see instructions)**

|    |                                                                                                                                                                      |    |         |
|----|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|---------|
| 1a | Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 . . . . .                                |    |         |
|    | Date of ruling or determination letter _____ (attach copy of letter if necessary - see instructions)                                                                 |    |         |
| b  | Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b . . . . . | 1  | 11,760. |
| c  | All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)                                               |    |         |
| 2  | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) . . . . .                                                   | 2  | NONE    |
| 3  | Add lines 1 and 2 . . . . .                                                                                                                                          | 3  | 11,760. |
| 4  | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) . . . . .                                                 | 4  | NONE    |
| 5  | <b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0- . . . . .                                                             | 5  | 11,760. |
| 6  | <b>Credits/Payments</b>                                                                                                                                              |    |         |
| a  | 2016 estimated tax payments and 2015 overpayment credited to 2016 . . . . .                                                                                          | 6a |         |
| b  | Exempt foreign organizations - tax withheld at source . . . . .                                                                                                      | 6b | NONE    |
| c  | Tax paid with application for extension of time to file (Form 8868) . . . . .                                                                                        | 6c | 18,000. |
| d  | Backup withholding erroneously withheld . . . . .                                                                                                                    | 6d |         |
| 7  | Total credits and payments. Add lines 6a through 6d . . . . .                                                                                                        | 7  | 18,000. |
| 8  | Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached . . . . .                                   | 8  |         |
| 9  | <b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b> . . . . .                                                                | 9  |         |
| 10 | <b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b> . . . . .                                                    | 10 | 6,240.  |
| 11 | Enter the amount of line 10 to be <b>Credited to 2017 estimated tax</b> <input type="checkbox"/> 5,880. <b>Refunded</b> <input type="checkbox"/> 360.                | 11 |         |

**Part VII-A Statements Regarding Activities**

|                                                                                                                                                                                                                                                                                                                                                        | Yes | No |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? . . . . .                                                                                                                                                                      |     | X  |
| b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)? . . . . .<br>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities |     | X  |
| c Did the foundation file <b>Form 1120-POL</b> for this year? . . . . .                                                                                                                                                                                                                                                                                |     | X  |
| d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year<br>(1) On the foundation <input type="checkbox"/> \$ _____ (2) On foundation managers <input type="checkbox"/> \$ _____                                                                                                                            |     |    |
| e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. <input type="checkbox"/> \$ _____                                                                                                                                                                              |     |    |
| 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? . . . . .<br>If "Yes," attach a detailed description of the activities                                                                                                                                                                               |     | X  |
| 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 . . . . .                                                                                                                 |     | X  |
| 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .                                                                                                                                                                                                                                               |     | X  |
| b If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? . . . . .                                                                                                                                                                                                                                                                    |     |    |
| 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . .<br>If "Yes," attach the statement required by General Instruction T                                                                                                                                                                         |     | X  |
| 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either<br>• By language in the governing instrument, or<br>• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? . . . . .          | X   |    |
| 7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV                                                                                                                                                                                                                     | X   |    |
| 8a Enter the states to which the foundation reports or with which it is registered (see instructions) <input type="checkbox"/> PA                                                                                                                                                                                                                      |     |    |
| b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation . . . . .                                                                                                                                | X   |    |
| 9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV . . . . .                                                                                       |     | X  |
| 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses . . . . .                                                                                                                                                                                                        | X   |    |

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## 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 | Yes | No |
| 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 |     | X  |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ▶ N/A                                                                                                                                                                                             | 13 | X   |    |
| 14 | The books are in care of ▶ _____ Telephone no ▶ (215) 749-7534                                                                                                                                                                                                                                                                        |    |     |    |
|    | Located at ▶ 8800 TINICIUUM BOULEVARD, PHILADELPHIA, PA ZIP+4 ▶ 19103                                                                                                                                                                                                                                                                 |    |     |    |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here . . . . . and enter the amount of tax-exempt interest received or accrued during the year . . . . . ▶ 15                                                                                                                          |    |     |    |
| 16 | At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? . . . . . See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name of the foreign country ▶ | 16 | Yes | No |
|    |                                                                                                                                                                                                                                                                                                                                       |    |     | X  |

|                   |                                                                            |
|-------------------|----------------------------------------------------------------------------|
| <b>Part VII-B</b> | <b>Statements Regarding Activities for Which Form 4720 May Be Required</b> |
|-------------------|----------------------------------------------------------------------------|

**File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.**

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |                                   |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------|
| <p><b>1a</b> During the year did the foundation (either directly or indirectly)</p> <p>(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p><b>b</b> If any answer is "Yes" to 1a(1)-(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Organizations relying on a current notice regarding disaster assistance check here <input type="checkbox"/></p> <p><b>c</b> Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2016? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> |  | <p><b>1b</b></p> <p><b>1c</b></p> |
| <p><b>2</b> 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))</p> <p><b>a</b> At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2016? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If "Yes," list the years <input type="text"/></p> <p><b>b</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 <b>all</b> years listed, answer "No" and attach statement - see instructions.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p><b>c</b> 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 <input type="text"/></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  | <p><b>2b</b></p>                  |
| <p><b>3a</b> Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p><b>b</b> If "Yes," did it have excess business holdings in 2016 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 foundation had excess business holdings in 2016.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  | <p><b>3b</b></p>                  |
| <p><b>4a</b> Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?</p> <p><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 2016?</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  | <p><b>4a</b></p> <p><b>4b</b></p> |

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)**

**5a** During the year did the foundation pay or incur any amount to

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? ☐ Yes ☒ No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? ☐ Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes? ☐ Yes ☒ No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions). ☐ Yes ☒ No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? ☐ Yes ☒ No

**b** If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? ☐ Yes ☒ No

Organizations relying on a current notice regarding disaster assistance check here ☐

**c** If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? ☐ Yes ☒ No

If "Yes," attach the statement required by Regulations section 53.4945-5(d)

**6a** Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No

**b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No

If "Yes" to 6b, file Form 8870

**7a** At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? ☐ Yes ☒ No

**b** If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? ☐ Yes ☒ No

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors****1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).**

| (a) Name and address                                  | (b) Title, and average hours per week devoted to position | (c) Compensation (if not paid, enter -0-) | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
|-------------------------------------------------------|-----------------------------------------------------------|-------------------------------------------|-----------------------------------------------------------------------|---------------------------------------|
| PNC Bank N.A.                                         | Co-Trustee                                                |                                           |                                                                       |                                       |
| 1600 Market Street, 29th Floor, Philadelphia, PA 1910 | 3                                                         | 29,357.                                   | -0-                                                                   | -0-                                   |
| John R. Latourette, Jr Esquire                        | Co-Trustee                                                |                                           |                                                                       |                                       |
| 1500 Market Street, Philadelphia, PA 19102-2100       | 1                                                         | 4,404.                                    | -0-                                                                   | -0-                                   |
|                                                       |                                                           |                                           |                                                                       |                                       |
|                                                       |                                                           |                                           |                                                                       |                                       |
|                                                       |                                                           |                                           |                                                                       |                                       |

**2 Compensation of five highest-paid employees (other than those included on line 1 - see instructions). If none, enter "NONE."**

| (a) Name and address of each employee paid more than \$50,000 | (b) Title, and average hours per week devoted to position | (c) Compensation | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
|---------------------------------------------------------------|-----------------------------------------------------------|------------------|-----------------------------------------------------------------------|---------------------------------------|
| NONE                                                          |                                                           | NONE             | NONE                                                                  | NONE                                  |
|                                                               |                                                           |                  |                                                                       |                                       |
|                                                               |                                                           |                  |                                                                       |                                       |
|                                                               |                                                           |                  |                                                                       |                                       |
|                                                               |                                                           |                  |                                                                       |                                       |
|                                                               |                                                           |                  |                                                                       |                                       |

Total number of other employees paid over \$50,000 ☐ **NONE**

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**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

|          |                                                                                                                     |           |             |
|----------|---------------------------------------------------------------------------------------------------------------------|-----------|-------------|
| <b>1</b> | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes          |           |             |
| <b>a</b> | Average monthly fair market value of securities . . . . .                                                           | <b>1a</b> | 11,013,246. |
| <b>b</b> | Average of monthly cash balances . . . . .                                                                          | <b>1b</b> | NONE        |
| <b>c</b> | Fair market value of all other assets (see instructions). . . . .                                                   | <b>1c</b> | NONE        |
| <b>d</b> | <b>Total</b> (add lines 1a, b, and c) . . . . .                                                                     | <b>1d</b> | 11,013,246. |
| <b>e</b> | Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) . . . . . | <b>1e</b> |             |
| <b>2</b> | Acquisition indebtedness applicable to line 1 assets . . . . .                                                      | <b>2</b>  | NONE        |
| <b>3</b> | Subtract line 2 from line 1d . . . . .                                                                              | <b>3</b>  | 11,013,246. |
| <b>4</b> | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions). . . . .  | <b>4</b>  | 165,199.    |
| <b>5</b> | <b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4         | <b>5</b>  | 10,848,047. |
| <b>6</b> | <b>Minimum investment return.</b> Enter 5% of line 5 . . . . .                                                      | <b>6</b>  | 542,402.    |

**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.)

|           |                                                                                                                    |           |          |
|-----------|--------------------------------------------------------------------------------------------------------------------|-----------|----------|
| <b>1</b>  | Minimum investment return from Part X, line 6 . . . . .                                                            | <b>1</b>  | 542,402. |
| <b>2a</b> | Tax on investment income for 2016 from Part VI, line 5 . . . . .                                                   | <b>2a</b> | 11,760.  |
| <b>b</b>  | Income tax for 2016. (This does not include the tax from Part VI.) . . . . .                                       | <b>2b</b> |          |
| <b>c</b>  | Add lines 2a and 2b . . . . .                                                                                      | <b>2c</b> | 11,760.  |
| <b>3</b>  | Distributable amount before adjustments. Subtract line 2c from line 1 . . . . .                                    | <b>3</b>  | 530,642. |
| <b>4</b>  | Recoveries of amounts treated as qualifying distributions . . . . .                                                | <b>4</b>  | NONE     |
| <b>5</b>  | Add lines 3 and 4 . . . . .                                                                                        | <b>5</b>  | 530,642. |
| <b>6</b>  | Deduction from distributable amount (see instructions). . . . .                                                    | <b>6</b>  | NONE     |
| <b>7</b>  | <b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1. . . . . | <b>7</b>  | 530,642. |

**Part XII Qualifying Distributions** (see instructions)

|          |                                                                                                                                                                |           |          |
|----------|----------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|----------|
| <b>1</b> | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes                                                                      |           |          |
| <b>a</b> | Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 . . . . .                                                                        | <b>1a</b> | 773,852. |
| <b>b</b> | Program-related investments - total from Part IX-B . . . . .                                                                                                   | <b>1b</b> |          |
| <b>2</b> | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes . . . . .                                            | <b>2</b>  | NONE     |
| <b>3</b> | Amounts set aside for specific charitable projects that satisfy the                                                                                            |           |          |
| <b>a</b> | Suitability test (prior IRS approval required) . . . . .                                                                                                       | <b>3a</b> | NONE     |
| <b>b</b> | Cash distribution test (attach the required schedule) . . . . .                                                                                                | <b>3b</b> | NONE     |
| <b>4</b> | <b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4                                              | <b>4</b>  | 773,852. |
| <b>5</b> | 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) . . . . . | <b>5</b>  | 11,760.  |
| <b>6</b> | <b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4 . . . . .                                                                                | <b>6</b>  | 762,092. |

**Note** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

**Part XIII Undistributed Income** (see instructions)

|                                                                                                                                                                                             | (a)<br>Corpus | (b)<br>Years prior to 2015 | (c)<br>2015 | (d)<br>2016 |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|----------------------------|-------------|-------------|
| <b>1</b> Distributable amount for 2016 from Part XI, line 7 . . . . .                                                                                                                       |               |                            |             | 530,642.    |
| <b>2</b> Undistributed income, if any, as of the end of 2016                                                                                                                                |               |                            |             |             |
| <b>a</b> Enter amount for 2015 only. . . . .                                                                                                                                                |               |                            | NONE        |             |
| <b>b</b> Total for prior years 20____, 20____, 20____                                                                                                                                       |               | NONE                       |             |             |
| <b>3</b> Excess distributions carryover, if any, to 2016                                                                                                                                    |               |                            |             |             |
| <b>a</b> From 2011 . . . . .                                                                                                                                                                | NONE          |                            |             |             |
| <b>b</b> From 2012 . . . . .                                                                                                                                                                | NONE          |                            |             |             |
| <b>c</b> From 2013 . . . . .                                                                                                                                                                | NONE          |                            |             |             |
| <b>d</b> From 2014 . . . . .                                                                                                                                                                | NONE          |                            |             |             |
| <b>e</b> From 2015 . . . . .                                                                                                                                                                | NONE          |                            |             |             |
| <b>f</b> Total of lines 3a through e . . . . .                                                                                                                                              | NONE          |                            |             |             |
| <b>4</b> Qualifying distributions for 2016 from Part XII, line 4 ▶ \$ 773,852.                                                                                                              |               |                            |             |             |
| <b>a</b> Applied to 2015, but not more than line 2a . . . . .                                                                                                                               |               |                            | NONE        |             |
| <b>b</b> Applied to undistributed income of prior years (Election required - see instructions) . . . . .                                                                                    |               | NONE                       |             |             |
| <b>c</b> Treated as distributions out of corpus (Election required - see instructions) . . . . .                                                                                            | NONE          |                            |             |             |
| <b>d</b> Applied to 2016 distributable amount. . . . .                                                                                                                                      |               |                            |             | 530,642.    |
| <b>e</b> Remaining amount distributed out of corpus. . . . .                                                                                                                                | 243,210.      |                            |             |             |
| <b>5</b> Excess distributions carryover applied to 2016. (If an amount appears in column (d), the same amount must be shown in column (a).)                                                 | NONE          |                            |             | NONE        |
| <b>6</b> Enter the net total of each column as indicated below.                                                                                                                             |               |                            |             |             |
| <b>a</b> Corpus Add lines 3f, 4c, and 4e Subtract line 5                                                                                                                                    | 243,210.      |                            |             |             |
| <b>b</b> Prior years' undistributed income Subtract line 4b from line 2b. . . . .                                                                                                           |               | NONE                       |             |             |
| <b>c</b> Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed . . . . . |               | NONE                       |             |             |
| <b>d</b> Subtract line 6c from line 6b Taxable amount - see instructions . . . . .                                                                                                          |               | NONE                       |             |             |
| <b>e</b> Undistributed income for 2015 Subtract line 4a from line 2a. Taxable amount - see instructions . . . . .                                                                           |               |                            | NONE        |             |
| <b>f</b> Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2017. . . . .                                                                 |               |                            |             | NONE        |
| <b>7</b> Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) . . . . .       | NONE          |                            |             |             |
| <b>8</b> Excess distributions carryover from 2011 not applied on line 5 or line 7 (see instructions) . . . . .                                                                              | NONE          |                            |             |             |
| <b>9</b> Excess distributions carryover to 2017. Subtract lines 7 and 8 from line 6a . . . . .                                                                                              | 243,210.      |                            |             |             |
| <b>10</b> Analysis of line 9                                                                                                                                                                |               |                            |             |             |
| <b>a</b> Excess from 2012 . . . . .                                                                                                                                                         | NONE          |                            |             |             |
| <b>b</b> Excess from 2013 . . . . .                                                                                                                                                         | NONE          |                            |             |             |
| <b>c</b> Excess from 2014 . . . . .                                                                                                                                                         | NONE          |                            |             |             |
| <b>d</b> Excess from 2015 . . . . .                                                                                                                                                         | NONE          |                            |             |             |
| <b>e</b> Excess from 2016 . . . . .                                                                                                                                                         | 243,210.      |                            |             |             |

**Part XIV Private Operating Foundations** (see instructions and Part VII-A, question 9)

NOT APPLICABLE

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2016, enter the date of the ruling . . . . .

b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

|                                                                                                                                                            | Tax year |          |          |          | (e) Total |
|------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|----------|----------|----------|-----------|
|                                                                                                                                                            | (a) 2016 | (b) 2015 | (c) 2014 | (d) 2013 |           |
| 2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed . . . . .                     |          |          |          |          |           |
| b 85% of line 2a . . . . .                                                                                                                                 |          |          |          |          |           |
| c 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 . . . . .                                                          |          |          |          |          |           |
| e 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:                                                                                                |          |          |          |          |           |
| a "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 . . . . .                             |          |          |          |          |           |
| c "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 . . . . .                                                                                                                      |          |          |          |          |           |

**Part XV Supplementary Information** (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year - see instructions.)**1 Information Regarding Foundation Managers:**

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2).)

N/A

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

N/A

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed

SEE STATEMENT 10

b The form in which applications should be submitted and information and materials they should include

SEE ATTACHED STATEMENT FOR LINE 2

c Any submission deadlines

SEE ATTACHED STATEMENT FOR LINE 2

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

SEE ATTACHED STATEMENT FOR LINE 2

**Part XV** **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

| Recipient                                             | If recipient is an individual show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount   |
|-------------------------------------------------------|----------------------------------------------------------------------------------------------------------|--------------------------------|----------------------------------|----------|
| Name and address (home or business)                   |                                                                                                          |                                |                                  |          |
| <b>a Paid during the year</b><br><br>SEE STATEMENT 26 |                                                                                                          |                                |                                  | 765,000. |
| <b>Total</b> .....                                    |                                                                                                          |                                | ▶ <b>3a</b>                      | 765,000. |
| <b>b Approved for future payment</b>                  |                                                                                                          |                                |                                  |          |
| <b>Total</b> .....                                    |                                                                                                          |                                | ▶ <b>3b</b>                      |          |

[illegible]

(See worksheet in line 13 instructions to verify calculations.)

## Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

| Line No. | Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions.) |
|----------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| ▼        |                                                                                                                                                                                                                                                  |

NOT APPLICABLE

**Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations**

| 1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?                                                                                                                                                |       | Yes | No |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|-----|----|
| <b>a</b> Transfers from the reporting foundation to a noncharitable exempt organization of                                                                                                                                                                                                                                                                                                           |       |     |    |
| (1) Cash . . . . .                                                                                                                                                                                                                                                                                                                                                                                   | 1a(1) |     | X  |
| (2) Other assets . . . . .                                                                                                                                                                                                                                                                                                                                                                           | 1a(2) |     | X  |
| <b>b</b> Other transactions                                                                                                                                                                                                                                                                                                                                                                          |       |     |    |
| (1) Sales of assets to a noncharitable exempt organization . . . . .                                                                                                                                                                                                                                                                                                                                 | 1b(1) |     | X  |
| (2) Purchases of assets from a noncharitable exempt organization . . . . .                                                                                                                                                                                                                                                                                                                           | 1b(2) |     | X  |
| (3) Rental of facilities, equipment, or other assets . . . . .                                                                                                                                                                                                                                                                                                                                       | 1b(3) |     | X  |
| (4) Reimbursement arrangements . . . . .                                                                                                                                                                                                                                                                                                                                                             | 1b(4) |     | X  |
| (5) Loans or loan guarantees . . . . .                                                                                                                                                                                                                                                                                                                                                               | 1b(5) |     | X  |
| (6) Performance of services or membership or fundraising solicitations . . . . .                                                                                                                                                                                                                                                                                                                     | 1b(6) |     | X  |
| <b>c</b> Sharing of facilities, equipment, mailing lists, other assets, or paid employees . . . . .                                                                                                                                                                                                                                                                                                  | 1c    |     | X  |
| <b>d</b> If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received |       |     |    |

[illegible]

**2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? . . . . . ☐ Yes ☒ No

**b. If "Yes," complete the following schedule.**

| (a) Name of organization | (b) Type of organization | (c) Description of relationship |
|--------------------------|--------------------------|---------------------------------|
|                          |                          |                                 |
|                          |                          |                                 |
|                          |                          |                                 |
|                          |                          |                                 |
|                          |                          |                                 |

|                                                                                                                                                                                                                                                                                                                       |                            |                      |                |                                                                                                                                            |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------|----------------------|----------------|--------------------------------------------------------------------------------------------------------------------------------------------|
| 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 taxpayer) is based on all information of which preparer has any knowledge. |                            |                      |                |                                                                                                                                            |
| <b>Sign Here</b>                                                                                                                                                                                                                                                                                                      |                            | 11/13/2017           | VICE PRESIDENT | May the IRS discuss this return with the preparer shown below (see instructions)? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Signature of officer or trustee _____ Date _____ Title _____                                                                                                                                                                                                                                                          |                            |                      |                |                                                                                                                                            |
| PNC BANK, N.A. BY: _____                                                                                                                                                                                                                                                                                              |                            |                      |                |                                                                                                                                            |
| <b>Paid Preparer Use Only</b>                                                                                                                                                                                                                                                                                         | Print/Type preparer's name | Preparer's signature | Date           | Check <input type="checkbox"/> if self-employed <input type="checkbox"/> PTIN                                                              |
|                                                                                                                                                                                                                                                                                                                       | Firm's name                |                      |                | Firm's EIN                                                                                                                                 |
|                                                                                                                                                                                                                                                                                                                       | Firm's address             |                      |                | Phone 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

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

OMB No 1545-0047

**2016**

Name of the organization

Employer identification number

POLLY LEVEE CHAR FOR R KRANCER

23-2735661

Organization type (check one)

Filers of:

Section:

Form 990 or 990-EZ

☐ 501(c)( ) (enter number) organization☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation☐ 527 political organization

Form 990-PF

☒ 501(c)(3) exempt private foundation☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation☐ 501(c)(3) taxable private foundationCheck if your organization is covered by the **General Rule** or a **Special Rule**.**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.**General Rule**

- ☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

**Special Rules**

- ☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year . . . . . ▶ \$ \_\_\_\_\_

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization  
POLLY LEVEE CHAR FOR R KRANCER

Employer identification number  
23-2735661

**Part I Contributors** (See instructions). Use duplicate copies of Part I if additional space is needed.

| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                                                 | (c)<br>Total contributions | (d)<br>Type of contribution                                                                                                                                                |
|------------|---------------------------------------------------------------------------------------------------|----------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1          | Polly Levee Charitable for J La Ve<br>8801 Tinicum Boulevard, 2nd Floor<br>Philadelphia, PA 19153 | \$ 5,029.                  | Person <input checked="checked" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions.) |
|            |                                                                                                   | \$                         | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions.)                   |
|            |                                                                                                   | \$                         | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions.)                   |
|            |                                                                                                   | \$                         | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions.)                   |
|            |                                                                                                   | \$                         | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions.)                   |
|            |                                                                                                   | \$                         | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions.)                   |
|            |                                                                                                   | \$                         | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions.)                   |

## FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES

| DESCRIPTION                               | REVENUE<br>AND<br>EXPENSES<br>PER BOOKS | NET<br>INVESTMENT<br>INCOME |
|-------------------------------------------|-----------------------------------------|-----------------------------|
| -----                                     | -----                                   | -----                       |
| AQR MANAGED FUTURES STRATEGY FUND CLASS   | 98.                                     | 98.                         |
| AT&T BROADBAND CORP COMPANY GUARNT        | 100,029.                                | 100,029.                    |
| CAMBIAR INTL EQUITY FUND-INS              | 442.                                    | 442.                        |
| AETNA INC NEW                             | 488.                                    | 488.                        |
| ALTRIA GROUP INC                          | 1,051.                                  | 1,051.                      |
| AMBEV SA-SPN ADR ADR SEDOL BG804F6        | 56.                                     | 56.                         |
| AMERICAN EXPRESS CO                       | 365.                                    | 365.                        |
| APPLE INC                                 | 2,108.                                  | 2,108.                      |
| ASTELLAS PHARMA INC-UNSP ADR UNSP ADR     | 68.                                     | 68.                         |
| BANCO BILBAO VIZCAYA ARGENTARIA S A       | 103.                                    | 103.                        |
| BAXALTA INC -W/I MERGED 06/03/16 @ \$18.0 | 28.                                     | 28.                         |
| BAXTER INTERNATIONAL INC                  | 150.                                    | 150.                        |
| BECTON DICKINSON & CO                     | 396.                                    | 396.                        |
| BERKLEY CORPORATION DEBENTURES            | 41,897.                                 | 41,897.                     |
| BLACKROCK LOW DURATION INSTITUTIONAL CLA  | 1,836.                                  | 1,836.                      |
| BLACKROCK STRATEGIC INCOME OPPORTUNITIES  | 4,841.                                  | 4,841.                      |
| BOEING CO                                 | 981.                                    | 981.                        |
| CBS CORP CLASS B WI                       | 245.                                    | 245.                        |
| CVS CAREMARK CORP                         | 778.                                    | 778.                        |
| CANADIAN PACIFIC RAILWAY LTD SEDOL 27931  | 180.                                    | 180.                        |
| CHEVRON CORPORATION                       | 1,733.                                  | 1,733.                      |
| CISCO SYS INC COM                         | 876.                                    | 876.                        |
| CITIGROUP INC BDS                         | 41,890.                                 | 41,890.                     |
| COCACOLA CO                               | 630.                                    | 630.                        |
| COMCAST CORPORATION CL A                  | 640.                                    | 640.                        |
| CONOCOPHILLIPS                            | 473.                                    | 473.                        |
| CONSTELLATION BRANDS INC CL A             | 588.                                    | 588.                        |
| DB X-TRACKERS MSCI JAPAN HDG ETF          | 686.                                    | 686.                        |
| DELTA AIR LINES INC                       | 614.                                    | 614.                        |
| DISNEY WALT CO                            | 533.                                    | 533.                        |
| DISCOVER FINANCIAL W/I                    | 456.                                    | 456.                        |
| EOG RES INC                               | 201.                                    | 201.                        |

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576-12350403883629

STATEMENT 1

## FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES

=====

| DESCRIPTION                              | REVENUE<br>AND<br>EXPENSES<br>PER BOOKS | NET<br>INVESTMENT<br>INCOME |
|------------------------------------------|-----------------------------------------|-----------------------------|
| -----                                    | -----                                   | -----                       |
| E.ON SE ADR                              | 975.                                    | 975.                        |
| ENGIE ADR                                | 252.                                    | 252.                        |
| EXXON MOBIL CORP                         | 714.                                    | 714.                        |
| FIDELITY ADVISOR FLOATING HIGH INCOME FU | 2,854.                                  | 2,854.                      |
| FOOT LOCKER INC                          | 496.                                    | 496.                        |
| GENERAL ELEC CO COM                      | 1,196.                                  | 1,196.                      |
| HSBC HLDGS PLC SPONSORED ADR NEW         | 93.                                     | 93.                         |
| HANESBRANDS INC - W/I                    | 515.                                    | 515.                        |
| HELMERICH & PAYNE INC COM                | 830.                                    | 830.                        |
| HOME DEPOT INC COM                       | 828.                                    | 828.                        |
| ISHARES TIPS BOND ETF                    | 635.                                    | 635.                        |
| ISHARES TR MSCI EAFE IDX                 | 954.                                    | 954.                        |
| ISHARES CORE MSCI EAFE ETF ETF           | 5,447.                                  | 5,447.                      |
| J P MORGAN CHASE & CO COM                | 1,224.                                  | 1,224.                      |
| JOHNSON & JOHNSON COM                    | 1,363.                                  | 1,363.                      |
| JPMORGAN VALUE ADVANTAGE-INS FD 1400     | 10,388.                                 | 10,388.                     |
| LAS VEGAS SANDS CORP                     | 432.                                    | 432.                        |
| LAZARD GLOBAL LISTED INFRASTRUCTURE PORT | 6,496.                                  | 6,496.                      |
| LINCOLN NATIONAL CORP                    | 465.                                    | 465.                        |
| LOCKHEED MARTIN CORP                     | 990.                                    | 990.                        |
| MAGNA INTERNATIONAL ISIN CA5592224011    | 645.                                    | 645.                        |
| MAINSTAY EPOCH GLOBAL EQUITY YIELD FUND  | 4,226.                                  | 4,226.                      |
| MANPOWER GROUP INC                       | 310.                                    | 310.                        |
| MAZDA MTR CORP ADR                       | 60.                                     | 60.                         |
| MCDONALDS CORP COM                       | 801.                                    | 801.                        |
| MCKESSON HBOC INC COMMN                  | 168.                                    | 168.                        |
| MICROSOFT CORP                           | 1,274.                                  | 1,274.                      |
| MITSUBISHI ESTATE UNSPON ADR             | 31.                                     | 31.                         |
| MORGAN STANLEY SR UNSECURED SERIES MTN   | 11,637.                                 | 11,637.                     |
| MURATA MFG CO LTD ADR UNSPON ADR         | 52.                                     | 52.                         |
| NIKE INC CL B                            | 384.                                    | 384.                        |
| ORACLE CORP                              | 585.                                    | 585.                        |
| ORANGE ADR                               | 100.                                    | 100.                        |

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576-12350403883629

STATEMENT 2

## FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES

| DESCRIPTION                              | REVENUE<br>AND<br>EXPENSES<br>PER BOOKS | NET<br>INVESTMENT<br>INCOME |
|------------------------------------------|-----------------------------------------|-----------------------------|
| -----                                    | -----                                   | -----                       |
| PACKAGING CORP OF AMERICA COM            | 671.                                    | 671.                        |
| PFIZER INC COM                           | 1,296.                                  | 1,296.                      |
| POLARIS INDS INC                         | 330.                                    | 330.                        |
| PRINCIPAL FINANCIAL GROUP COM            | 991.                                    | 991.                        |
| PROCTER & GAMBLE CO                      | 1,702.                                  | 1,702.                      |
| QUALCOMM                                 | 770.                                    | 770.                        |
| REGIONS FINANCIAL CORP                   | 418.                                    | 418.                        |
| ROYAL DUTCH SHELL PLC ADR A              | 206.                                    | 206.                        |
| SPDR TR UNIT SER 1                       | 5,073.                                  | 5,073.                      |
| SPDR MIDCAP TRUST SERIES 1 ETF           | 1,598.                                  | 1,598.                      |
| ST JUDE MEDICAL INC                      | 391.                                    | 391.                        |
| SCHLUMBERGER LTD COM                     | 915.                                    | 915.                        |
| SECOM LTD UNSPONSORED ADR                | 58.                                     | 58.                         |
| SEIKO EPSON CORP UNSPON ADR              | 102.                                    | 102.                        |
| SHIRE PLC SPONSORED ADR                  | 209.                                    | 209.                        |
| SMITH & NEPHEW P/C SPON ADR              | 52.                                     | 52.                         |
| SUNTRUST BANKS INC COM                   | 488.                                    | 488.                        |
| TARGET CORP NTS                          | 14,677.                                 | 14,677.                     |
| TEMPLETON GLOBAL BOND FUND AD FUND       | 3,690.                                  | 3,690.                      |
| TOTAL FINA S A                           | 101.                                    | 101.                        |
| THE TRAVELERS COS INC                    | 761.                                    | 761.                        |
| UBS E-TRACS ALERIAN MLP INFRASTRUCTURE E | 5,197.                                  | 5,197.                      |
| UNION PAC CORP COM                       | 660.                                    | 660.                        |
| UNITED TECHNOLOGIES CORP COM             | 647.                                    | 647.                        |
| VANGUARD SMALL CAP ETF                   | 2,518.                                  | 2,518.                      |
| VERIZON COMMUNICATIONS COM               | 1,187.                                  | 1,187.                      |
| VISA INC CLASS A SHARES                  | 218.                                    | 218.                        |
| WEC ENERGY GROUP INC                     | 1,337.                                  | 1,337.                      |
| WELLS FARGO & CO NEW COM                 | 1,498.                                  | 1,498.                      |
| WYNDHAM WORLDWIDE CORP                   | 810.                                    | 810.                        |
| BLACKROCK LIQUIDITY FUNDS TEMPFUND       | 1,148.                                  | 1,148.                      |
| ALLEGiant GOVT MONEY MKT FD #509         | 847.                                    | 847.                        |
| INVESCO LTD ISIN BMG491BT1088 SEDOL B28X | 689.                                    | 689.                        |
| FAX529 N23R 11/13/2017 15:36:55          | 576-12350403883629                      |                             |

FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES  
=====

| DESCRIPTION                              | REVENUE<br>AND<br>EXPENSES<br>PER BOOKS | NET<br>INVESTMENT<br>INCOME |
|------------------------------------------|-----------------------------------------|-----------------------------|
| -----                                    | -----                                   | -----                       |
| ACE LIMITED NAME CHG 01/15/16 SEE H1467J | 208.                                    | 208.                        |
| CHUBB LTD SEDOL B3BQMF6                  | 422.                                    | 422.                        |
| TE CONNECTIVITY LTD SEDOL B62B7C3 ISIN C | 524.                                    | 524.                        |
| ROYAL CARRIBEAN CRUISES LTD SEDOL 275490 | 368.                                    | 368.                        |
|                                          | -----                                   | -----                       |
| TOTAL                                    | 315,657.                                | 315,657.                    |
|                                          | =====                                   | =====                       |

FORM 990PF, PART I - LEGAL FEES  
=====

| DESCRIPTION<br>-----           | REVENUE<br>AND<br>EXPENSES<br>PER BOOKS<br>----- | NET<br>INVESTMENT<br>INCOME<br>----- | ADJUSTED<br>NET<br>INCOME<br>----- | CHARITABLE<br>PURPOSES<br>----- |
|--------------------------------|--------------------------------------------------|--------------------------------------|------------------------------------|---------------------------------|
| LEGAL FEES - PRINCIPAL (ALLOCA | 2,100.                                           |                                      |                                    | 2,100.                          |
| TOTALS                         | 2,100.                                           | NONE                                 | NONE                               | 2,100.                          |
|                                | =====                                            | =====                                | =====                              | =====                           |

FORM 990PF, PART I - TAXES  
=====

| DESCRIPTION<br>-----           | REVENUE<br>AND<br>EXPENSES<br>PER BOOKS<br>----- | NET<br>INVESTMENT<br>INCOME<br>----- |
|--------------------------------|--------------------------------------------------|--------------------------------------|
| FOREIGN TAXES                  | 450.                                             | 450.                                 |
| FEDERAL TAX PAYMENT - PRIOR YE | 4,176.                                           |                                      |
| FOREIGN TAXES ON QUALIFIED FOR | 176.                                             | 176.                                 |
| FOREIGN TAXES ON NONQUALIFIED  | 2.                                               | 2.                                   |
|                                | -----                                            | -----                                |
| TOTALS                         | 4,804.                                           | 628.                                 |
|                                | =====                                            | =====                                |

POLLY LEVEE CHAR FOR R KRANCER

23-2735661

FORM 990PF, PART I - OTHER EXPENSES  
=====

| DESCRIPTION<br>----- | REVENUE<br>AND<br>EXPENSES<br>PER BOOKS<br>----- | NET<br>INVESTMENT<br>INCOME<br>----- |
|----------------------|--------------------------------------------------|--------------------------------------|
| MAP MANAGEMENT FEES  | 350.                                             | 350.                                 |
| ADR SERVICE FEES     | 117.                                             | 117.                                 |
| TOTALS               | -----<br>467.<br>=====                           | -----<br>467.<br>=====               |

FORM 990PF, PART III - OTHER INCREASES IN NET WORTH OR FUND BALANCES  
=====

| DESCRIPTION<br>----- | AMOUNT<br>----- |
|----------------------|-----------------|
| TAX COST ADJUSTMENT  | 44,723.         |
| ROUNDING ADJUSTMENT  | 7.              |
|                      | -----           |
| TOTAL                | 44,730.         |
|                      | =====           |

## FORM 990PF, PART III - OTHER DECREASES IN NET WORTH OR FUND BALANCES

## =====

DESCRIPTION

AMOUNT

-----

-----

CY AMORTIZATION CARRIED TO NY  
PY ADJUSTMENT BETWEEN TAX COST AND CV

630,356.

951,048.

TOTAL

-----  
1,581,404.

=====

POLLY LEVEE CHAR FOR R KRANCER  
FORM 990PF, PART XV - LINES 2a - 2d  
=====

23-2735661

RECIPIENT NAME:

PNC Charitable Trust Grant Review Commit

ADDRESS:

300 Fifth Avenue (PT-PTWR-29-2)

Pittsburgh, PA 15222

RECIPIENT'S PHONE NUMBER: 412-762-5157

FORM, INFORMATION AND MATERIALS:

See footnote

SUBMISSION DEADLINES:

See website: [www.pncsites.com/pncfoundation/charitable\\_trusts.html](http://www.pncsites.com/pncfoundation/charitable_trusts.html) fo

RESTRICTIONS OR LIMITATIONS ON AWARDS:

[www.pncsites.com/pncfoundation/charitable\\_trusts.html](http://www.pncsites.com/pncfoundation/charitable_trusts.html) for specific inf

STATEMENT 10

RECIPIENT NAME:

MENTAL HEALTH AMERICA INC

ADDRESS:

2000 N BEAUREGARD ST 6TH FLOOR  
ALEXANDRIA, VA 22311-1748

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL PURPOSE

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 5,000.

RECIPIENT NAME:

AMERICAN CANCER SOCIETY INC

ADDRESS:

250 WILLIAMS ST 4TH FLR  
ATLANTA, GA 30303-1032

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GEN PURP- PINK PARTY AND R,KANCER HOPE LODGE

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 35,000.

RECIPIENT NAME:

AMERICAN FOUNDATION FOR SUICIDE  
PREVENTION

ADDRESS:

120 WALL ST FL 29  
NEW YORK, NY 10005-4015

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL PURPOSE

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 15,000.

RECIPIENT NAME:

Boys & Girls Clubs of America

ADDRESS:

1275 PEACHTREE STREET, NE

Atlanta, GA 30309-3506

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

JAMES A. LA VEA

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 10,000.

RECIPIENT NAME:

AMERICAN HEART ASSOCIATION INC

ADDRESS:

7272 GREENVILLE AVE

DALLAS, TX 75231-5129

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

2016 GRANT SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 25,000.

RECIPIENT NAME:

CROHNS & COLITIS FOUNDATION OF AMERICA

ADDRESS:

733 3RD AVE STE 510

NEW YORK, NY 10017-3218

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL PURPOSES - RKRANCER

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 15,000.

RECIPIENT NAME:

MONTGOMERY CHILD ADVOCACY PROJECT

ADDRESS:

409 CHERRY ST

NORRISTOWN, PA 19401-4734

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL PURPOSE

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 20,000.

RECIPIENT NAME:

MASTERY CHARTER SCHOOLS FOUNDATION

ADDRESS:

5700 WAYNE AVE

PHILADELPHIA, PA 19144-3314

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL PURPOSE

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 15,000.

RECIPIENT NAME:

Minding Your Mind

ADDRESS:

124 SIBLEY AVE

ARDMORE, PA 19003-2312

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL PURPOSE

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 10,000.

RECIPIENT NAME:  
UNITED WAY OF LAMOILLE COUNTY INC  
ADDRESS:  
20 MORRISVILLE PLAZA STE B  
MORRISVILLE, VT 05661-8626  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
GENERAL PURPOSE  
FOUNDATION STATUS OF RECIPIENT:  
PC  
AMOUNT OF GRANT PAID ..... 10,000.

RECIPIENT NAME:  
TERRI LYNNE LOKOFF FOUNDATION  
ADDRESS:  
100 ROSS RD STE 160  
KING OF PRUSSA, PA 19406-2110  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
GENERAL SUPPORT  
FOUNDATION STATUS OF RECIPIENT:  
PC  
AMOUNT OF GRANT PAID ..... 35,000.

RECIPIENT NAME:  
CITY YEAR INC  
ADDRESS:  
287 COLUMBUS AVE  
BOSTON, MA 02116-5334  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
GEN PURPOSES - RKRANCER  
FOUNDATION STATUS OF RECIPIENT:  
PC  
AMOUNT OF GRANT PAID ..... 10,000.

RECIPIENT NAME:  
JEVS HUMAN SERVICES  
ADDRESS:  
1845 WALNUT ST STE 7TH  
PHILADELPHIA, PA 19103-4708  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
GEN PURP - RKRANCER  
FOUNDATION STATUS OF RECIPIENT:  
PC  
AMOUNT OF GRANT PAID ..... 15,000.

RECIPIENT NAME:  
MADLYN AND LEONARD ABRAMSON CENTER FOR  
JEWISH LIFE  
ADDRESS:  
1425 HORSHAM RD  
NORTH WALES, PA 19454-1320  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
GENERAL PURPOSES  
FOUNDATION STATUS OF RECIPIENT:  
PC  
AMOUNT OF GRANT PAID ..... 80,000.

RECIPIENT NAME:  
Trustees of the University of Pennsylvan  
ADDRESS:  
912 BLOCKLEY HALL  
PHILADELPHIA, PA 19104  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
GENERAL SUPPORT  
FOUNDATION STATUS OF RECIPIENT:  
PC  
AMOUNT OF GRANT PAID ..... 20,000.

POLLY LEVEE CHAR FOR R KRANCER

23-2735661

FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID

=====

RECIPIENT NAME:

Magee Rehabilitation Hospital  
Norah Salmon

ADDRESS:

1513 RACE ST  
PHILADELPHIA, PA 19102-1125

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

JERRY SEGAL GOLF CLASSIC

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 20,000.

RECIPIENT NAME:

UNITED WAY OF GREATER PHILADELPHIA AND  
SOUTHERN NEW JERSEY

ADDRESS:

1709 BENJAMIN FRANKLIN PARKWAY  
PHILADELPHIA, PA 19103-1206

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

ANNUAL CAMPAIGN

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 25,000.

RECIPIENT NAME:

VARIETY CLUB CAMP & DEVELOPMENT CENTER  
FOR HANDICAPPED CHILDREN

ADDRESS:

PO BOX 609  
WORCESTER, PA 19490-0609

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

PHILADELPHIA CAMP

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 5,000.

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RECIPIENT NAME:  
PHILLIES CHARITIES INC  
ADDRESS:  
ONE CITIZENS BANK WAY  
PHILADELPHIA, PA 19148-5205  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
GENERAL SUPPORT  
FOUNDATION STATUS OF RECIPIENT:  
PC  
AMOUNT OF GRANT PAID ..... 15,000.

RECIPIENT NAME:  
PHILABUNDANCE  
ADDRESS:  
3616 S GALLOWAY ST  
PHILADELPHIA, PA 19148-5402  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
GENERAL SUPPORT  
FOUNDATION STATUS OF RECIPIENT:  
PC  
AMOUNT OF GRANT PAID ..... 10,000.

RECIPIENT NAME:  
ALS Association Greater Philadelphia Cha  
ADDRESS:  
321 NORRISTOWN RD STE 260  
321 NORRISTOWN RD STE, PA 19002-2755  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
2016 GRANT SUPPORT  
FOUNDATION STATUS OF RECIPIENT:  
PC  
AMOUNT OF GRANT PAID ..... 65,000.

=====

RECIPIENT NAME:  
JUDITH CREED HOMES FOR ADULT INDEPENDENC  
ADDRESS:  
274 S BRYN MAWR AVE  
BRYN MAWR, PA 19010-2105  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
GEN PURP-RKRANCER  
FOUNDATION STATUS OF RECIPIENT:  
PC  
AMOUNT OF GRANT PAID ..... 10,000 .

RECIPIENT NAME:  
CANINE PARTNERS FOR LIFE  
ADDRESS:  
PO BOX 170  
COCHRANVILLE, PA 19330-0170  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
GENERAL PURPOSES-RKRANCER  
FOUNDATION STATUS OF RECIPIENT:  
PC  
AMOUNT OF GRANT PAID ..... 52,000 .

RECIPIENT NAME:  
MIDDLE ATLANTIC BLIND GOLF ASSN  
ADDRESS:  
1674 THAYER DR  
BLUE BELL, PA 19422-3547  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
GEN PURPOSES-RKRANCER  
FOUNDATION STATUS OF RECIPIENT:  
PC  
AMOUNT OF GRANT PAID ..... 1,000 .

RECIPIENT NAME:

LUPUS FOUNDATION OF AMERICA PHILADELPHIA

ADDRESS:

500 OLD YORK RD SUITE 110

JENKINTOWN, PA 19046-0000

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

LUPUS LINKS GOLF EVENT-RKRANCE

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 10,000.

RECIPIENT NAME:

A New Leash on Life USA

ADDRESS:

924 BRYN MAWR AVE

PENN VALLEY, PA 19072-1404

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

SAVING AND RECLAIMING LIVES

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 5,000.

RECIPIENT NAME:

SKYS THE LIMIT FUND

ADDRESS:

4546 EL CAMINO REAL STE 282

LOS ALTOS, CA 94022-1068

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL AND PROGRAM SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 50,000.

POLLY LEVEE CHAR FOR R KRANCER

23-2735661

FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID

=====

RECIPIENT NAME:

SPECTRUM INC

ADDRESS:

31 ELMWOOD AVE

BURLINGTON, VT 05401-4347

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL PURPOSE

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 10,000.

RECIPIENT NAME:

COMMITTEE ON TEMPORARY SHELTER

ADDRESS:

PO BOX 1616

BURLINGTON, VT 05402-1616

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL PURPOSE

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 2,500.

RECIPIENT NAME:

COPLEY HEALTH SYSTEMS INC

ADDRESS:

528 WASHINGTON HWY

MORRISVILLE, VT 05661-8973

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL PURPOSE

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 5,000.

=====

RECIPIENT NAME:  
STOWE LAND TRUST  
ADDRESS:  
PO BOX 284  
STOWE, VT 05672-0284  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
GENERAL PURPOSE  
FOUNDATION STATUS OF RECIPIENT:  
PC  
AMOUNT OF GRANT PAID ..... 5,000.

RECIPIENT NAME:  
STOWE RESCUE SQUAD INC  
ADDRESS:  
PO BOX 291  
STOWE, VT 05672-0291  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
GENERAL PURPOSE  
FOUNDATION STATUS OF RECIPIENT:  
PC  
AMOUNT OF GRANT PAID ..... 5,000.

RECIPIENT NAME:  
RONALD MCDONALD HOUSE CHARITIES INC  
ADDRESS:  
ONE KROC DR  
OAK BROOK, IL 60523-0000  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
HIT EM FOR THE HOUSE  
FOUNDATION STATUS OF RECIPIENT:  
PC  
AMOUNT OF GRANT PAID ..... 25,000.

RECIPIENT NAME:  
DEPRESSION AND BIPOLAR SUPPORT ALLIANCE  
ADDRESS:  
55 E JACKSON BLVD STE 490  
CHICAGO, IL 60604-4396  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
GENERAL PURPOSE  
FOUNDATION STATUS OF RECIPIENT:  
PC  
AMOUNT OF GRANT PAID ..... 10,000.

RECIPIENT NAME:  
NAMI  
ADDRESS:  
3803 FAIRFAX DR STE 100  
ARLINGTON, VA 22203-5860  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
GENERAL PURPOSE  
FOUNDATION STATUS OF RECIPIENT:  
PC  
AMOUNT OF GRANT PAID ..... 15,000.

RECIPIENT NAME:  
Dog is my Copilot  
ADDRESS:  
P.O. BOX 3399  
Jackson Hole, WY 83001  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
GENERAL PURPOSE  
FOUNDATION STATUS OF RECIPIENT:  
PC  
AMOUNT OF GRANT PAID ..... 2,000.

=====

## RECIPIENT NAME:

National Alliance to End Homelessness

## ADDRESS:

1518 K ST NW 2ND FL

WASHINGTON, DC 20005-1214

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

GENERAL SUPPORT

## FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 10,000.

## RECIPIENT NAME:

JEWISH FEDERATION OF PALM BEACH COUNTY

INC

## ADDRESS:

4601 COMMUNITY DR

WEST PALM BCH, FL 33417-2716

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

GENERAL PURPOSE

## FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 25,000.

## RECIPIENT NAME:

WILLS EYE FOUNDATION INC

## ADDRESS:

840 WALNUT ST SUITE 1530

PHILADELPHIA, PA 19107-5109

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

MCNAMARA, MD FUND

## FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 2,500.

RECIPIENT NAME:  
RUTH AND NORMAN RALES JEWISH FAMILY SERV  
ADDRESS:  
21300 RUTH AND BARON COLEMAN BLVD  
BOCA RATON, FL 33428-1757  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
GENERAL SUPPORT  
FOUNDATION STATUS OF RECIPIENT:  
PC  
AMOUNT OF GRANT PAID ..... 10,000.

RECIPIENT NAME:  
SUMMIT FOUNDATION  
ADDRESS:  
PO BOX 4000  
BRECKENRIDGE, CO 80424-4000  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
GENERAL PURPOSE  
FOUNDATION STATUS OF RECIPIENT:  
PC  
AMOUNT OF GRANT PAID ..... 10,000.

RECIPIENT NAME:  
DENVER DUMB FRIENDS LEAGUE  
ADDRESS:  
2080 S QUEBEC ST  
DENVER, CO 80231-3204  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
GENERAL PURPOSE  
FOUNDATION STATUS OF RECIPIENT:  
PC  
AMOUNT OF GRANT PAID ..... 10,000.

POLLY LEVEE CHAR FOR R KRANCER 23-2735661  
FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID  
=====

RECIPIENT NAME:  
FOOD BANK OF THE ROCKIES  
ADDRESS:  
10700 E 45TH AVE  
DENVER, CO 80239-2906  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
GENERAL AND TOTES (\$2K)  
FOUNDATION STATUS OF RECIPIENT:  
PC  
AMOUNT OF GRANT PAID ..... 10,000.

RECIPIENT NAME:  
WOMENS BEAN PROJECT  
ADDRESS:  
3201 CURTIS ST  
Denver, CO 80205-2754  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
GENERAL PURPOSE  
FOUNDATION STATUS OF RECIPIENT:  
PC  
AMOUNT OF GRANT PAID ..... 5,000.

RECIPIENT NAME:  
PROJECT ANGEL HEART  
ADDRESS:  
4950 WASHINGTON ST  
DENVER, CO 80216-2026  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
GENERAL PURPOSE  
FOUNDATION STATUS OF RECIPIENT:  
PC  
AMOUNT OF GRANT PAID ..... 5,000.

STATEMENT 25

POLLY LEVEE CHAR FOR R KRANCER

23-2735661

FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID

=====

RECIPIENT NAME:

PETAID COLORADO

ADDRESS:

191 YUMA ST

DENVER, CO 80223-1205

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL PURPOSE

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 5,000.

RECIPIENT NAME:

PARK CITY HISTORICAL SOCIETY INC

ADDRESS:

PO BOX 555

PARK CITY, UT 84060-0555

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL PURPOSES - R KRANCER

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 5,000.

TOTAL GRANTS PAID:

765,000.

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