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Form 990-PF

Department of the Treasury

Internal Revenue Service

As Filed Data -

DLN: 93491348002017

2016

OMB No 1545-0052

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

▶ Do not enter social security numbers on this form as it may be made public.
 ▶ Information about Form 990-PF and its instructions is at www.irs.gov/form990pf.

Open to Public Inspection

		ndar year 2016, or tax year beginning 05-01-20	16 , aı	nd ei	nding 04-30-		
SY	LVIA PE	indation ERKIN PERPETUAL CHARITABLE TRUST				entification numbe	r
WE	ELLS FA	RGO BANK NA IRS FIDUCIARY TAX SE			23-6792999		
		d street (or P O box number if mail is not delivered to street address) WT HARRIS BLVD MAC D1114-044	Room/suite		B Telephone nu	mber (see instructio	ns)
		n, state or province, country, and ZIP or foreign postal code , NC 28262			C If exemption	application is pendin	g, check here
G Ch	neck al	I that apply 🔲 Initial return 🔲 Initial return of a	former public charity		D 1. Foreign or	ganizations, check h	ere 📘 🔲
		☐ Final return ☐ Amended return				ganizations meeting k here and attach co	
		$lacktriangle$ Address change \qed Name change			,		· · -
l Ch	neck ty	$ \nabla$ pe of organization $ \nabla$ Section 501(c)(3) exempt private f	oundation			ındatıon status was 1 n 507(b)(1)(A), chec	
	Section	n 4947(a)(1) nonexempt charitable trust	private foundation				
of '	year <i>(f</i>	xet value of all assets at end from Part II, col (c), ◆ 7,145,388 J Accounting method □ Other (specify) (Part I, column (d) must	✓ Cash	al		ition is in a 60-monti n 507(b)(1)(B), chec	
Pa	rt I	Analysis of Revenue and Expenses (The total	(a) Revenue and				(d) Disbursements
		of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions)	expenses per books	(ь)	Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc , received (attach schedule)					
	2	Check ► ✓ If the foundation is not required to attach					
	3	Sch B Interest on savings and temporary cash investments	414		414		
	4	Dividends and interest from securities	206,652		206,652		
	5a	Gross rents					
	ь	Net rental income or (loss)					
KIE	6a	Net gain or (loss) from sale of assets not on line 10	56,571				
Revenue	ь	Gross sales price for all assets on line 6a 1,208,991					
ž	7	Capital gain net income (from Part IV, line 2)			56,571		
	8	Net short-term capital gain					
	9	Income modifications					
	10a b	Gross sales less returns and allowances Less Cost of goods sold					
		Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)	35,262		1,085		
	12	Total. Add lines 1 through 11	298,899		264,722		
	13	Compensation of officers, directors, trustees, etc	85,333		38,544		46,789
	14	Other employee salaries and wages	•		·		
S	15	Pension plans, employee benefits					
nse	16a	Legal fees (attach schedule)					
<u>g</u>	ь	Accounting fees (attach schedule)	5,740				5,740
ii o	С	Other professional fees (attach schedule)					
Operating and Administrative Expenses	17	Interest					
Stra	18	Taxes (attach schedule) (see instructions)	4,366		4,366		
≣	19	Depreciation (attach schedule) and depletion					
5	20	Occupancy					
ל DI	21	Travel, conferences, and meetings					
ਰ	22	Printing and publications					
5 E	23	Other expenses (attach schedule)					
erai	24	Total operating and administrative expenses.	05.400		43.040		E3 E30
<u>ā</u>	25	Add lines 13 through 23	95,439 253,200	-	42,910		52,529 253,200
			233,200				233,200
	26	Total expenses and disbursements. Add lines 24 and 25	348,639		42,910		305,729
	27	Subtract line 26 from line 12 Excess of revenue over expenses and	-49,740				
	а	disbursements	-45,740				
	ь	Net investment income (If negative, enter -0-)			221,812		
	С	Adjusted net income(If negative, enter -0-)					

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9

6,214,503

593

593

3.024,619

3,189,291

6,213,910

6,214,503

6,214,503

6,164,763

593

593

3,024,619

3,139,551

6,164,170 6,164,763

2

3

4

5

6

6,213,910

6,164,170

6,164,170 Form 990-PF (2016)

-49,740

6,164,763

7,145,388

7,145,388

Assets 9 10a b C 11

12

13

14

15

16

17

18

19

20

21

22

23

24

25

28

29

31 Part III

Liabilities

Balances

Fund 26

ö

Assets 27

Net 30

2

Prepaid expenses and deferred charges

Investments—land, buildings, and equipment basis ▶ _

Less accumulated depreciation (attach schedule)

Less accumulated depreciation (attach schedule) ▶

Total assets (to be completed by all filers—see the

Foundations that follow SFAS 117, check here ▶

and complete lines 24 through 26 and lines 30 and 31.

Land, buildings, and equipment basis

instructions Also, see page 1, item I)

Other assets (describe > .

Other liabilities (describe -_

Unrestricted . . .

Permanently restricted . . .

and complete lines 27 through 31.

of-year figure reported on prior year's return)

Decreases not included in line 2 (itemize) ▶

Enter amount from Part I, line 27a

Other increases not included in line 2 (itemize) ▶ ____

Temporarily restricted

Investments—U S and state government obligations (attach schedule)

Loans from officers, directors, trustees, and other disqualified persons Mortgages and other notes payable (attach schedule).

Total liabilities(add lines 17 through 22)

Foundations that do not follow SFAS 117, check here 🕨 🗹

Paid-in or capital surplus, or land, bldg, and equipment fund

Capital stock, trust principal, or current funds

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions)

Total liabilities and net assets/fund balances (see instructions) .

Total net assets or fund balances at beginning of year-Part II, column (a), line 30 (must agree with end-

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30

Analysis of Changes in Net Assets or Fund Balances

Form 990-PF (2016)		Page 7
Part VIII Information About Officers, Directors, Trustees and Contractors (continued)	, Foundation Managers, Highly	Paid Employees,
3 Five highest-paid independent contractors for professional serv	ices (see instructions). If none, ent	er "NONE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		<u> </u>
Part IX-A Summary of Direct Charitable Activities		the second secon
List the foundation's four largest direct charitable activities during the tax year. Include re organizations and other beneficiaries served, conferences convened, research papers process.		Expenses
1 NONE		0
2		
3		
		
4		
Part IX-B Summary of Program-Related Investments (see	instructions)	
Describe the two largest program-related investments made by the foundation during	the tax year on lines 1 and 2	Amount
1		
2		
<u> </u>		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3		. •
		Form 990-PF (2016)

3a 3b

4

5

305.729

305,729

Form 990-PF (2016)

Amounts set aside for specific charitable projects that satisfy the

the section 4940(e) reduction of tax in those years

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Adjusted qualifying distributions. Subtract line 5 from line 4.

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

income Enter 1% of Part I. line 27b (see instructions).

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

3

4

5

300,403

227,972

72,431

Form **990-PF** (2016)

Page 9

Form 990-PF (20	016)
Part XIII	Undi

Form 990-PF (2016)								
Part XIII	Undistributed Income	(see	ınstruc	tions)				

- 1 Distributable amount for 2016 from Part XI, line 7 2 Undistributed income, if any, as of the end of 2016
- Excess distributions carryover, if any, to 2016
- a Enter amount for 2015 only. **b** Total for prior years

- a From 2011. **b** From 2012. . . . c From 2013. . . d From 2014.
- e From 2015.

- f Total of lines 3a through e. 4 Qualifying distributions for 2016 from Part

required—see instructions).

d Applied to 2016 distributable amount. . . . e Remaining amount distributed out of corpus 5 Excess distributions carryover applied to 2016 (If an amount appears in column (d), the

6 Enter the net total of each column as

be distributed in 2017 7 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) 8 Excess distributions carryover from 2011 not applied on line 5 or line 7 (see instructions) . . .

9 Excess distributions carryover to 2017.

10 Analysis of line 9

a Excess from 2012. . . **b** Excess from 2013. . c Excess from 2014. . . . d Excess from 2015. . . e Excess from 2016. . .

Subtract lines 7 and 8 from line 6a

a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract line 4b from line 2b c 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. d Subtract line 6c from line 6b Taxable amount e Undistributed income for 2015 Subtract line 4a from line 2a Taxable amount—see instructions f Undistributed income for 2016 Subtract lines 4d and 5 from line 1. This amount must

indicated below:

- XII, line 4 ▶ \$
- a Applied to 2015, but not more than line 2a
- **b** Applied to undistributed income of prior years (Election required—see instructions).
- c Treated as distributions out of corpus (Election

same amount must be shown in column (a))

(a)

Corpus

(b)

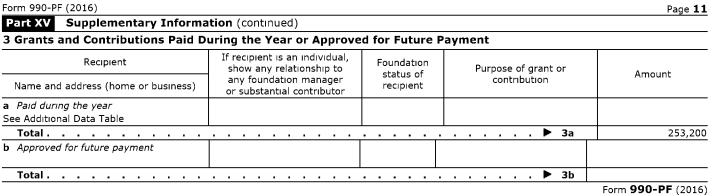
Years prior to 2015

(c)

2015

77,757

77,757



Part XVI-A Analysis of Income-Producing	Activities				
	1				(-)
nter gross amounts unless otherwise indicated	Unrelated bu	isiness income	Excluded by section	n 512, 513, or 514	(e) Related or exemp
4 December 2011	(a) Business code	(b)	(c)	(d)	function income (See instructions
Program service revenue a	Business code	Amount	Exclusion code	Amount	(See mistractions
b					
с					
d					
e					
f					
g Fees and contracts from government agencies 2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			14	414	
Dividends and interest from securities Net rental income or (loss) from real estate			14	206,652	
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income			1	34,177	
8 Gain or (loss) from sales of assets other than			1	E	
Inventory			1	56,571	
O Gross profit or (loss) from sales of inventory					
1 Other revenue					
a FEE REBATES			14	1,085	
b					
c d					
e					
2 Subtotal Add columns (b), (d), and (e)				298,899	
3 Total. Add line 12, columns (b), (d), and (e)			1	3	298,89
See worksheet in line 13 instructions to verify calculation	ons)			•	
See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activities to the second activity for which	ons) ne Accomplish	ment of Exem	pt Purposes		
See worksheet in line 13 instructions to verify calculation	ons) ne Accomplish Income Is report	ment of Exemed in column (e) c	pt Purposes of Part XVI-A contribu	uted importantly to	
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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)) or manuators) or in section 527, "elang to pinical organizations? 1 a Transfers from the reporting foundation to a noncharitable exempt organization of (1) Cash	Part	XVI	Exempt Organi	zations						•				
(2) Other assets. (2) Other sestes. (3) Sales of assets to a noncharitable exempt organization. (1) Sales of assets to a noncharitable exempt organization. (2) Purchase of assets from a noncharitable exempt organization. (3) Rental of facilities, equipment, or other assets. (3) Rental of facilities, equipment, or other assets. (4) Rembursment arrangements. (5) Loans or loan guarantees. (6) Performance of services or membership or fundraising solicitations. (7) Sales of assets from a noncharitable exempt organization. (8) Proformance of services or membership or fundraising solicitations. (8) Proformance of services or membership or fundraising solicitations. (8) It the answer to any of the above is "key," complete the following because Column (b) should always show the fair market value of the goods, other assets, or services green by the reporting foundation if the foundation reviewed less than fair market value of the goods, other assets, or services green with the reporting foundation if the foundation reviewed less than fair market value of the goods, other assets, or services green value of the goods, other assets, or services freewed (3) Line No (b) Amount emobiled (c) Name of market that is not a service of the foundation reviewed services that fair market value of the goods, other assets, or services freewed assets that fair market value of the goods, other assets, or services freewed assets that fair market value of the goods, other assets, or services freewed assets to a fair market value of the goods, other assets, or services freewed as exemption of the foundation reveal that the foundation reveal that fair market value of the goods, other assets, or services freewed value of the goods, other assets, or services freewed value of the goods, other assets, or services freewed value of the goods, other assets, or services freewed value of the goods, other assets, or services freewed value of the goods, other assets, or services freewed value of the goods of the fair market value of the	1 Did	the o	rganization directly or in	directly enga	ige in a	any of the zations) o	e following with or in section 52	any 7, re	other organizati	on described in sector	tion 501		Yes	No
(a) Other rassets	a Trai	nsfers	from the reporting foun	dation to a n	oncha	rıtable ex	empt organizat	ion ·	of					
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(S) Loans or loan guarantees. (B) Performance of services or membership or fundraising solicitations. 15(5) No c Sharing of facilities, equipment, mailing lists, other assets, or paid employees. 1 No d If the answer to any of the above is "ves," 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 reviewed 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 (a) Line No (b) Amount involved (c) Nome of nonchantable exempt organization (d) Description of transfers, transactions, and sharing arrangements 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)(31) or in section 527?. (a) Name of organization (b) Type of organization (c) Description of relationship Under penalties of pergury, 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 with preparer as any knowledge 2017-12-14 Pint Type preparer's name Preparer's Signature Print'Type preparer's name Preparer's Signature Date Check if self-employed by Print'Type preparer's name Produ49393 Preparer's Firm's address ▶ 4905 W TILGHMAN ST STE 100	(3)	Rent	al of facilities, equipmen	nt, or other a	ssets.							1b(3)		No
(d) Performance of services or membership or fundrasing solicitations. 2 Sharing of facilities, equipment, mailing lists, other assets, or part employees. 3 In the sanswer to any of the above to "ves," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting floundation if the fundation 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 given by the reporting floundation 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 (a) Line No (b) Amount involved (c) Name of nondrantable exempt organization (d) Description of transfers, transactions, and sharing arrangements 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?	(4)	Rein	nbursement arrangemer	its								1b(4)		No
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described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?	(a) Line	No	(b) Amount involved	(c) Name of	noncha	arıtable exe	empt organization		(d) Description o	f transfers, transaction	s, and shar	ıng arra	ngemen	ts
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described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?														
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 ****** Vinder 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 Vinder 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 shown below (see instr)? ✓ Yes □ No Print/Type preparer's name Preparer's Signature Date Date Print/Type preparer's name Preparer's Signature Date Print/Type preparer's name Preparer's Signature Date Print/Type preparer's name Preparer's Signature Print/Type preparer's name Preparer's Signature Date Print/Type preparer's name Preparer's Signature Print/	des	cribed	in section 501(c) of the	Code (other			•				[Yes	☑ N	o
Under penalities 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 ****** Signature of officer or trustee Print/Type preparer's name Preparer's Signature Print/Type preparer's name BRUCE C LOCH Prim's name ► LOCH ELSENBAUMER NEWTON & CO Firm's address ► 4905 W TILGHMAN ST STE 100	D If "	res," o			ı	,	b) Type of organi	zatio	n	(c) Description	on of relation	nchin		
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****** 2017-12-14 ******* Signature of officer or trustee Date Title	Sian	of r	ny knowledge and belief	, it is true, co										
Print/Type preparer's name Preparer's Signature Date Date Check if self-employed ▶ □ BRUCE C LOCH Prim's name ► LOCH ELSENBAUMER NEWTON & CO Firm's address ► 4905 W TILGHMAN ST STE 100	_			,			2017-12-14		\ *****		May the IF	RS discus	s this re	eturn
Print/Type preparer's name	пеге						2017 12 14		—) ——		with the p	reparer :	shown b	elow
Paid Preparer Use Only BRUCE C LOCH BRUCE C LOCH Firm's name ► LOCH ELSENBAUMER NEWTON & CO Firm's address ► 4905 W TILGHMAN ST STE 100		"	Signature of officer or t	rustee			Date		Title		(see ınstr)? 🗹 Y	es 🗆 N	lo
Paid Preparer Use Only BRUCE C LOCH BRUCE C LOCH Firm's name ► LOCH ELSENBAUMER NEWTON & CO Firm's EIN ►			Print/Type preparer's	s name	Prepa	arer's Sig	nature		Date			P00449	393	
Use Only Firm's address ► 4905 W TILGHMAN ST STE 100	Paid			BRUCE C LOCH						employed ▶ Ш				
Firm's address ► 4905 W TILGHMAN ST STE 100	_			H ELSENBAU	MER N	EWTON 8	k CO		•	•	Firm's E	IN ►		
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ALLENTOWN, PA 181049133 Phone no (610) 366-7300										Phone n	o (610	366-7	7300	

Form 990PF Part XV Line 3 - Grant	ts and Contributions Paid	I During the '	Year or Approved for Future I	Payment
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
CEDAR CREST COLLEGE 100 COLLEGE DRIVE ALLENTOWN, PA 18104	NO RELATIONSHIP	NON	SCHOLARSHIP SUPPORT	20,000
JEWISH FEDERATION OF THE LV 702 N 22ND STREET ALLENTOWN, PA 18104	NO RELATIONSHIP	NON	SENIOR SERVICES	7,000
BOYS GIRLS CLUB OF ALLENTOWN 720 N 6TH STREET ALLENTOWN, PA 18102	NO RELATIONSHIP	NON	MAKE YOUR MARK	5,000
JEWISH FAMILY SERVICE OF THE LV 2004 W ALLEN STREET ALLENTOWN, PA 18104	NO RELATIONSHIP	NON	EXEC DIR SUP, COUNSEL, RES SPEC	51,900
LEHIGH VALLEY CHILDRENS' CENTER INC 1501 LEHIGH STREET ALLENTOWN, PA 18103	NO RELATIONSHIP	NON	THE LVCC SCHOLARSHIP FUND	7,000
Total				253,200

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment							
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount			
Name and address (home or business)	any foundation manager or substantial contributor	recipient					
a Paid during the year							
ALLENTOWN ART MUSEUM 31 N 5TH STREET ALLENTOWN, PA 18101	NO RELATIONSHIP	NON	FREE SUNDAYS PROGRAM	4,500			
AMERICA ON WHEELS 5 N FRONT STREET ALLENTOWN, PA 18102	NO RELATIONSHIP	NON	FREE SUNDAYS	4,500			
LEHIGH COUNTY HISTORICAL SOCIETY 432 W WALNUT STREET ALLENTOWN, PA 18102	NO RELATIONSHIP	NON	THE 1960'S DECADE THAT TRANSFORMED AMERICA EXHIBIT AND PROGRAMS	5,000			
COMMUNITY BIKE WORKS 235 N MADISON STREET ALLENTOWN, PA 18102	NO RELATIONSHIP	NON	EARN A BIKE	4,000			
PINEBROOK FAMILY SERVICES 402 N FULTON STREET	NO RELATIONSHIP	NON	MAKING THE GRADE PROGRAM	4,000			

ALLENTOWN, PA 18102 253,200 Total . .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment						
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount		
Name and address (home or business)	any foundation manager or substantial contributor	recipient				
a Paid during the year						
ALLENTOWN AREA ECUMENICAL FOOD 534 W CHEW STREET ALLENTOWN, PA 18102	NO RELATIONSHIP	NON	GENERAL OPERATING SUPPORT	5,000		
CONGREGATION KENESETH ISRAEL 2227 W CHEW STREET ALLENTOWN, PA 18104	NO RELATIONSHIP	NON	DUES SUBSIDY AND SOCIAL ACTION PROGRAMS	20,000		
AMERICAN NATIONAL RED CROSS 964 MARCON BLVD SUITE 220 ALLENTOWN, PA 18109	NO RELATIONSHIP	NON	DISASTER RELIEF AND HOME FIRE CAMPAIGN	3,000		
JEWISH COMMUNITY CENTER OF ALLENTOW 702 N 22ND STREET ALLENTOWN, PA 18104	NO RELATIONSHIP	NON	CHILDRENS SCHOLARSHIP FOR CAMP AND PRE-SCHOOL	35,000		
LEHIGH VALLEY COMMUNITY BROADCASTER	NO RELATIONSHIP	NON	REMOTE BROADCAST UNIT	5,000		

ALLENTOWN, PA 18109				
JEWISH COMMUNITY CENTER OF ALLENTOW 702 N 22ND STREET ALLENTOWN, PA 18104	NO RELATIONSHIP	NON	CHILDRENS SCHOLARSHIP FOR CAMP AND PRE-SCHOOL	
LEHIGH VALLEY COMMUNITY BROADCASTER 301 BRAODWAY	NO RELATIONSHIP	NON	REMOTE BROADCAST UNIT	

301 BRAODWAY BETHLEHEM, PA 18015

253,200 Total . За

If recipient is an individual,	Foundation	Purpose of grant or	Amount
any foundation manager or substantial contributor	recipient	contribution	
NO RELATIONSHIP	NON	MEAL SUBSIDY PROGRAM	3,500
NO RELATIONSHIP	NON	GIFT OF MUSIC PROGRAM 2017- 18 SEASON	1,000
NO RELATIONSHIP	NON	OPERATING SUPPORT	3,000
NO RELATIONSHIP	NON	ARTS AND ACCESS ALWAYS PROGRAM	5,000
NO RELATIONSHIP	NON	MOUNTAIN BIKE RIDING LESSONS & MAINT FOR YOUTH	2,500
	show any relationship to any foundation manager or substantial contributor NO RELATIONSHIP NO RELATIONSHIP NO RELATIONSHIP NO RELATIONSHIP	show any relationship to any foundation manager or substantial contributor NO RELATIONSHIP NON NO RELATIONSHIP NON NO RELATIONSHIP NON NO RELATIONSHIP NON NO RELATIONSHIP NON	show any relationship to any foundation manager or substantial contributor NO RELATIONSHIP NON MEAL SUBSIDY PROGRAM NO RELATIONSHIP NON GIFT OF MUSIC PROGRAM 2017- 18 SEASON NO RELATIONSHIP NON OPERATING SUPPORT NO RELATIONSHIP NON ARTS AND ACCESS ALWAYS PROGRAM NO RELATIONSHIP NO RELATIONSHIP NON MOUNTAIN BIKE RIDING

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment						
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount		
Name and address (home or business)	any foundation manager or substantial contributor	recipient				
a Paid during the year						
MEALS ON WHEELS OF LEHIGH COUNTY 4234 DORNEY PARK ROAD ALLENTOWN, PA 18104	NO RELATIONSHIP	NON	SUBSIDIZE MEAL COSTS FOR LOW INCOME CLIENTS	3,500		
LEHIGH VALLEY PUBLIC TELECOMMUNICAT 839 SESAME STREET BETHLEHEM, PA 18015	NO RELATIONSHIP	NON	FULL STEAM AHEAD EARLY CHILDHOOD EDUC INITIATIVE	5,000		
BAUM SCHOOL OF ART 510 W LINDEN STREET ALLENTOWN, PA 18101	NO RELATIONSHIP	NON	COMMUNITY OUTREACH PROGRAMS AND FINANCIAL ASSISTANCE	3,000		
CANCER SUPPORT COMMUNITY OF THE GRE 3400 BATH PIKE BETHLEHEM, PA 18017	NO RELATIONSHIP	NON	CANCER SUPPORT AND EDUCATION	5,000		
SECOND HARVEST FOOD BANK OF THE LEH 2045 HARVEST WAY ALLENTOWN, PA 18104	NO RELATIONSHIP	NON	GENERAL PURPOSE	2,500		

Total . 3a 253,200

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment					
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount	
Name and address (home or business)	any foundation manager or substantial contributor	recipient			
a Paid during the year					
THE LITERACY CENTER 801 HAMILTON STREET ALLENTOWN, PA 18101	NO RELATIONSHIP	NON	LITERACY INSTRUCTION FOR WORK, FAMILY AND LIFE	5,000	
MERCY SPECIAL LEARNING CENTER 830 S WOODWARD STREET ALLENTOWN, PA 18103	NO RELATIONSHIP	NON	SCHOLARSHIP & TUITION ASSISTANCE PROGRAM	2,500	
FAMILY CONNECTION OF EASTON INC 723 COAL STREET EASTON, PA 18042	NO RELATIONSHIP	NON	PARENT CHILD HOME PROGRAM	2,500	
BALLET GUILD OF THE LEHIGH VALLEY 556 MAIN STREET BETHLEHEM, PA 18018	NO RELATIONSHIP	NON	2017 SCHOOL PERFORMANCES OF THE NUTCRACKER BALLET	1,500	
HAVEN HOUSE 1411 UNION BOULEVARD	NO RELATIONSHIP	NON	WELLNESS RECOVERY TEAM START UP	3,000	

ALLENTOWN, PA 18109

253,200

Form 990PF Part XV Line 3 - Grant	ts and Contributions Paid	During the \	Year or Approved for Future	Payment
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
HISPANIC CENTER LEHIGH VALLEY 520 E FOURTH STREET BETHLEHEM, PA 18015	NO RELATIONSHIP	NON	FOWLER COMMUNITY WELLNESS CENTER	4,500
LEHIGH COUNTY SENIOR CITIZENS INC 1633 ELM STREET ALLENTOWN, PA 18102	NO RELATIONSHIP	NON	MUSIC PROGRAMS	1,500
THE ARC OF LEHIGH AND NORTHAMPTON C 2289 AVENUE A BETHLEHEM, PA 18017	NO RELATIONSHIP	NON	ADVOCACY SERVICES PROGRAM	3,000
THE DAVINCI DISCOVERY CENTER OF SCI 3145 HAMILTON BLVD BYPASS ALLENTOWN, PA 18103	NO RELATIONSHIP	NON	WORKSHOP MATERIALS, MEALS & CONSULTANT SUPPORT	4,800
RESOURCES FOR HUMAN DEVELOPMENT INC 601 E BROAD STREET BETHLEHEM, PA 18018	NO RELATIONSHIP	NON	SOUS CHEF	2,500

253,200

Total . 3a

Recipient If recipient is an individual, show any relationship to any foundation manager or substantial contributor

a Paid during the year

Recipient Security If recipient is an individual, show any relationship to any foundation manager or substantial contributor

Recipient If recipient is an individual, show any relationship to any foundation manager or substantial contributor

Recipient Security If recipient is an individual, show any relationship to any foundation manager or substantial contributor

THIRD STREET ALLIANCE FOR WOMEN CHI 41 N 3RD STREET EASTON, PA 18042	NO RELATIONSHIP	NON	CAPITAL IMPROVEMENTS AND HISTORIC PRESERVATION	2,500
COMMUNITY MUSIC SCHOOL	NO RELATIONSHIP	NON	GENERAL OPERATING SUPPORT	5,000

27.31611,177 10012				
COMMUNITY MUSIC SCHOOL 23 N 6TH STREET ALLENTOWN, PA 18101	NO RELATIONSHIP	NON	GENERAL OPERATING SUPPORT	5,000
Total				253,200

efile GRAPHIC print - DO NOT P	ROCESS	As Filed D	ata -			DLN	l: 93491348002017
TY 2016 Accounting Fe	es Sch	edule					
Name: SYLVIA PERKIN PERPETUAL CHARITABLE TRUST							
		WELLS FARGO BANK NA IRS FIDUCIARY TAX SE					
	EIN: 23-6792999						
Softw	are ID:	1600030	3				
Software V	ersion:	2016v3.0	0				
Category	Ame	ount		investment income	Adjusted Net Income		Disbursements for Charitable Purposes
		5,740		0		0	5,740

TY 2016 Compensation Explanation

Name: SYLVIA PERKIN PERPETUAL CHARITABLE TRUST
WELLS FARGO BANK NA IRS FIDUCIARY TAX SE

EIN: 23-6792999

Software ID: 16000303

	Software Version: 2016v3.0
Person Name	Explanation
WELLS FARGO BANK NA	THE COMPENSATION REPORTED IN COLUMN(C) IS CALCULATED BASED ON PERIODIC MARKET VALUES AND/OR THE APPLICABLE FEE AGREEMENT IT IS NOT DETERMINED SOLELY ON AN HOURLY BASIS CORPORATE TRUSTEE SERVICES INCLUDE, BUT ARE NOT LIMITED TO, ADMINISTRATIVE SERVICES SUCH AS FIDUCIARY ACCOUNTING, CUSTODY OF ASSETS, COMPLYING WITH TAX FILING REQUIREMENTS, COMPLYING WITH DISTRIBUTION PROVISIONS, AND COMPLYING WITH FEDERAL AND STATE LAWS APPLICABLE TO PRIVATE FOUNDATIONS, PLUS ASSET MANAGEMENT SERVICES SUCH AS CREATING ASSET ALLOCATION STRATEGIES, INVESTMENT REPORTING AND REALLOCATING AND REBALANCING OF PORTFOLIOS AS NECESSARY

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491348002017
TY 2016 Other Assets Schedule	!	

Name: SYLVIA PERKIN PERPETUAL CHARITABLE TRUST

WELLS FARGO BANK NA IRS FIDUCIARY TAX SE

EIN: 23-6792999

Software ID: 16000303

Software Version: 2016v3.0

Other Assets Schedule			
Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
CASH AND CASH EQUIVALENTS	184,112	94,493	94,493
INVESTMENTS - OTHER	5,787,918	5,792,092	6,782,063
INVESTMENTS IN LLC'S	242,473	278,178	268,832

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491348002017
TY 2016 Other Income Sched	ule	
Name:	SYLVIA PERKIN PERP	ETUAL CHARITABLE TRUST
	WELLS FARGO BANK	NA IRS FIDUCIARY TAX SE
EIN:	23-6792999	
Software ID:	16000303	
Software Version:	2016v3.0	

Other Income Schedule						
Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income			
FEE REBATES	1,085	1,085				
Other Investment Income	34,177					

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DI	N: 93491348002017	
TY 2016 Other Liabilities Sche	dule				
Name:	SYLVIA PERKI	N PERPETUA	L CHARITABLE TRUS	ST .	
	WELLS FARGO BANK NA IRS FIDUCIARY TAX SE				
EIN:	23-6792999				
Software ID:	16000303				
Software Version:	2016v3.0				
Description	n		Beginning of Year - Book Value	End of Year - Book Value	
TRANSFERS PAYABLE			593	593	

efile GRAPHIC print - DO NOT PROCESS	As Filed Data	-	DLI	N: 93491348002017
TY 2016 Taxes Schedule				_
Name:	SYLVIA PERI	KIN PERPETUAL CH	HARITABLE TRUST	•
	WELLS FARC	GO BANK NA IRS F	IDUCIARY TAX SE	
EIN:	23-6792999			
Software ID:	16000303			
Software Version:	2016v3.0			
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXCISE TAX	1,951	1,951		
TAX ON DODGE & COX INTL STOCK FUND	325	325		
TAX ON EASTON VANCE GLOBAL MACRO	51	51		
TAX ON MONDRIAN INTERNATIONAL EQUITY FD	174	174		
TAX ON MSCI EMERGING MARKETS	470	470		
TAX ON OPPENHEIMER DEVELOPING MARKETS	240	240		
TAX ON SPDR DJ WILSHIRE INTL REAL FUND	385	385		
TAX ON VANGUARD EMERGING MARKETS ETF	77	77		

TAX ON VANGUARD FTSE DEVELOPED ETF