•		27493202	200814 8
		03 90	509
Exempt Organization B	usiness Inco	me Tax Return	OMB No 1545 0687
Form 990-T (and proxy tax u			017 2016
For calendar year 2016 or other tax year beginning 1			<u> </u>
Department of the Treasury Internal Revenue Service Information about Form 990-T and its in Do not enter SSN numbers on this form as it		_	I Open to Public Inspection to
A Check box if address changed	name changed and see in	nstructions	D Employer identification number (Employees' trust, see
B Exempt under section Print EMIL BUEHLER PERPET			instructions)
VISON or C/O Boyle & CO PA 1	13 Johnson A	ve	22-6395303
408(e) $220(e)$ Type Hackensack, NJ 0760	Ω_{11}	EII	E Unrelated business activity codes (See instructions)
☐ 408A ☐ 530(a)	DC	IEH	
529(a)		- <u></u>	531120 531120
Book value of all assets at end of year F Group exemption number (See instruct F Group exemption number (See instruct) F Group exemption number (See instruct)	ions) >		
53, 958, 621. G Check organization type	501(c) corporation	X 501(c) trust	401(a) trust Uother trus
H Describe the organization's primary unrelated business activity. Debt Financed Real Property			
During the tax year, was the corporation a subsidiary in an affilia	ted group or a pare	nt-subsidiary controlled gr	oup? ► Yes X No
If 'Yes,' enter the name and identifying number of the parent cor	poration >		
J The books are in care of ► Emil Buehler Perpetual	rust	Telephone numbe	er 201-487-6666
Part I Unrelated Trade or Business Income	(A) Inco	ome (B) Expens	es (C) Net
1 a Gross receipts or sales			
b Less returns and allowances c Balance ►	1c		
2 Cost of goods sold (Schedule A, line 7)	2		
3 Gross profit Subtract line 2 from line 1c 4 a Capital gain net income (attach Schedule D)	3		
4a Capital gain net income (attach Schedule D)	4a		
b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b		
€ Capital loss deduction for trusts.	4c		
5 Income (loss) from partnerships and S corporations (attach statement) 6 Rent income (Schedule C)	5		
6 Rent income (Schedule C)	6		
7 Unrelated debt-financed income (Schedule E)	7	1,080,	0841,080,084
8 Interest, annuities, royalties, and rents from controlled organizations (Schedule F)	8		
 Unrelated debt-financed income (Schedule E) Interest, annuities, royalties, and rents from controlled organizations (Schedule F) Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) Exploited exempt activity income (Schedule I) Advertising income (Schedule J) 	9		
10 Exploited exempt activity income (Schedule I)	10		
11 Advertising income (Schedule J)	11		

12 Other income (See instructions, attach schedule)

BAA For Paperwork Reduction Act Notice, see instructions.

12 13 Total. Combine lines 3 through 12 13 1,080,084. -1,080,0840. Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) (Except for Part II contributions, deductions must be directly connected with the unrelated business income.) 14 Compensation of officers, directors, and trustees (Schedule K) 14 15 Salaries and wages 15 Repairs and maintenance 16 17 Bad debts 17 Interest (attach schedule) 18 18 19 Taxes and licenses 19 20 Charitable contributions (See instructions for limitation rules) 20 Depreciation (attach Form 4562) 21 21 Less depreciation claimed on Schedule A and elsewhere on return 23 Depletion 23 Contributions to deferred compensation plans 24 24 Employee benefit programs 25 25 26 Excess exempt expenses (Schedule I) 26 Excess readership costs (Schedule J) 27 27 Other deductions (attach schedule) 28 28 Total deductions. Add lines 14 through 28. 29 29 Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13 30 30 -1,080,084. 31 Net operating loss deduction (limited to the amount on line 30) 31 Unrelated business taxable income before specific deduction. Subtract line 31 from line 30 32 32 -1,080,084. 33 Specific deduction (Generally \$1,000, but see line 33 instructions for exceptions) 33

34 Unrelated business taxable income. Subtract line 33 from line 32 If line 33 is greater than line 32, enter the smaller of zero or line 32

-1,080,084.

Form 990-T (2016)

34

TEEA0205L 09/19/16

Form 990	-T.(2016) EMIL BUEHLER PERPETUAL TRUST		22	-6395303	P	age 2
Part III						
	anizations Taxable as Corporations. See instructions for tax computation					
	ntrolled group members (sections 1561 and 1563) check here See instr	ructions and.				
	er your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brack)			
(1)		1				
b En	er organization's share of: (1) Additional 5% tax (not more than \$11,750)	\$				
	Additional 3% tax (not more than \$100,000)	\$				
	ome tax on the amount on line 34		>	35 c		
36 Tru	sts Taxable at Trust Rates. See instructions for tax computation. Income tax	on the amount				
on	line 34 from X Tax rate schedule or Schedule D (Form 1041)		>	3 6		0.
37 Pro	xy tax. See instructions		>	37		
38 Alte	ernative minimum tax			38		
39 Tax	on Non-Compliant Facility Income. See instructions			39		
	al. Add lines 37, 38 and 39 to line 35c or 36, whichever applies			40		0.
Part IV	<u></u>					<u> </u>
		41.5				
	eign tax credit (corporations attach Form 1118, trusts attach Form 1116)	41 a				
	er credits (see instructions)					
	neral business credit. Attach Form 3800 (see instructions)	41 c				
	dit for prior year minimum tax (attach Form 8801 or 8827).	41 d				^
	al credits. Add lines 41a through 41d			41 e		<u>0.</u>
	otract line 41e from line 40	0000		42		0.
43 01	er taxes Check if from Form 4255 Form 8611 Form 8697 Form	8000		43		
	Other (attach schedule)			43		
	al tax. Add lines 42 and 43.	Lac 1		44		0.
	ments. A 2015 overpayment credited to 2016	45 a				
	6 estimated tax payments	45 b				
	deposited with Form 8868	45 c				
	eign organizations. Tax paid or withheld at source (see instructions)	45 d				
	ckup withholding (see instructions)	45 e				
	dit for small employer health insurance premiums (Attach Form 8941)	45 f				
g Otl	er credits and payments Form 2439					
L	Form 4136 Other Total	45 g				
46 To	al payments. Add lines 45a through 45g			46		0.
47 Es	imated tax penalty (see instructions). Check if Form 2220 is attached		▶ □	47		
48 Ta:	due. If line 46 is less than the total of lines 44 and 47, enter amount owed		_	48		
	erpayment. If line 46 is larger than the total of lines 44 and 47, enter amount	overpaid	•	49		
	er the amount of line 49 you want. Credited to 2017 estimated tax		Refunded ►	50		
Part V	Statements Regarding Certain Activities and Other Information					
	any time during the 2016 calendar year, did the organization have an interest in or			/O. 2	Yes	No
	ancial account (bank, securities, or other) in a foreign country? If YES, the organization				162	140
				11 01111 114,		 ,,-
	port of Foreign Bank and Financial Accounts. If YES, enter the name of the f				-	X
	ring the tax year, did the organization receive a distribution from, or was it th	e grantor of, or t	ansferor to,	a foreign trust?		X
If Y	ES, see instructions for other forms the organization may have to file.				F	
53 En	er the amount of tax-exempt interest received or accrued during the tax year ▶	\$	0.			<u> </u>
	Under penalties perjury, Ideclare that I have examined this return, including accompanying sche belief, it is true cyrrect, and complete beclaration of preparer (other than taxpayer) is based on a	edules and statements, Il information of which	and to the best or	of my knowledge and knowledge		
Sign		Trustee		May the IRS discuss	this returi	
Here	Sygnature of officer Date	itle		the preparer shown instructions)?		
					Yes	No
Paid	Print/Type preparer's name Preparer's signature	Date	Check If	PTIN		
Pre-	Robert D. Boyle, CPA Robert D. Boyle, CPA		self-employed	P007074	43	
parer	Firm's name Boyle & Company, P.A.		Firm's EIN	22-240146		
Use	Firm's address 113 Johnson Ave.					
Only	Hackensack, NJ 07601		Phone no	201-487-	6666	
BAA	TEEA0202L 09/19/16		1,		990-T (2	2016)
	1 LL NOZUZL 03/13/10			, 51111	1 (2	,

Schedule A - Cost of Goods	Sold. Enter method of inve	entory valuation >		
1 Inventory at beginning of year	1	6 Invento	ory at end of year	6
2 Purchases	2		f goods sold. Subtract	
3 Cost of labor	3		rom line 5 Enter here	
4 a Additional section 263A costs (attach sc	· I I	ang in	Part I, line 2	7 Yes No
b Other costs	4a		rules of section 263A (w	ith respect to
(attach sch) 5 Total. Add lines 1 through 4b	4 b		y produced or acquired for ganization?	or resale) apply
Schedule C - Rent Income (F			<u> </u>	
1 Description of property	Tom Real Floperty and	a r ersonal r roperty	Leased With Iteal I	Toperty) (see instructions)
(1)			<u>-</u>	
(2)				
(2) (3)				
(4)				
21	Rent received or accrued		2(-) D- dual-	
(a) From personal property (if the percentage of rent for pe property is more than 10% bu more than 50%)	rsonal (if the percent to the property ex	eal and personal property entage of rent for persona ceeds 50% or if the rent I on profit or income)	the income i	ns directly connected with in columns 2(a) and 2(b) ttach schedule)
(1)				
(2)		<u>-</u>		
(3)				
(4)				
Total	Total			-
(c) Total income. Add totals of column here and on page 1, Part I, line 6, co			(b) Total deductions here and on page 1, Page 1, Inne 6, column (B)	
Schedule E - Unrelated Debt	-Financed Income (see	instructions)		
1 Description of debt-fin	anced property	2 Gross income from or allocable to debt-	3 Deductions directly of debt-final	onnected with or allocable to anced property See St 1
1 Description of debt-in	anced property	financed property	(a) Straight line depreciation (attach sc	(b) Other deductions
(1)Commercial real prope	ertv			1,080,084.
(2)				
(3)				
(4)				
acquisition debt on or or	Average adjusted basis of r allocable to debt-financed property (attach schedule)	6 Column 4 divided by column 5	7 Gross income reportable (column 2) column 6)	8 Allocable deductions (column 6 x total of columns 3(a) and 3(b))
(1) 1.	1.	100.0000 %		1,080,084.
(2)		%		
(3)		%		
(4)		%		
			Enter here and on page Part I, line 7, column (A	(A) Part I, line 7, column (B).
Totals		•		1,080,084.
Total dividends-received deductions	included in column 8			•
BAA	TE	EA0203L 09/19/16		Form 990-T (2016)

Schedule r - Interest, A	iiiuiu	es, Royalti			trolled Or			Jryai	IIZaliUIIS ((see in	Structions	·)	
organization iden		Employer lentification number		3 Net unrelated income (loss) (see instructions)		4	4 Total of specified payments made		fied de that is inc the cont organiza gross in		in c	6 Deductions directly connected with income in column 5	
(1)						+							
(2)		_	•			t							
(3)	_					1							
(4)			-			1							
Nonexempt Controlled Organiz	ations				-								
7 Taxable Income	inc	et unrelated come (loss) instructions)			f specified nts made	d	10 Part of included in organization	the c	controlling		connected	tions directly d with income blumn 10	
(1)						寸					_		
(2)						T							
(3)	_	-					_ .			\top			
(4)	_				-			•					
Totals							Add columns here and on p 8, co		, Part I, line		e and on p	6 6 and 11 Enter page 1, Part I, line lumn (B).	
Schedule G - Investmen	t Inco	me of a Se	ction	5016	c)(7), (9). 0	r (17) Orga	nizati	on (see ins	truction	ns)		
1 Description of income		2 Amount			3 direc	Dec	ductions connected schedule)		4 Set-asides ttach schedu		5 Tota set-a	I deductions and sides (column 3 us column 4)	
(1)					_								
(1) (2) (3)													
(3)													
(4)													
Totals	•	Enter here an Part I, line 9,	colur	nn (A)	<u> </u>		· · · · · ·				Part I, II	re and on page 1 ne 9, column (B)	
Schedule I – Exploited E	.xemp											,	
1 Description of exploited a	ictivity	2 Gross unrelate busines income fro trade o busines	d s om r	conne prod of u	ises directly ected with duction nrelated ess income	fror or t 2 m	let income (loss) in unrelated trade ousiness (column ninus column 3) a gain, compute imns 5 through 7.	activ unrela	s income from ity that is not ated business income	attribi	penses utable to umn 5	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)	
(1)		 						_					
(2)					-							-	
(3)						-					<u> </u>		
(4)		-											
Totals	•	Enter here on page Part I, line column (1, 10,	on p Part l	here and page 1, line 10, mn (B).							Enter here and on page 1, Part II, line 26	
Schedule J - Advertising	a Inco	me (See incl	ructio	ne)							 -		
Part I Income From Per					nsolida	ted	Racic				_		
i arti income From Fe	·····	2 Gross			Direct	_	dvertising gain or	E C	irculation	£ Des	dorebin	7 Evenesderet	
1 Name of periodical		advertisii	ng	adve	ertising osts	(lo	iss) (col. 2 minus col 3) If a gain, compute cols. 5 through 7		ncome		adership osts	7 Excess readership costs (col 6 minus col. 5, but not more than col. 4).	
(1)						1							
(2)						4						4	
(3)		+				-						4	
(4)		+	_			-						 	
Totals (carry to Part II, line (5))) '	<u>-</u>										000 T (001C)	

Form	990.T	(2016)	CMTT	סם זעיםוום	PERPETHAL.	TOIICT
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22-6395303

Page 5

				22 0373303	
als Reported or	n a Separate E	Basis (For each p	eriodical listed in	Part II, fill in co	lumns 2 through
2 Gross advertising income	3 Direct advertising costs	4 Advertising gain or (loss) (col. 2 minus col 3). If a gain, compute cols 5 through 7	5 Circulation income	6 Readership costs	7 Excess readership costs (col 6 minus col. 5, but not more than col 4)
Enter here and on page 1, Part I, line 11, column (A)	Enter here and on page 1, Part I, line 11, column (B).				Enter here and on page 1, Part II, line 27.
•					
f Officers, Dire	ctors, and Tri	ustees (see instri	uctions)		
		2 Title	time devote	d to unrel	ation attributable ated business
				96	<u> </u>
				§ .	
				8	
				%	
II, line 14				P	
	TEEA0204 L	09/19/16			orm 990-T (2016)
	Enter here and on page 1, Part I, line 11, column (A)	2 Gross advertising income Salvertising costs Enter here and on page 1, Part I, line 11, column (A) FOfficers, Directors, and Trees II, line 14	2 Gross advertising income advertising costs advertising cold 3). If a gain, compute cold 5 through 7 Enter here and on page 1, Part 1, line 11, column (A) Part 1, line 11, column (B). If Officers, Directors, and Trustees (see instruction)	Als Reported on a Separate Basis (For each periodical listed in 2 Gross advertising costs 4 Advertising gain or (loss) (col. 2 minus col 3). If a gain, compute cols 5 through 7 5 Circulation income Enter here and on page 1, Part I, line 11, column (A) Part I, line 11, column (B). If Officers, Directors, and Trustees (see instructions) 3 Percent of time devote to business 3 Percent of time de	Als Reported on a Separate Basis (For each periodical listed in Part II, fill in co 2 Gross advertising softs 3 Direct advertising costs 4 Advertising gain or (loss) (col. 2 minus compute cols 5 through 7 Enter here and on page 1, Part I, line 11, column (A) FOR Eachership costs 6 Readership costs 6 Readership costs 6 Readership costs 7 Title 8 Part I, line 11, column (B). 7 Title 8 Percent of time devoted to business 9 Percent of time devoted to business

2016

Federal Statements

Page 1

EMIL BUEHLER PERPETUAL TRUST

22-6395303

Statement 1
Form 990-T, Schedule E, Line 3b
Other Deductions Allocable to Debt-Financed Property

Commercial real property
Commissions
Legal and Professional Fees
Repairs

 $\begin{array}{c} \$ & 620,000. \\ 469,790. \\ -9,706. \\ \hline \texttt{Total} & \frac{\$1,080,084.}{} \end{array}$

2016	Federal Supporting Detail		Page 1
	EMIL BUEHLER PERPETUAL TRUST		22-639530
Unrelated Debt-Financed Incon Commissions Commercial real property	ne (990-T)		
PC Richards-Lawsuit settl Staples	Lement	\$ Total \$	482,000. 138,000. 620,000.
Unrelated Debt-Financed Incon Legal and professional fees Commercial real property	ne (990-T)		
Legal -Lawsuit settlement		Total \$	469,790. 469,790.
Unrelated Debt-Financed Incon Repairs Commercial real property	ne (990-T)		
Repair Contract reimburse	ement	Total \$	-9,706. -9,706.