Part I  Reporting Issuer

1  Issuer’s name
   PENNSYLVANIA REAL ESTATE INVESTMENT TRUST

2  Issuer’s employer identification number (EIN)
   23-6216339

3  Name of contact for additional information

4  Telephone No. of contact
   215-875-0700

5  Email address of contact

6  Number and street (or P.O. box if mail is not delivered to street address) of contact

7  City, town, or post office, state, and Zip code of contact
   200 SOUTH BROAD STREET, 3rd FLOOR PHILADELPHIA PA 19102

8  Date of action

9  Classification and description
   PREIT 7.375% SERIES B PREFERRED SHARES

10 CUSIP number
    709102503

11 Serial number(s)

12 Ticker symbol
    PEIPb

13 Account number(s)

Part II  Organizational Action

Attach additional statements if needed. See back of form for additional questions.

14 Describe the organizational action and, if applicable, the date of the action or the date against which shareholders’ ownership is measured for the action.

15 Describe the quantitative effect of the organizational action on the basis of the security in the hands of a U.S. taxpayer as an adjustment per share or as a percentage of old basis.
   THE BASIS OF THE SECURITY SHOULD BE REDUCED BY THE FOLLOWING AMOUNT OF EACH DISTRIBUTION INDICATED IN ITEM 14 ABOVE:

   PER SHARE REDUCTION OF BASIS
   IN SERIES B PREFERRED SHARES

   DATE
   03/15/2016 $0.460938
   06/15/2016 $0.460938
   09/15/2016 $0.460938
   12/15/2016 $0.460938

16 Describe the calculation of the change in basis and the data that supports the calculation, such as the market values of securities and the valuation dates.
   THE NON-DIVIDEND DISTRIBUTIONS REPRESENT DISTRIBUTIONS ASSOCIATED WITH THE 2016 TAX YEAR WHICH ARE IN EXCESS OF THE CURRENT YEAR AND ACCUMULATED EARNINGS & PROFITS.
Part II  Organizational Action (continued)

17  List the applicable Internal Revenue Code section(s) and subsection(s) upon which the tax treatment is based

IRC SECTION 301(c)(2)

18  Can any resulting loss be recognized?  N/A

19  Provide any other information necessary to implement the adjustment, such as the reportable tax year  N/A

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Signature ▶ Date ▶

Print your name ▶

Paid Preparer Use Only

Print/Type preparer’s name  Preparer’s signature  Date  Check if self-employed

Firm’s name ▶

Firm’s EIN ▶

Firm’s address ▶

Phone no.

Send Form 8937 (including accompanying statements) to: Department of the Treasury, Internal Revenue Service, Ogden, UT 84201-0054