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Form **990-PF**

Return of Private Foundation

or Section 4947(a)(1) Nonexempt Charitable Trust

Treated as a Private Foundation

2009

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements. For calendar year 2009, or tax year beginning and ending G Check all that apply: Initial return Initial return of a former public charity Final return Amended return Address change Name change Name of foundation A Employer identification number Use the IRS UNITED STATIONERS CHARITABLE TRUST label. 06-6547406 ATTN: TAX Otherwise. Number and street (or P O box number if mail is not delivered to street address) Room/suite print B Telephone number or type. ONE PARKWAY NORTH BLVD 100 847-627-7000 See Specific City or town, state, and ZIP code C If exemption application is pending, check here Instructions DEERFIELD, IL 60015-2559 1. Foreign organizations, check here Foreign organizations meeting the 85% test, check here and attach computation X Section 501(c)(3) exempt private foundation H Check type of organization: Section 4947(a)(1) nonexempt charitable trust ____ Other taxable private foundation If private foundation status was terminated I Fair market value of all assets at end of year | J | Accounting method: under section 507(b)(1)(A), check here Other (specify) (from Part II, col. (c), line 16) F If the foundation is in a 60-month termination 1,495,899. (Part I, column (d) must be on cash basis) ▶\$ under section 507(b)(1)(B), check here Analysis of Revenue and Expenses (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net charitable purposes (cash basis only) (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) expenses per books income income 1,288,077 Contributions, gifts, grants, etc., received Check If the foundation is not required to attach Sch. B interest on savings and temporary cash investments 1.021 1,021.STATEMENT 1.021 3 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 7 Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) 11 Other income 289,098 12 Total. Add lines 1 through 11 0. 92,775 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 0. 0 STMT 2 5,000. 16a Legal fees 2,500. 0 0. STMT 3 0 b Accounting fees c Other professional fees STMT 4 22,000. 0 17 Interest 18 Taxes 19 Depreciation and depletion 20 Occupancy 5,912 0. 21 Travel, conferences, and meetings 0. 0 22 Printing and publications O Other expenses

O Other expenses 83,171 0 0. STMT 5 3,453. Total operating and administrative 211,358 3,453. 0 expenses. Add lines 13 through 23 259,270. 25 Contributions, gifts, grants paid 259,270 26 Total expenses and disbursements. 3,453 259,270. 470,628 0 Add lines 24 and 25 27 Subtract line 26 from line 12: 818,470 2 Excess of revenue over expenses and disbursements 0 b Net investment income (if negative, enter -0-) 1,021 c Adjusted net income (if negative, enter -0-)

Form **990-PF** (2009)

Form 990-PF (2009) 06-6547406 ATTN: TAX Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only Beginning of year End of year Part II (a) Book Value (b) Book Value (c) Fair Market Value 677,581. 1,495,899. 1,495,899. Cash - non-interest-bearing 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 7 Other notes and loans receivable Less: allowance for doubtful accounts 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Investments - U.S. and state government obligations b Investments - corporate stock c Investments - corporate bonds 11 Investments - land, buildings, and equipment basis Less accumulated depreciation 12 Investments - mortgage loans 13 Investments - other 14 Land, buildings, and equipment; basis Less accumulated depreciation 15 Other assets (describe ▶ 677,581 1,495,899 1,495,899. 16 Total assets (to be completed by all filers) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable 22 Other liabilities (describe 0 0 23 Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. Vet Assets or Fund Balances 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted ► X Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. 27 Capital stock, trust principal, or current funds 0 0 0. 28 Paid-in or capital surplus, or land, bldg., and equipment fund 495,899. 677,581 STATEMENT 6 29 Retained earnings, accumulated income, endowment, or other funds 677,581. 495,899 30 Total net assets or fund balances 677,581 31 Total liabilities and net assets/fund balances 495 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 <u>677,581.</u> (must agree with end-of-year figure reported on prior year's return) 818,470. 2 Enter amount from Part I, line 27a 2 3 Other increases not included in line 2 (itemize) 3 051. 4 Add lines 1, 2, and 3 4 5 Decreases not included in line 2 (itemize) ► FEDERAL INCOME TAX 152. 495,899. 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

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Form **990-PF** (2009)

Form 990-PF (2009) ATTN: TAX 06-6547406 Page 3 Capital Gains and Losses for Tax on Investment Income Part IV (b) How acquired P - Purchase D - Donation (a) List and describe the kind(s) of property sold (e.g., real estate, (c) Date acquired (d) Date sold 2-story brick warehouse; or common stock, 200 shs. MLC Co.) (mo., day, yr.) (mo., day, yr.) 1a b NONE d е (g) Cost or other basis (f) Depreciation allowed (h) Gain or (loss) (e) Gross sales price (or allowable) plus expense of sale (e) plus (f) minus (g) b Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Gains (Col. (h) gain minus col. (k), but not less than -0-) or (j) Adjusted basis (k) Excess of col. (1) (i) F.M.V. as of 12/31/69 Losses (from col. (h)) over col. (j), if any as of 12/31/69 b d e If gain, also enter in Part I, line 7 2 Capital gain net income or (net capital loss) If (loss), enter -0- in Part I, line 7 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter -0- in Part I, line 8 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. Yes X No Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part. Enter the appropriate amount in each column for each year; see instructions before making any entries. (a) Base period years Calendar year (or tax year beginning in) (d)
Distribution ratio
(col. (b) divided by col. (c)) Adjusted qualifying distributions Net value of noncharitable-use assets 677,788. 897,695. .755031 2008 490,983. 659,809. 2007 .744129 187,759. 193,645. .969604 2006 625,816. 256,855. 2.436456 2005 2004 4.905220 2 Total of line 1, column (d) 2 3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years 3 1.226305 802,738. Enter the net value of noncharitable-use assets for 2009 from Part X, line 5 984,402. Multiply line 4 by line 3 5 Enter 1% of net investment income (1% of Part I, line 27b) 984,402. 7 Add lines 5 and 6 7 259,270. Enter qualifying distributions from Part XII, line 4 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 Part VI instructions.

	m 990-PF (20		<u>rtn:</u>												<u>06-</u>	<u> 654</u>	<u>7406</u>	• 	Page 4
P	art VI E	Excise Tax	Based	l on	Inves	stmen	t Inco	me (Se	ction 494	Ю(а),	<u>494</u>	10(b),	<u>4940(</u>	e), or 4	4948	- see	instr	ıctio	ns)
18	a Exempt ope	erating foundatio	ıns descr	ribed ir	n sectio	n 4940(d	I)(2), che	ck here 🕨	■ and e	enter "N	/A" o	n line 1.)	1				
	Date of rulin	ng or determinat	ıon letter	:			(atf	tach copy (of letter if ne	cessary	y-see	instruc	tions)						.]
ı	b Domestic fo	oundations that i	neet the	sectio	n 4940((e) requir	ements i	n Part V, c	heck here 🌖	▶∟	and	i enter 1	%	•	1				0.
	of Part I, line	ie 27b													İ				
(c All other do	mestic foundation	ons enter	2% 0	of line 27	7b. Exem	pt foreigi	n organizat	ions enter 49	% of Pa	rt I, lı	ine 12, c	ol. (b)	J					
2	Tax under s	section 511 (don	nestic se	ction 4	4947(a)	(1) trusts	and taxa	able founda	ations only. C	Others e	nter ·	-0-)			2	<u> </u>			0.
3	Add lines 1	and 2													3				0.
4	Subtitle A (I	ıncome) tax (dor	nestic se	ction	4947(a))(1) trust:	s and tax	able found	ations only.	Others e	enter	-0-)			4				0.
5	Tax based (on investment i	ncome. S	Subtra	act line 4	4 from lin	e 3. If zer	ro or less,	enter -0-						5				0.
6	Credits/Payi	ments:																	
6	a 2009 estima	ated tax paymen	ts and 20	008 ov	verpaym	nent cred	ited to 20	009		_6a	_				1				İ
ı	b Exempt fore	eign organizatior	ıs - tax w	/ithhel	ld at sou	ırce				6b	+				1				
(c Tax paid wit	th application for	r extensio	on of t	time to f	iile (Form	8868)			6c					.	. _	-	<u>.</u>	
(d Backup with	hholding erroned	ously with	hheid						6d					J				.]
7		s and payments.			-		_								7	<u> </u>			<u>0.</u>
8	Enter any po	enalty for under	payment	of est	tımated	tax. Chec	ck here L	if Forn	n 2220 is atta	ached					8	ļ			
9	Tax due. If	the total of lines	5 and 8	ıs mor	re than l	lıne 7, en	ter amou	int owed						>	9	ļ			0.
10	Overpayme	ent. If line 7 is m	ore than	the to	tal of lin	ies 5 and	8, enter	the amoun	t overpaid				1		10	L			
		mount of line 10						<u> </u>					Refu	nded ►	11				
		Statemer		_														1	
18	a During the t	tax year, did the	foundation	on atte	empt to	ınfluence	any nati	ional, state,	, or local legi	slation (or dic	d it parti	cipate oi	interven	e in			Yes	
	any political	l campaign?															1a		_X_
ı	b Did it spend	more than \$10	O during	the ye	ear (eithe	er directly	y or ındır	ectly) for p	olitical purpo	oses (se	e ins	struction	s for det	inition)?			1b		X
	If the answ	ver is "Yes" to	1a <i>or</i> 1b	, atta	ch a de	tailed d	escriptio	on of the a	activities an	d copi	es o	f any m	atenals	publish	ed or			i	
	distributed	d by the founda	ation in i	conne	ection	with the	activitie	es.											_ 1
(Did the foun	ndation file Form	1120-P	OL for	r this yea	ar?											1c		X
(mount (if any) of				-			_					_					
		foundation.												0.	<u>.</u>				1
•		imbursement (if	any) pai		_	dation du	ring the	year for po	litical expend	liture ta	x imp	posed o	n founda	ition					, ,
	managers.				<u>0.</u>														
2		ndation engaged						ly been rep	orted to the	IRS?							2	ļ	X
		ttach a detailed	•	•													1		
3		ndation made ar	-								nent,	articles	of incor	ooration,	or			~ ~	
	-	other similar inst							-								3_		X
48		ndation have unr						or more o	during the yea	ar?						- , -	4a		<u> </u>
ŀ		s it filed a tax retu				_				_					1	I/A	4b		
5		a liquidation, terr	-						ring the year	7							5		X
		ttach the state			-														
6		uirements of sec) sections	s 4941 th	irough 494	b) satisfied e	either:									
		age in the govern	•		•														
		egislation that ef		_	as the g	joverning	ınstrum	ent so that	no mandato	ry direc	tions	that co	nflict wit	n the stat	e law		_ ~		}
_		the governing i															6	X	
7		ndation have at l					ie during	the year?									7	X	 :
_	•	omplete Part II		•						, .									
88		ates to which the	e foundat	tion re	eports o	r with wh	ich it is r	egistered (see instruction	ons) 🕨	_								
_	IL							· · · · · · · · · · · · · · · · · · ·	0.551										1
t		er is "Yes" to line								Attorney	/ Gen	ieral (or	designa	te)					
_		te as required by															<u>8b</u>	X	
9		dation claiming s												5) for cal	endar				🚚 -
		or the taxable yea															9	-	<u>X</u>
<u>10</u>	Did any pers	sons become su	<u>bstantial</u>	contr	ibutors	<u>auring th</u>	ie tax yea	IT? If "Yes,"	attach a sched	ule listing	g their	r names a	nd addres	ses			10	1	X

Form	1 990-PF (2009) ATTN: TAX 06-654	7406	1	Page 5
	art VII-A Statements Regarding Activities (continued)	7-200		
	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		х
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			
	August 17, 2008?	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	х	
••	Website address ► N/A	<u> </u>		
14	The books are in care of ► TIMOTHY CONNOLLY Telephone no. ►847-6	27-7	000	
	Located at ►ONE PARKWAY NORTH BLVD, STE 100, DEERFIELD, IL ZIP+4 ►6			59
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	N.	/A	
Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			^
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(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)?			
	(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.)			
ь	o If any answer is "Yes" to 1a(1)-(6), did any 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 page 20 of the instructions)? N/A	16		_
	Organizations relying on a current notice regarding disaster assistance check here			
c	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 2009?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			1
	defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 2009? Yes X No		۶	
	If "Yes," list the years \blacktriangleright			
b	Are there any years listed in 2a for which the foundation is not 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 all years listed, answer "No" and attach			1
	statement - see instructions.) N/A	2b		
C	: If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			İ
				
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?			
b	olf "Yes," did it have excess business holdings in 2009 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 2009.)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
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 2009?	4b		_X_

UNITED STATIONERS CHARITABLE TRUST ATTN: TAX Form 990-PF (2009) 06-6547406 Page 6 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: Yes X No (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly. Yes X No any voter registration drive? Yes X No (3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an organization other than a charitable, etc., organization described in section Yes X No 509(a)(1), (2), or (3), or section 4940(d)(2)? (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes. or for Yes X No the prevention of cruelty to children or animals? 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)? N/A 5b 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 Yes No N/A expenditure responsibility for the grant? 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 Yes X No a personal benefit contract? X b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 6b If "Yes" to 6b, file Form 8870. Yes X No 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? 7b b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Paid Employees, and Contractors List all officers, directors, trustees, foundation managers and their compensation. (c) Compensation (d) Contributions to employee benefit plans and deferred compensation (b) Title, and average hours per week devoted to position (e) Expense account, other (a) Name and address (If not paid, allowances enter -0-) SEE STATEMENT 7 92,775 0. 0. 2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (d) Contributions to employee benefit plans and deferred compensation (b) Title, and average (e) Expense account, other (a) Name and address of each employee paid more than \$50,000 hours per week devoted to position (c) Compensation allowances NONE

Form **990-PF** (2009)

Total number of other employees paid over \$50,000

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Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	Managers, Highly		
3 Five highest-paid independent contractors for professional services. If none, enter "NON			
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(a) Com	pensation
NONE	(b) Type of service	(0) 00111	Pensation
NONE			
			
			
			_
Total number of others receiving over \$50,000 for professional services		•	0
Part IX-A Summary of Direct Charitable Activities			
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical infe	ormation such as the		
number of organizations and other beneficiaries served, conferences convened, research papers produced, e		Expenses	;
1 N/A			
• • • • • • • • • • • • • • • • • • • •			
2			
3			
4			
Part IX-B Summary of Program-Related Investments			
Describe the two largest program-related investments made by the foundation during the tax year on lines 1	and 2.	Amount	
1 N/A			
2			
All other program-related investments. See instructions.	1		
3			

Total. Add lines 1 through 3

ATTN: TAX

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P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations, se	e instructions)
<u> </u>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	0.
	Average of monthly cash balances	1b	0. 814,962.
	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	814,962.
	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	814,962.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	12,224.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	802,738.
6	Minimum investment return. Enter 5% of line 5	6	40,137.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	id certain	
1	Minimum investment return from Part X, line 6	1	40,137.
2a			
ь	Income tax for 2009. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	40,137.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	40,137.
6	Deduction from distributable amount (see instructions)	6	0.
<u>7_</u>	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	40,137.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	<u>259,270.</u>
	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	<u>259,270.</u>
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		_
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	259,270.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years.	qualifies for ti	ne section

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ATTN: TAX

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI, line 7				40,137.
2 Undistributed income, if any, as of the end of 2009				,
a Enter amount for 2008 only			0.	
b Total for prior years:				
,		0.		
3 Excess distributions carryover, if any, to 2009:				
a From 2004			, and the second	
b From 2005 621,861.				
c From 2006 178,152.				
d From 2007 458, 452.				
e From 2008 633, 055.				
f Total of lines 3a through e	1,891,520.			
4 Qualifying distributions for 2009 from				
Part XII, line 4: ►\$ 259, 270.				
a Applied to 2008, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2009 distributable amount				40,137.
e Remaining amount distributed out of corpus	219,133.			
5 Excess distributions carryover applied to 2009	0.	^ ~		0.
(If an amount appears in column (d), the same amount must be shown in column (a))	\$. <	, , ,	{ , ,	
6 Enter the net total of each column as	· ,	* *	(, ⁽⁾ ()	` *
indicated below:		*	×	
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	2,110,653.	*	, ,	
b Prior years' undistributed income. Subtract	`			•
line 4b from line 2b		0.	*	
c Enter the amount of prior years'				
undistributed income for which a notice of	٤٠			
deficiency has been issued, or on which the section 4942(a) tax has been previously				i
assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		*
e Undistributed income for 2008. Subtract line	· · · · · · · · · · · · · · · · · · ·	* *		1
4a from line 2a. Taxable amount - see instr.	·		0.	
f Undistributed income for 2009. Subtract		,	· .	
lines 4d and 5 from line 1. This amount must		•		
be distributed in 2010	* .			<u> </u>
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2004		*		
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2010				
Subtract lines 7 and 8 from line 6a	<u>2,110,653.</u>			
10 Analysis of line 9:				
a Excess from 2005 621,861.				Lang.
b Excess from 2006 178,152.		,		ARRA COMA
c Excess from 2007 458,452.				and a second
d Excess from 2008 633,055.				
e Excess from 2009 219,133.			<u>L</u>	

Form 990-PF (2009) ATTN	TAX			06-65	547406 Page 10
Part XIV Private Operation	ng Foundations (see in	structions and Part V	II-A, question 9)	N/A	
1 a If the foundation has received a ru	ling or determination letter that	t it is a private operating			
foundation, and the ruling is effect	tive for 2009, enter the date of	the ruling	▶		
b Check box to indicate whether the	foundation is a private operatii	ng foundation described	ın section	4942(j)(3) or 4	942(j)(5)
2 a Enter the lesser of the adjusted ne			Prior 3 years		
income from Part I or the minimul	m (a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
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 dire	ctly				
for active conduct of exempt activ	- I				
Subtract line 2d from line 2c	1003.				
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 - enti-	' 		-	<u> </u>	
2/3 of minimum investment return					
shown in Part X, line 6 for each ye					
listed			 		
c "Support" alternative test - enter:		1			
(1) Total support other than gros	ss				
investment income (interest, dividends, rents, payments o	n				
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 fr	om				
an exempt organization					
(4) Gross investment income			<u> </u>		<u> </u>
Part XV Supplementary			\prime if the foundatio	n had \$5,000 or m	ore in assets
at any time duri	ing the year-see the	instructions.)			
1 Information Regarding Foun	dation Managers:				
a List any managers of the foundati			ntributions received by th	ne foundation before the clo	ose of any tax
year (but only if they have contrib	uted more than \$5,000). (See s	section 507(d)(2).)			
SEE STATEMENT 8			<u> </u>		
b List any managers of the foundati			n (or an equally large por	tion of the ownership of a p	partnership or
other entity) of which the foundati	ion has a 10% or greater intere	SL.			
NONE					
2 Information Regarding Cont					
Check here 🕨 📖 if the founda					
the foundation makes gifts, grants		-		complete items 2a, b, c, an	<u>d d</u>
a The name, address, and telephone		m applications should b	e addressed:		
JOHN JARACZEWSKI,					
ONE PARKWAY NORTH				15	
b The form in which applications sh		tion and materials they	should include:		
NO SPECIFIC FORM	KEQUIRED				
c Any submission deadlines:					
d Any restrictions or limitations on a	awards, such as hy geographic	al areas, charitable field	s, kinds of institutions of	r other factors:	
NONE	amaras, saon as by ycoyrapillo	ai ai oas, chanabic nelu	o, ando of montations, o		
1101111					

Form 990-PF (2009) Form 990-PF (2009) ATTN: TAX

Part XV Supplementary Information (continued)

06-6547406 Page 11

3 Grants and Contributions Paid During the Ye	ar or Approved for Future	Payment		
Recipient	If recipient is an individual,		Durness of great a-	
	snow any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
a Paid during the year SEE ATTACHED STATEMENT	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	status of recipient	contribution	259,270.
Total			► 3a	259,270.
NONE				
	<u> </u>		<u> </u>	
Total 923811 02-02-10			<u>▶</u> 3b	0 . orm 990-PF (2009)

Unrelated business income

Form 990-PF (2009)

Enter gross amounts unless otherwise indicated.

ATTN: TAX

06-6547406 Page 12

Excluded by section 512, 513, or 514

Part XVI-A	Analysis of	Income-Producing	Activities
------------	-------------	------------------	-------------------

Enter gross amounts unless otherwise indicated 1 Program service revenue:	(a) Business code	(b) Amount	(C) Exclusion code	(d) Amount	(e) Related or exempt function income
a	1				
b					
c	1	·			
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments			 		
3 Interest on savings and temporary cash				4 004	
Investments			14	1,021.	
4 Dividends and interest from securities			 		
5 Net rental income or (loss) from real estate:	-		}		
a Debt-financed property					
b Not debt-financed property6 Net rental income or (loss) from personal			+		
		1			
property 7 Other investment income			1		
8 Gain or (loss) from sales of assets other			-		
than inventory					
9 Net income or (loss) from special events					
O Gross profit or (loss) from sales of inventory					
1 Other revenue:					
a					
b					
C	1				
d					
e					
2 Subtotal. Add columns (b), (d), and (e)		0		1,021.	0.
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.)				13	1,021.
Part XVI-B Relationship of Activities	to the Acc	omplishment of E	xemp	t Purposes	
Explain below how each activity for which incomplete the foundation's exempt purposes (other than			A contril	outed importantly to the accom	plishment of
	<u>.</u>				
				 	
					
	<u> </u>				
					
			•		
		<u> </u>	_		
					
					
					

•	· •					•	
			CHARITABLE TRUS				
Part)	O-PF (2009) ATTN: XVII Information R Exempt Organ	egarding Transfers 1	o and Transactions ar	06-65 nd Relationships With Nonc	47406 haritable	Page 13	_
1 Did			owing with any other organization	described in section 501(c) of	<u> </u>	Yes No	-
	-		in 527, relating to political organiz	` ·			-
a Tra	nsfers from the reporting found	lation to a noncharitable exemp	ot organization of:				į
(1)	Cash				1a(1)	X	
(2)	Other assets				1a(2)	X	_
b Oth	er transactions:						í
٠,	Sales of assets to a noncharita	• •			1b(1)	X	_
٠,	Purchases of assets from a no	• •	on		1b(2)	X	_
	Rental of facilities, equipment,				1b(3)	X	_
	Reimbursement arrangements	3			1b(4)	X	_
	Loans or loan guarantees	ambarahin ar fundraising salia	tationa		1b(5)	X	-
٠,,	Performance of services or me	•			1b(6) 1c	X	_
	aring of facilities, equipment, ma	•	, ,	ays show the fair market value of the good			-
			, ,	in any transaction or sharing arrangemen		c15,	
	umn (d) the value of the goods,			many transaction of charing arrangemen	, 011011 111		
a) Line no		, · 	table exempt organization	(d) Description of transfers, transactions,	and sharing arra	angements	-
		N/	A				_
							_
					_		_
							_
							_
							_
							_
			<u> </u>				_
							_
		-					_
						_	_
							-
	 						-
							-
	· · · · · · · · · · · · · · · · · · ·						-
2a Isti	he foundation directly or indirec	tly affiliated with, or related to,	one or more tax-exempt organiza	ations described			-
	ection 501(c) of the Code (othe				Yes	X No	
b If "Y	es," complete the following sch	nedule.					_
	(a) Name of or	ganization	(b) Type of organization	(c) Description of relation	onship		_
	N/A						_
_	 						_
							_
							_
11	w populition of porume. Laborate 45-4-11	house evening of this value	personnanying exhedular and at	nto and to the best of my branded and belief	it is true come		_
		-	accompanying schedules and statement of on all information of which preparer h	nts, and to the best of my knowledge and belief, as any knowledge	13 1148, COITEC	^,	

Form **990-PF** (2009)

Preparer's identifying number

847-441-8800

P00314502

Signature of officer or trustee

WEISS &

Preparer's signature

address, and ZIP code

2700 PATRIOT BOULEVARD - SUITE 400 GLENVIEW, ILLINOIS 60026

6-17-2010

Date Check if self-employed

EIN ▶

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, 990-EZ, or 990-PF.

OMB No 1545-0047

2009

Name of the organization **Employer identification number** UNITED STATIONERS CHARITABLE TRUST 06-6547406 ATTN: TAX 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 X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check 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, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. **Special Rules** For a section 501(c)(3) organization 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), and received from any one contributor, during the year, a contribution 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 a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to 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. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. Caution. An organization that is not covered by the General Rule and/or the Special Rules does not 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 line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

Schedule I	B (Form	990,	990-EZ,	or 990	-PF)	(2009)	ì

Name of organization

UNITED STATIONERS CHARITABLE TRUST ATTN: TAX

Employer identification number 06-6547406

AT IN:	TAX	1 00	1-034/400
Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	DEERFIELD, IL 60015	\$ 1,250,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		- - - -	Person Payroll Oncash Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		- - - -	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		- - - -	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		- - - -	Person Payroll Complete Part II if there is a noncash contribution)

FORM 990-PF INTEREST ON SAVI	NGS AND TEM	PORARY CASH IN	WESTMENTS S	STATEMENT	1
SOURCE				AMOUNT	
INTEREST INCOME				1,02	<u>.</u>
TOTAL TO FORM 990-PF, PART I,	LINE 3, CO	LUMN A		1,02	1.
FORM 990-PF	LEGAL	FEES		STATEMENT	2
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAB PURPOSE	
LEGAL FEES	5,000.	0.	0	•	0.
TO FM 990-PF, PG 1, LN 16A =	5,000.	0.	0	•	0.
FORM 990-PF	ACCOUNTI	NG FEES	\$	STATEMENT	3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAB PURPOSE	
ACCOUNTING FEES	2,500.	0.	0	•	0.
TO FORM 990-PF, PG 1, LN 16B	2,500.	0.	0	•	0.
FORM 990-PF C	THER PROFES	SIONAL FEES		STATEMENT	4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAB PURPOSE	
FINANCE & OPERATION	22,000.	0.	0	•	0.
TO FORM 990-PF, PG 1, LN 16C	22,000.	0.	0	•	0.

FORM 990-PF	OTHER E	XPENSES		STATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAE PURPOSE	
BANK FEES CONSULTING FEES COMMUNICATION EXPENSES PROGRAM EXPENSES IL ANNUAL FILING FEE	3,453. 29,434. 4,812. 45,457. 15.	0. 0. 0.	0 0 0 0	•	0. 0. 0. 0.
TO FORM 990-PF, PG 1, LN 23	83,171.	3,453.	0	•	0.
FORM 990-PF	OTHER F	UNDS		STATEMENT	6
DESCRIPTION		BEG	(A) INNING OF YEAR	(B) END OF YEAR	
		-	677,581.	1,495,89	9.
TOTAL TO FORM 990-PF, PART I	I, LINE 29		677,581.	1,495,89	9.

		IST OF OFFICERS, DIRECTORS AND FOUNDATION MANAGERS		
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	
RICHARD W. GOCHNAUER ONE PARKWAY NORTH BLVD DEERFIELD, IL 60015	TRUSTEE 0.25	0.	0.	0.
JAMISON A. RUGGLES ONE PARKWAY NORTH BLVD DEERFIELD, IL 60015	TRUSTEE 1.00	0.	0.	0.
KEVIN BOWMAN ONE PARKWAY NORTH BLVD DEERFIELD, IL 60015	TRUSTEE 0.25	0.	0.	0.
HELEN BREWER ONE PARKWAY NORTH BLVD DEERFIELD, IL 60015	TRUSTEE 0.25	0.	0.	0.
TIMOTHY CONNOLLY ONE PARKWAY NORTH BLVD DEERFIELD, IL 60015	TRUSTEE 1.00	0.	0.	0.
JEAN COOK ONE PARKWAY NORTH BLVD DEERFIELD, IL 60015	TRUSTEE 0.25	0.	0.	0.
GEORGE KILLIAN JR ONE PARKWAY NORTH BLVD DEERFIELD, IL 60015	TRUSTEE 0.25	0.	0.	0.
STEPHEN MORGAN ONE PARKWAY NORTH BLVD DEERFIELD, IL 60015	TRUSTEE 0.25	0.	0.	0.
DOUGLAS NASH ONE PARKWAY NORTH BLVD DEERFIELD, IL 60015	TRUSTEE 0.25	0.	0.	0.
CHERYL ORLOWSKI ONE PARKWAY NORTH BLVD DEERFIELD, IL 60015	TRUSTEE 1.00	0.	0.	0.
MARSHA RUBIN ONE PARKWAY NORTH BLVD DEERFIELD, IL 60015	TRUSTEE 1.00	0.	0.	0.

UNITED STATIONERS CHARIT	TABLE TRUST ATTN:		06-654	7406
MICKEY WAYNE SCOTT, JR ONE PARKWAY NORTH BLVD DEERFIELD, IL 60015	TRUSTEE 0.25	0.	0.	0.
TODD SHELTON ONE PARKWAY NORTH BLVD DEERFIELD, IL 60015	TRUSTEE 0.25	0.	0.	0.
JOHN JARACZEWSKI ONE PARKWAY NORTH BLVD DEERFIELD, IL 60015	EXEC DIRECTOR 40.00	92,775.	0.	0.
TOTALS INCLUDED ON 990-PF,	PAGE 6, PART VIII	92,775.	0.	0.
FORM 990-PF	PART XV - LINE 1A ST OF FOUNDATION MANAGERS	3	STATEMENT	8

NAME OF MANAGER

RICHARD W. GOCHNAUER TODD SHELTON

C.\Pfx Engagement\WM\WorkPapers\(C6BD495D-F5D3-429E-837A-6175E49BC218\)\(6286BDB-66DE-4F1D-9CBF-9A04590F89A7\\ 2009 DONEE NAME & ADDRESS

						_		
					INDIV. RELATION-	141		
DONEE NAME	ADDRESS1	ADDRESS2	CITY	STATE	JHS diz	OF RECIPIENT	CONTRIBUTION	AMOUNT
	23E N. Marchigan Aug	S.uta 1210	Chicago	IL 60601	01 N/A	170(b)(1)(A)(m)	III) Medical Research	1,250
American Cancer Society	AOT NE DAY CT		Wagoner	OK 74467		170(b)(1)(A)(iv)	iv) Social Services	300
Ariger Food Millistries - First Baptist Crimical	1521 W Dobbins Rd		Phoenix	AZ 85041	41 N/A	170(b)(1)(A)(iv)		1,000
Arrona Chate Ilaw Otr For Leadership Cycs	PO Box 874106		Tempe	AZ 85280	80 N/A	170(b)(1)(A)(II)		8,000
Augo Compation	PO Box 1073		Rye	NY 10580	80 N/A	170(b)(1)(A)(III)	iii) Medical Research	750
Accountable for Broad Capter	PO Box 1073		Rye	NY 10580	80 N/A	170(b)(1)(A)(III)	III) Medical Research	250
Pour And Gule Club Of Jake County	1801 Sheridan Rd	Suite 202	North Chicago	IL 60064	64 N/A	170(b)(1)(A)(iv)	iv) Social Services	820
Boys Alid Ollis Clob Of Care County	5 Schiber Ct	Bids A	Maryville	IL 620	62062 N/A	170(b)(1)(A)(III)	III) Medical Research	200
Caraca Baraarh Illinois	PO Box 8194		Rolling Meadows	11 60008	N/A	170(b)(1)(A)(III)	III) Medical Research	250
Center For Services Leadership	PO Box 874106		Tempe		85280 N/A	170(b)(1)(A)(III)		9,56
City Of Hope	1055 Wilshire	11 Floor	Los Angeles		17 N/A	170(b)(1)(A)(iii)		47,69
College Surress Foundation	1605 NW Sammamish Rd	Surte 200	Issaquah			170(b)(1)(A)(w)		25,000
Commercial Club Foundation	21 South Clark	Surte 3120	Chicago		03 N/A	170(b)(1)(A)(IV)	╗	60,000
Community Food Bank Of Fastern Oklahoma	1304 N Kenosha Ave		Tulsa	OK 741	74106 N/A	170(b)(1)(A)(w)		300
Computers for Children	2558 Delaware Ave		Buffalo	NY 142		170(b)(1)(A)(w)		10,000
Gree Wheel Chair Mission	PO Box 513538		Los Angeles	CA 90051	51 N/A	170(b)(1)(A)(lv)	\neg	7,500
Colden State Foods Foundation	18301 Von Karman Ave	Suite 1100	Irvine	CA 90017	17 N/A	170(b)(1)(A)(w)	一	10,000
Court Dropt Dropt Broats	180 South Broadway	Suite 306	White Plans	NY 10605		170(b)(1)(A)(IV)	iv) Educational Support	200
Unbert Cor Lucrosts	1050 Thankersy Drive		Palatine	IL 60067		170(b)(1)(A)(w)	iv) Social Services	20,000
C Chare	212 West Superior	Suite 300	Chicago	11 60610		170(b)(1)(A)(w)	iv) Educational Support	2,000
Lor Turner AIS Coundation	SSSO W Tought	Suite 302	Skokie	IL 60077	_	170(b)(1)(A)(w)	iv) Medical	100
Les l'uliei ALS l'outidation	1311 Mamaroneck Ave		White Plans			170(b)(1)(A)(w)	iv) Medical	100
Marke A Wich	640 N LaSalle	Suite 280	Chicago	IL 60654	54 N/A	170(b)(1)(A)(w)	iv) Social Services	100
Marking Education The Applica (META)	2800 Olympic Rivd	2nd Floor	Santa Monica	CA 92887	87 N/A	170(b)(1)(A)(w)	iv) Educational Support	4,500
Minds Matter Of Denver Inc	P.O. BOX 48162		Denver	CO 80204	04 N/A	170(b)(1)(A)(w)	iv) Educational Support	1,000
Militals Matter Of Deriver, Inc.	2440 C Sepulyata Blvd	Suite 115	Los Angeles			170(b)(1)(A)(iv)	ıv) Medical	100
Multiple Scierosis Society	250 Boute 101	Suite 5A	Bedford			170(b)(1)(A)(iv)	ıv) Medical	1,600
Musculal Dystropily Association	17 W Franklin Street		Baltimore	MD 21201	01 N/A	170(b)(1)(A)(w)	IV) Social Services	200
Nachville Recuie Mission	639 Lavfavette St.		Nashville			170(b)(1)(A)(iv)		226
Northeast Illinois Council Of Boy Scouts	2745 Skokie Vallev Road		Highland Park	11 60035		170(b)(1)(A)(iv)	\neg	259-1
OfficeMax Charities	263 Shuman Blvd	Attn. Community Affairs Dept	Naperville			170(b)(1)(A)(iv)	\neg	9'0'9
Pancreatic Cancer Action Network	2141 Rosecrans Ave		El Segundo	CA 90245		170(b)(1)(A)(w)		250
Portland Rescue Mission	1507 Northeast 122nd Avenue		Portland			170(b)(1)(A)(w)	1	200
Rocky Mountain MS Center	701 East Hampden	Surte 420	Engelwood			170(b)(1)(A)(III)	_1	2,000
Shop With a Cop	PO Box 145497		Salt Lake City	UT 84114		170(b)(1)(A)(w)	\neg	300
Talk About Curing Autism	3070 Bristol Street	Surte 340	Costa Mesa			170(b)(1)(A)(w)	\neg	250
Teachers Treasures	1800 E Tenth Street		Indisnapolis			170(b)(1)(A)(w)	ヿ	2,500
The Breast Cancer Research Foundation	60 East 56th Street	8th Floor	New York	NY 10022		170(b)(1)(A)(uı)	III) Medical Research	100
The Food Alleray And Anaphylaxis Network	11781 Lee Jackson Hwv	Surte 160	Fairfax	VA 22033	33 N/A	170(b)(1)(A)(ıv)	\neg	100
The Gene Roman Family Foundation	18201 Glen Swilly Circle		Tinley Park		N/A	170(b)(1)(A)(vii)		320
The Salvation Army	1616 S Main		Tulsa	OK 74119	N/A	170(b)(1)(A)(w)	v) Social Services	400
				_				250 270
TOTAL CONTRIBUTIONS								2:4004

Form **8868**

(Rev. April 2009)

Department of the Treasury

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

nternal Rev	renue Service	File a separate application for each return.		<u>_i</u>	
If you	are filing for an Aut	omatic 3-Month Extension, complete only Part I and check this box		•	<u> </u>
• If you	are filing for an Add	itional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of	f this form).		
Do not c	complete Part II un	less you have already been granted an automatic 3-month extension on a previou	sly filed Fo	rm 8868.	
Part I	Automatic	3-Month Extension of Time. Only submit original (no copies needed).			
A corpor	ation required to file	Form 990-T and requesting an automatic 6-month extension - check this box and	i complete		
Part I on				1	• 🗀
	•	ling 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to reque	et an avtar		
	come tax returns.	ing 1120-C lilers), partiterships, helvilos, and trusts must use Form 7004 to reque	sst an exten	Sion or time	
noted be (not auto you mus	elow (6 months for a omatic) 3-month ext t submit the fully co	enerally, you can electronically file Form 8868 if you want a 3-month automatic extraorporation required to file Form 990-T). However, you cannot file Form 8868 electrons or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite of mpleted and signed page 2 (Part II) of Form 8868. For more details on the electron e-file for Chanties & Nonprofits.	ctronically if or consolid	(1) you want the a ated Form 990-T	dditional
Type or	Name of Exemp		Emp	loyer identification	n number
print	1	TATIONERS CHARITABLE TRUST		loyer racritimoduc	
print	ATTN: TA		n	6-6547406	
ile by the	Number street	and room or suite no. If a P O. box, see instructions.		0 001/100	_
due date fo filing your	' 	WAY NORTH BLVD, NO. 100			
eturn See nstructions		st office, state, and ZIP code For a foreign address, see instructions.			
		D, IL 60015-2559			
Check t	ype of return to be	filed (file a separate application for each return):			
☐ Fo	rm 990	Form 990-T (corporation)	rm 4720		
☐ Fo	rm 990-BL		rm 5227		
Fo	rm 990-EZ		rm 6069		
_	rm 990-PF		rm 8870		
		TIMOTHY CONNOLLY - ONE PARKWAY NORTH	BLVD,	STE 100	-
The b	ooks are in the care	of ► DEERFIELD, IL 60015-2559			
Telep	hone No. ► 847	$-627-7000$ FAX No. \triangleright 847-627-73	364		
If the	organization does r	ot have an office or place of business in the United States, check this box			▶ □
If this	is for a Group Retu	rn, enter the organization's four digit Group Exemption Number (GEN)	If this is fo	r the whole group,	check this
box ►	. If it is for par	of the group, check this box	of all memb	ers the extension	will cover.
ıs ·	AUGUST 15 for the organization			The extension	
	X calendar year				
	tax year begir	ning, and ending		<u> </u>	
2 If t	this tax year is for le	ss than 12 months, check reason: Initial return Final return		Change in accoun	ting period
3a If t	this application is fo	r Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any			
	nrefundable credits		3a	\$	0.
b If t	this application is fo	r Form 990-PF or 990-T, enter any refundable credits and estimated	Ī		
	• •	nclude any prior year overpayment allowed as a credit.	3b	\$	0.
_		ct line 3b from line 3a. Include your payment with this form, or, if required,			
		on or, if required, by using EFTPS (Electronic Federal Tax Payment System).			
	e instructions.	,	3c	\$	0.
		make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and I		· · · · · · · · · · · · · · · · · · ·	
LHA I	For Privacy Act and	d Paperwork Reduction Act Notice, see Instructions.		Form 8868	(Rev. 4-2009)