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201412

_{ғот} 990-РF

Return of Private Foundation

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

OMB No 1545-0052

Department of the Treasury

▶ Do not enter social security numbers on this form as it may be made public.

2014

		nue Service . ▶ Information about Form 990-PF and its se	eparate instructions i	s at www.i	rs.gov/form	990pf. Ope	n to Public Inspection
For	calen	dar year 2014 or tax year beginning		and endin			, 20
N:	me of	foundation THE SUEDHOFF MEMORIAL TRUST			A Employer	Identification number	
		C/O ROBERT SUEDHOFF			35-1969	360	
N	ımber a	and street (or P O box number if mail is not delivered to street address)	ı	Room/suite	B Telephone	number (see instruction:	5)
_3	326 1	KALLARD COVE			(260)43	32-3987	
		wn, state or province country, and ZIP or foreign postal code		-	C If exempt	uon application is pending	. check here
		MAYNE, IN 46804					_
B	Check	all that apply Initial return Initial return	of a former public charity D 1. Foreign organizations, check he			ere 🕨 🔃	
		Final return Amended re	etum		2 5000	a amanications mosting t	
_		Address change Name chan				n organizations meeting there and attach computer	
H (3	type of organization: X Section 501(c)(3) exempt pri			E If private	foundation status was ter	minated under
			taxable private founda	tion		07(b)(1)(A), check here	
		rket value of all assets at J Accounting method:	X Cash	Accruai	F If the four	ndation is in a 60-month to	ermination
		year (from Part II, col. (c), Other (specify)			under se	ction 507(b)(1)(B), check	here ▶
_	ne 16)	(* = * * * * * * * * * * * * * * * * * *	e on cash basis.)				
Pa	ırt l	Analysis of Revenue and Expenses (The total of	(a) Revenue and	1			(d) Disbursements
		amounts in columns (b), (c), and (d) may not necessarily equal	expenses per books		investment come	(c) Adjusted net income	for charitable purposes
		the amounts in column (a) (see instructions).)	DOOKS				(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	253,55		<u>(1) 25,000</u>	<u> </u>	14 m
	2	Check ► X if the foundation is not required to attach Sch. B	5%8248 <u>2</u> (3			T	
	3	Interest on savings and temporary cash investments	2,52		2,528	†	7 5 40 7 5
	4	Dividends and interest from securities	52,29	8	52,298		382707
	5a b	Gross rents		2 1. GP 2.	<u>2</u> * * 20, 3,54	1 12 2 080 1 0 2 2 1 1 3 1 1 3 1 1 3 1 1 3 1 1 3 1 1 3	#70 \$ 14 × 17
	6a	Net rental income or (loss) 2	The second secon				
Revenue	b	Net gain or (loss) from sale of assets not on line 10 . STM139 Gross sales pince for all assets on line 6a 1.041.436			TO WAS		
Ve.	7	Capital gain net income (from Part IV, line 2)			, " "		
æ	8	Net short-term capital gain				23 - 20 - 346 - 4	
	9	Income modifications		ա<u>ֆ</u>ատուսյանում			1.333.4
	10a	Gross sales less returns and allowances		4		2 27.80 5.25 (1 35 37 2 1
	ь	Less: Cost of goods sold		4	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	c	Gross profit or (loss) (attach schedule)	N. 684 N. 7. 34 S.		^	**************************************	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	11	Other income (attach schedule) STM106	(12,30	10	(12,301)	
	12	Total. Add lines 1 through 11	506,78		42,527		1 1 1 1 1 1 1
	13	Compensation of officers, directors, trustees, etc	18,58		18,586		· · · · · · · · · · · · · · · · · · ·
es	14	Other employee salaries and wages	+1				
Š	15	Pension plans, employee benefits					
xpenses	16a	Legal fees (attach schedule)	.51	1			
ш	ь	Accounting fees (attach schedule);	3/1 -/	0	2,950		
≨	С	Other professional fees (attach schedule) 2 8 2010	.0				
Administrative	17						
nis.	18	Taxes (attach schedule) (see instructions) STM110	41	7	417		
Ē	19	Depreciation (attach schedule) and depletion		<u> </u>			300000
	20	Occupancy		 			<u> </u>
and	21	Travel, conferences, and meetings		<u> </u>			
(g	22	Printing and publications	j				
֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓	23	Other expenses (attach schedule)		 			
era	24	Total operating and administrative expenses.					
Operating	25	Add lines 13 through 23	21,95		21,953	1814 (1944) 1944	140.000
_	25	Contributions, gifts, grants paid	140,000				140,000
	26	Total expenses and disbursements. Add lines 24 and 25 .	161,95		21,953		140,000
	27	Subtract line 26 from line 12:		1 m			
	a	Excess of revenue over expenses and disbursements .	344,821	"	20 554	2	(C. 10) 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	ь	Net investment income (if negative, enter -0-)	3.4.37.47.7.57.7.	7 50.	20,574		**************************************
	С	Adjusted net income (if negative, enter -0-)	\$. 1 4. 5 2 5 5 7	1 550	Z1. A 31	<u> </u>	18 # 6865

For Paperwork Reduction Act Notice, see instructions.

Rec in Batching/ Corres Ogden DEC 1 7 2015

Part	Balance She	POTS Attached schedules and amounts in the description column	Beginning of year	Enc	of year
		should be for end-of-year amounts only. (See Instructions.)	(a) Book Value	(b) Book Value	(c) Far Market Value
- 1	1 Cash - non-intere		319,457	406,975	406,975
2	2 Savings and tem	porary cash investments			
3	3 Accounts receive				
	Less: allowance	for doubtful accounts >		<u> </u>	
4	4 Pledges receivat				
- 1		for doubtful accounts			
•		9			
6	6 Receivables due	from officers, directors, trustees, and other			
	disqualified perso	ons (attach schedule) (see instructions) ,		1	
7	7 Other notes and	loans receivable (attach schedule)		13 3 3 3 3 3 5 5 5 5 5 5 5 5 5 5 5 5 5 5	
	Less. allowance	for doubtful accounts >			
Assets	8 Inventones for sa	ale or use			
SS		s and deferred charges			
₹ 10		S. and state government obligations (attach schedule)			
		rporate stock (attach schedule) STM137	1,756,462	2,024,987	2,095,369
	c Investments - co	rporate bonds (attach schedule) STM138	40,004		1
11	_	uldings and equipment basis	# 0 YCE \$7 5 725		# 197 <u>5</u> 010 13,560 12
	Less accumulated de	preciation (attach schedule)	W. 7. 17.6 . 12.5	***	
12	2 Investments - mo	ortgage toans			
13		ner (attach schedule)			
14		and equipment: basis		* 500 CA	33 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3 A 3
		preciation (attach schedule)	DATE (11. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2.	" 6w49 \ \\ \X	5. 20.00
15				 	<u> </u>
16	6 Total assets (to	be completed by all filers - see the			
	instructions Alse	o, see page 1, item I)	2,115,923	2,431,962	2,502,344
17		e and accrued expenses			C*************************************
., 18	8 Grants payable				
<u>.</u> 9 19	 Deferred revenue 				
Liabilities	0 Loans from office	ers, directors, trustees, and other disqualified persons			
분 21		ther notes payable (attach schedule)			TO 2004 1999
- ₂₂					
23	3 Total liabilities (add lines 17 through 22)	0	0	
		at follow SFAS 117, check here · · · ·			
စ္က		nes 24 through 26 and ilnes 30 and 31.			
Balances	4 Unrestricted		2,115,923	2,431,962	· Same Park
E 25		ncted		-,,,,,,,	Tradition
		incted			귀 싫어하려운 기교
<u> </u>		at do not follow SFAS 117, check here			コスペック 多 色
3		nes 27 through 31.			
Ö 27	7 Capital stock, tru	st principal, or current funds			
Assets		surplus, or land, bldg, and equipment fund			
S 29		s, accumulated income, endowment, or other funds			Tradition in
₹ 30		or fund balances (see instructions)	2,115,923	2,431,962	
TO 31		and net assets/fund balances (see			刊込むの語の に
			2,115,923	2,431,962	
Part	III Analysis	of Changes in Net Assets or Fund Balan			
***	·····	balances at beginning of year - Part II, column (a), line			
		rted on prior year's return)			2,115,923
		I, line 27a			
		luded in line 2 (itemize) ▶ STX115		3	
					
		lin line 2 (itemize) ▶ STM116		5	
		balances at end of year (line 4 minus line 5) - Part II, c	olumn (b), line 30	6	
EFA .	 				Form 990-PF (2014)

Part VI instructions.
Form 990-PF (2014)

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

6 Enter 1% of net investment income (1% of Part I, line 27b) . . .

8 Enter qualifying distributions from Part XII, line 4

7 Add lines 5 and 6

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206

104,989

140,000

6

7

			969360		age 4
Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948	- see	instruction	s)	
1a	Exempt operating foundations described in section 4940(d)(2), check here Main and enter "N/A" on fine 1				
	Date of ruling or determination letter: {attach copy of letter if necessary-see instructions}	ŀ			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	1_			206
	here X and enter 1% of Part i, line 27b	ŀ			
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of		1		
	Part I line 12, col (b)				
2	Tax under section 511 (domestic section 4947(a)(1) Irusts and taxable foundations only. Others enter -0-)	2			0
3	Add lines 1 and 2	3			206
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4			0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5			206
6	Credits/Payments				
а	2014 estimated tax payments and 2013 overpayment credited to 2014 · · 6a 2,503]			
b	Exempt foreign organizations - tax withheld at source 6b				
c	Tax paid with application for extension of time to file (Form 8868) 6c				
đ	Backup withholding erroneously withheld				
7	Total credits and payments. Add lines 6a through 6d	7_		2	<u>,503</u>
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10		2	,297
11	Enter the amount of line 10 to be: Credited to 2015 estimated tax ▶ 2,297 Refunded ▶	11			
Par	1 VII-A Statements Regarding Activities				,
1a	During the tax year did the foundation attempt to influence any national, state, or local legislation or did it		1 1	Yes	No
	participate or intervene in any political campaign?		. <u>1a</u>		X
ь	Old it spend more than \$100 during the year (either directly or indirectly) for political purposes (see				
	Instructions for the definition)?		· · 1b		<u>X</u>
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials				
	published or distributed by the foundation in connection with the activities		1 1		
C	Did the foundation file Form 1120-POL for this year?		· · 1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year.				i
	(1) On the foundation > \$ (2) On foundation managers > \$	_			
0	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed				l
	on foundation managers > \$				l
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		X
	If "Yes," attach a detailed description of the activities.				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of		1 1		
	incorporation, or byławs, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		· · 4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	• • •	- 4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		X
	If "Yes," attach the statement required by General Instruction T				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either.		1 1		
	By language in the governing instrument, or		1 1		
	 By state legislation that effectively amends the governing instrument so that no mandatory directions that 				
	conflict with the state law remain in the governing instrument?		6	Χ_	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II col (c) and Part	χv	7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)				i _
	IN				l
þ	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General				1
	(or designate) of each state as required by General Instruction G? If "No," attach explanation		8ъ	X	<u></u>
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or				-
	4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes,"				ĺ
	complete Part XIV		9		Χ_
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their				
	names and addresses		. 10		_X
EEA			Form 990	-PF (2014)

_		69360	F	Page 5
Pa	rt.VII-A Statements Regarding Activities (continued)			
	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 make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement (see instructions)	. 12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	x	
	Website address ► N/A	. [13		<u> </u>
4.4		1 422 2	007	
14		0-432-3	987	
	Located at ► 3326 MALLARD COVE, FORT WAYNE, IN ZIP+4 ► 461	304		
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		1	
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority	1	Yes	No
	over a bank, securities, or other financial account in a foreign country?	16	ـــــبا	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90.22.1). If	1/4	<u>ک</u> ج	1
_	"Yes," enter the name of the foreign country	1 5-	```	<u> </u>
Pa	rt 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):	$-\Gamma_{0.5}$	<u>,</u> , /	`
	(1) Engage In the sale or exchange, or leasing of property with a disqualified person? Yes X No.	• {∂#	S 4	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	15%	$[\cdot,]$,
	disqualified person?) <u>~</u> ~		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No.	, [, Z		<u>.</u> أ
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No	انه پذرا	100	ļ.
	(5) Transfer any income or assets to a disqualified person (or make any of either available for	- K*	\	,
	the benefit or use of a disqualified person)?	,	. `	
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the	(,	100	·′′ .
	foundation agreed to make a grant to or to employ the official for a period after	100 to	%. *** *** (***	
	termination of government service, if terminating within 90 days.)		35.	1.74
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations		100	
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	. 1b		ĺ
	Organizations relying on a current notice regarding disaster assistance check here			70.0
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	Su 44,		, , ,
	were not corrected before the first day of the tax year beginning in 2014?	. 1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	7.00	1. 3	, ,
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and		1	,
	6e, Part XIII) for tax year(s) beginning before 2014?		77.	
	If "Yes," list the years ▶	8.3%		
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)	8.60	n, 12	11.59
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to		17.2	` `
	all years listed, answer "No" and attach statement - see instructions.)	2b	i	Х
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	· /////		
•	• • • • • • • • • • • • • • • • • • •	200	<u>.</u>	,
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise		1800	,
-	at any time during the year?	. 8%		
h	If "Yes." did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or	' [57].	\$ 5 4	,
_				
	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	100	[" .	. 37
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the	(St./1)	\$ ·	
4-	foundation had excess business holdings in 2014.)	. 3b	┞─┤	X
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	. 4a	ļ.,,	<u> </u>
Ь	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	77.5	` `	v
	chantable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?	. 4b		X
EEA		Form 99	10-PF (2014)

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Pa	t VII-B Statements Regarding Activitie	s for \	Which For	n 4720	May Be	Requi	red (continued	J)	
5a	During the year did the foundation pay or incur any am	ount to.						185	.a(\$\$ \$\delta\)
	(1) Carry on propaganda, or otherwise attempt to influ		islation (sectio	n 49450	e))?	(Yes X No	36	34 (2×103)
	(2) Influence the outcome of any specific public election					[8%	1 E 1 E 3
	directly or indirectly, any voter registration drive?				-		Yes X No	388	
	(3) Provide a grant to an individual for travel, study, or							23	
						1	Yes X No	88	
	(4) Provide a grant to an organization other than a che section 4945(d)(4)(A)? (see instructions)		_			ſ	⊐ છા	18	
						• • • (Yes X No		7. p. 23. [A.)
	(5) Provide for any purpose other than religious, chari			, or educ	cational	1		- 160	48 C 3 8 8 6 7
L	purposes, or for the prevention of cruelty to childre				• • • • • •		Yes X No	- 50	
ь	If any answer is "Yes" to 5a(1)-(5), did any of the trans						d in	1.	
	Regulations section 53 4945 or in a current notice regi				instructions)	?	· · · · · · · <u>· ·</u>	51	b
	Organizations relying on a current notice regarding dis				<i></i>		▶ [_]	187	%
C	If the answer is "Yes" to question 5a(4), does the foun			from the	e tax				
	because it maintained expenditure responsibility for the					[Yes No	- 13	
	If "Yes," attach the statement required by Regulations	section	53.4945-5(d).						J. 1883
6a	Did the foundation, during the year, receive any funds,	directly	or indirectly, to	pay pre	miums			\$20	
	on a personal benefit contract?					[Yes X No	180	\$\$\\\\$\\\\$\\\\$\\\\$\\\\$\\\\$\\\\$\\\\$\\\\$
b	Did the foundation, during the year, pay premiums, dire	ectly or i	ndirectly, on a	persona	l benefit cont	ract?		6	ь х
	If "Yes" to 6b, file Form 8870							73	1000
7a	At any time during the tax year, was the foundation as	arty to a	prohibited tax	shelter	transaction?	. [Yes X No	31.	
b	If "Yes," did the foundation receive any proceeds or ha							71	1 1
Pai	rt VIII Information About Officers, Dire						s. Highly Pai	d Em	plovees.
·	and Contractors		,,				o,g,		p.0,000,
1 [ist all officers, directors, trustees, foundation mana	gers an	d their compe	nsation	(see Instru	rtions)			
		(b) Titl	e, and average		mpensation		Contributions to	(e) F	xpense account
	(a) Name and address		rs per week ad to position		ot paid, ter -0-)		oyee benefit plans ferred compensation	oth.	er allowances
ROB	ERT M SURDHOFF		ER-BOARD	STMA		41.0 40.	Compensation .	· 	
_	6 MALLARD COVE, IN 46804		2.00	J.1724	18,586		0		0
		RPCDE	TARY/TREA		10,500			-1	<u>~</u>
	6 MALLARD COVE, IN 46804	BACAB	0.10		. 0		0	1	0
		ļ	0.10					+	
		ł	,						
									
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						<u> </u>		ــــــــــــــــــــــــــــــــــــــ	
	Compensation of five highest-paid employees (other	r than th	lose included	on line	1 - see instr	uctions). If none, enter		
	NONE."							· -	
	(a) Name and address of each employee paid more than \$50	000	(b) Title, and a				(d) Contributions to employee benefit		xpense account.
	(a) Name and address or each employee paid more than 500	,000	hours per w devoted to po		(c) Comper	sation	plans and deferred compensation		er allowances
				-			Compensation	┿	
NON	S .		1					1	
		_			ļ <u>.</u>			+	
			1		1				
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			1					1	
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								1	
			ļ						
							1	1	
			l		<u></u>		l		
Tota	number of other employees paid over \$50,000	<u> </u>				<u> </u>	>		0
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Part VIII: Information About Officers, Directors, Trustees, Fou and Contractors (continued)	indation Managers, Highly P	aid Employees,
3 Five highest-paid independent contractors for professional services (see ins	tructions). If none, enter "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	. .	
Part IX-A Summary of Direct Charltable Activities		
List the foundation's four largest direct chantable activities during the tax year, include relevant sta organizations and other beneficiaries served, conferences convened, research papers produced,		Expenses
1 NONE		
		0
2		
3		
•		
4		
	,	
Part IX-B Summary of Program-Related Investments (see instr		
Describe the two largest program-related investments made by the foundation during the tax year 1 NONE	on lines 1 and 2.	Amount
1 10010		
		0
2		
All other program-related investments See instructions.		
3		
Fotal. Add lines 1 through 3	<u> </u>	
EEA		Form 990-PF (2014)

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

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

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139,794

Form 990-PF (2014)

Pa	rt XIII Undistributed Income (see instr	ructions)			
		. (0)	, (b)	, (c)	(d)
1	Distributable amount for 2014 from Part XI,	Corpus	Years prior to 2013	2013	2014
	line 7	0.0000000000000000000000000000000000000	A Commence of the Commence of	XIII. A.	121,358
2	Undistributed income, if any, as of the end of 2014:	735.000	**************************************	887 YAN 873 MARINE TAKA	. Y. S.
a	Enter amount for 2013 only			83,940	199 Buch
b	Total for prior years:	200 200 200 200 200 200 200 200 200 200	630 (00.5) 5 / / 20/00	27,740	
3	Excess distributions carryover, if any, to 2014:	####XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	1200 12 12 12 12 12 12 12 12 12 12 12 12 12	20 1 × 1/2 3 × 2/2 × 1	22. 2 sk 2 3 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
3	ı				
a	From 2009				7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
D	From 2010				^
C	From 2011	<u> - 1846 88 88 88 88 88 88 88 88 88 88 88 88 88</u>		B. (40%) (80%)	14 13 18 18 18
đ	From 2012				
e	From 2013	_\~:?##!!#################################		1000 to 2006-1315-4	192 - 3. 198 - 10 - 1
f	Total of lines 3a through e		\$1.38843.00001.00139384.	Confermation of the	Charles (Sept 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
4	Qualifying distributions for 2014 from Part XII,				3/33/39/
	line 4 ⁻ ▶ \$ 140,000			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
а	Applied to 2013, but not more than line 2a	1200 8 3 707	\$2635 (AC)	83,940	
þ	Applied to undistributed income of prior years			Judinary stages	1250
	(Election required - see instructions)			particular of the state of the	1 1 (1 Mills
C	Treated as distributions out of corpus (Election		CONTRACTOR STREET		V., (1) 10 10 10 10 10 10 10 10 10 10 10 10 10
	required - see instructions)				
đ	Applied to 2014 distributable amount	27/25 (1/2) S. M.			56,060
0	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2014 .			25 9 9 9 9 1 1 1 2 1 4 1 3 1 3 1 3 1 3 1 3 1 3 1 3 1 3 1 3	
	(If an amount appears in column (d), the same	Y#4.11486#44			J 164.00
	amount must be shown in column (a).)				
6	Enter the net total of each column as				Challen .
	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e. Subtract line 5 .				
ь	Prior years' undistributed income. Subtract	Change 25 (A) 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			4.4.5 33 33
	line 4b from line 2b				
c	Enter the amount of prior years' undistributed	S. 64 (C) (SE SE S		3 4 4 4 A A A A A A A A A A A A A A A A	
	income for which a notice of deficiency has				A
	been issued, or on which the section 4942(a)				Carlos Maria
	tax has been previously assessed				2
đ	Subtract line 6c from line 6b. Taxable	N. 22328			
	amount - see instructions			N#3 4 4 #2014	# 50 () () () () () () () () () (
0	Undistributed income for 2013. Subtract line	12449923 33			
	4a from line 2a. Taxable amount - see	DESCRIPTION OF THE PROPERTY OF			San San San San San San
	instructions				Magaganan,
f	Undistributed income for 2014. Subtract lines	0.80363 #388373	2000 - SEPT - SEPT	8774 18 X X 3 X 3 X 3 X 3 X 3 X 3 X 3 X 3 X 3	······
	4d and 5 from line 1. This amount must be			2 99 9 9 3 9 9 C	
	distributed in 2015				65,298
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section		to a series of the series of t		
	170(b)(1)(F) or 4942(g)(3) (Election may be			\$\frac{1}{2} \frac{1}{2} \frac	
	required - see instructions)			\$6.GN:\$1.4	
8	Excess distributions carryover from 2009 not		Silver en et de la constante d		
	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2015.		\$\tilde{\	Gelamica Darrey	8 M (2020) 1 M (2020) 1 M (2020)
	Subtract lines 7 and 8 from line 6a				and Tally
10	Analysis of line 9:	(1) (\$\forall \forall	13 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	28 D B B B B B B	52 27 3
a	Excess from 2010		ka Augusta		The last
ь	Excess from 2011				
C	Excess from 2012	Treiring (n. 1945)		1884 (2000) A B	
d	Excess from 2013				
8	Excess from 2014	10.505.000.505.34			33, 75 mg 35 27 25
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		OFF MEMORIAL T			35-19693	50 Page 10
Par	XIV: Private Operating Foun)	
1a	If the foundation has received a ruling or			ating		
	foundation, and the ruling is effective for					
b	Check box to indicate whether the found		iting foundation desc	ribed in section	4942(j)(3) or	4942(j)(5)
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year	ļ	Prior 3 years		(e) Total
	investment return from Part X for each year listed	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(4) (48)
b	85% of line 2a					
С	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					
•	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon.					
a	"Assets" alternative test - enter: (1) Value of all assets					
	(2) Value of assets qualifying under section 4942(j)(3)(8)(i)					
b	"Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 8 for each year listed					
С	"Support" alternative test - enter: (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from an exempt organization	_				
	(4) Gross investment income					
Parl	XV. Supplementary Informa	ition (Complete t	this part only if	the foundation ha	d \$5,000 or more	in assets at
	any time during the yea		ons.)			
1 a	Information Regarding Foundation M List any managers of the foundation wh before the close of any tax year (but on NONE,	o have contributed mo	re than 2% of the tot ted more than \$5,000	al contributions received)). (See section 507(d)(2	by the foundation).)	
ь	List any managers of the foundation wh	o own 10% or more of	the stock of a corpor	ation (or an equally large	portion of the	
	ownership of a partnership or other enti				•	
	NONE,					
2	Information Regarding Contribution, Check here X if the foundation onl unsolicited requests for funds. If the foundation	y makes contributions	to preselected charit	- able organizations and d		
	other conditions, complete items 2a, b,					
а	The name, address, and telephone num	nber or e-mail address	of the person to who	m applications should be	addressed:	
b	The form in which applications should b	e submitted and inform	nation and materials	hey should include:		
с	Any submission deadlines:	·		· · · · · · · · · · · · · · · · · · ·		
d	Any restrictions or limitations on awards factors.	s, such as by geograph	nical areas, charitable	fields, kinds of Institutio	ns, or other	· <u> </u>
EEA						Form 990-PF (2014)

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Part XV: Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Grants and Contributions Paid During th		a for Future	Payment	
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor			
a Paid during the year				
EVANS SCHOLARS				
215 B BERRY				
FORT WAYNE, IN 46804	NONE	PC	GEN PURPOSE	28,000
NAPLES PHILHARMONIC				
5833 PELICAN WAY				
NAPLES, FL 34108	NONE	PC	GEN PURPOSE	5,000
CARRIAGE HOUSE				
3327 LAKE AVE				
FORT WAYNE, IN 46805	NONE	PC	GEN PURPOSE	1,000
PLORIDA GULF COAST UNIV PDN				
10501 FGCU BLVD S		1		
FORT MYERS, PL 33965	NONE	PC	GEN PURPOSE	15,000
LITERACY ALLIANCE				
709 E CLAY ST				
FORT WAYNE, IN 46802	NONE	PC	GEN PURPOSE	10,000
BOYS AND GIRLS CLUB				•
2609 FAIRFIELD AVE				
FORT WAYNE, IN 46807	NONE	PC	GEN PURPOSE	3,000
AMERICAN HEART				
28441 BONITA CROSSING BLVD				
BONITA SPRINGS, PL 34135	NONE	PC	GENERAL PURPOSE	2,000
PT WAYNE MUSEUM OF ART				
311 B MAIN ST		Ì	1	
FORT WAYNE, IN 46802	NOME	PC	GEN PURPOSE	5,000
Total				
b Approved for future payment				
		,		
]		
Total			▶ 3b	Form 990-PF /201

Part XV | Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Grants and Contributions Paid During th		a for Future	Payment	
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	Тосроп		
Paid during the year				
LEARN MORE CENTER				
603 BOND ST PO 272	i			
NORTH MANCHESTER, IN 46962	NONE	PC	GEN PURPOSE	10,000
LITTLE RIVER WETLANDS				
7209 ENGLE RD NO. 200	Į			
FORT WAYNE, IN 46804	NOME	PC	GEN PURPOSE	10,000
NICKLAUS HOSPITAL				
215 B BERRY ST				ļ
FORT WAYNE, IN 46801	NONE	PC	GEN PURPOSE	10,000
PALM BEACH LIBRARY				
3650 SUMMIT BLVD		1		
WEST PALM BEACH, PL 33406	NONE	PC	GEN PURPOSE	1,000
SCIENCE CENTRAL	1			
1950 N CLINTON ST				
FORT WAYNE, IN 46805	NONE	PC	GEN PURPOSE	10,000
TURNSTONE				
3320 N CLINTON ST				
FORT WAYNE, IN 46805	NONE	PC	GEN PURPOSE	30,000
		1		
	1			
Total	· · · · · · · · · · · · · · · · · · ·	1		140,000
- Approved to total open ment				
		•		
		1		
		1		
		1		1
	J	1	1	

Analysis of Income-Producing		I become a control	T East 4 ::		
er gross amounts unless otherwise indicated.	(a)	business income (b)	(c)	(d)	(e) Related or exemp function income
Program service revenue. a	Business code	Amount	Exclusion code	Amount	(See instructions
b					
с					
d		·			
·			<u> </u>		
·	 				
g Fees and contracts from government agencies			 		
Membership dues and assessments	-		1	9 799	
Interest on savings and temporary cash investments Dividends and interest from securities		·	14	2,528 52,298	
Net rental income or (loss) from real estate:	Germania i	<u> </u>		32,296	
a Debt-financed property		200 20 00 00 00 00 00 00 00 00 00 00 00		***************************************	<u> </u>
b Not debt-financed property	1		 		
Net rental income or (loss) from personal property			01	2	
Other investment income			01	(12,301	
Gain or (loss) from sales of assets other than inventory			18	210,704	
Net income or (loss) from special events				· · · · · · · · · · · · · · · · · · ·	
Gross profit or (loss) from sales of inventory					
Other revenue: a					
			1		•
			 		
Subtotal. Add columns (b), (d), and (e)			Q#\$CE11(1)	253,231	
Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations.) rt XVI-B Relationship of Activities to the	Accompl		empt Purpos	13	253,2
Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations.)	Accomplione is reported	Ishment of Ex ed in column (e) of P	empt Purpos Part XVI-A contril	13ses	253,: e
rotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations.) rt XVI-B Relationship of Activities to the Explain below how each activity for which income. accomplishment of the foundation's exempt of	Accomplione is reported	Ishment of Ex ed in column (e) of P	empt Purpos Part XVI-A contril	13ses	253,: e
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rotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations.) rt XVI-B Relationship of Activities to the Explain below how each activity for which income accomplishment of the foundation's event of	Accomplione is reported	Ishment of Ex ed in column (e) of P	empt Purpos Part XVI-A contril	13ses	253, e
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			EMORIAL TRUST	Alama and Dalottonahina	35-196936		age 1
GILVE		ganizations	ansiers to and transac	tions and Relationships	AAIGU MOUC	nantable	ì
1 Did t			ige in any of the following with a	ny other organization described		Yes	T No
			ion 501(c)(3) organizations) or ir			12 0 03	100
•	nizations?						.}`.;
			oncharitable exempt organizatio				} \\ \]
					• • • • • •	1a(1)	<u> </u>
	oner assets Ir transactions:	• • • • • • • • • • •			• • • • •	1a(2)	X
	- - -	onchantable evemn	t omanization			1b(1)	X
						1b(2)	₩
						1b(3)	X
						1b(4)	X
						1b(5)	X
		•	•			1b(6)	X
			other assets, or paid employees			1c	X
				olumn (b) should always show the			
				. If the foundation received less th			
				of the goods, other assets, or se			
Line no.	(b) Amount involved	(c) Name of nor	ncharitable exempt organization	(d) Description of transfers, trans	actions, and sha	ring arrangen	<u>rents</u>
-							
				ļ			
							
							
				- 			
							
					-		
				<u> </u>			
	<u> </u>						
ابــــــا		<u> </u>		<u> </u>			
			with, or related to, one or more	· -	1	п б	a
		•	r than section 501(c)(3)) or in se	ction 5277	• • • • • •	Yes 2	ZI MO
b It Y	es," complete the foll						
	(a) Name of organ	lization	(b) Type of organizatio	(c) Des	cription of relation	nsnip	
							
							
	····						
			· · · · · · · · · · · · · · · · · · ·				
Tu	nder penalties of parjury. I	declare that I have examin	the return, ingluding accompanying s	thedules and statements, and to the best of	my knowledge and	belief, it is true	
ign 🖁	rrect, and complete. Decla	aration of preparer (other th	nan texpayer) is seed on all information of	chedules and statements, and to the best of f which preparer has any knowledge k			
-	1/1/2	\mathcal{U}	Null 10-14-10	OFFICER-BOARD		S discuss this reparer shown be	
ere 7	OULL	(a started	C/ 1 / 0 / 1 / 3	POFFICER-BOKKD	(see inst)?		

CIS_IMAGE_DO_NOT_CORR_FOR_SIGNATURE

3525 Metro Drive N Fort Wayne IN 46818

▶ Snell Consulting & Tax Services LLC

Paid

Preparer

Use Only

KARREN SNELL

Film s name

Form 990-PF (2014)

Form a EIN

260-456-5656

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

OMB No 1545-0047

2014

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

▶ Information about Schedule 8 (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

no ocernose menos.	IAL TRUST	35-1969360
rganization type (check or	ne):	
ilers of:	Section:	
orm 990 or 990-EZ	☐ 501(c)() (enter number) organization	
JIII 990 01 990-C2	Contex (chica number) diganization	
	4947(a)(1) nonexempt charitable trust not treated as a private for	oundation
	527 political organization	
orm 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private found	ation
	501(c)(3) taxable private foundation	
heck if your organization is	covered by the General Rule or a Special Rule.	
ote. Only a section 501(c)(7 structions.	7), (8), or (10) organization can check boxes for both the General Rule and	a Special Rule. See
eneral Rule		
	iling Form 990, 990-EZ, or 990-PF that received, during the year, contribution property) from any one contributor. Complete Parts I and II. See instruction tributions.	
pecial Rules		
☐ For an organization d	escribed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3	% support tast of the
	ctions 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 ctions 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 ctions 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 ctions 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 ctions 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 ctions 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 ctions 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 ctions 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 ctions 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 ctions 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 ctions 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 ctions 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 ctions 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 ctions 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 ctions 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 ctions 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 ctions 509(a)(1) and 170(b)(1)(A)(a)(a)(a)(a)(a)(a)(a)(a)(a)(a)(a)(a)(a)	
	that received from any one contributor, during the year, total contributions of	
	ne amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Co	
For an organization d	lescribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that rec	ceived from any one
	e year, total contributions of more than \$1,000 exclusively for religious, cha	
literary, or educations	al purposes, or for the prevention of cruelty to children or animals. Complete	e Parts I, II, and III.
For an organization d	lescribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that rec	ceived from any one
contributor, during the	e year, contributions exclusively for religious, charitable, etc., purposes, bu	t no such
contributions totaled	more than \$1,000. If this box is checked, enter here the total contributions (that were received
during the year for an	exclusively religious, charitable, etc., purpose. Do not complete any of the	parts unless the
	s to this organization because it received nonexclusively religious, charitable re during the year	
aution. An organization that	t is not covered by the General Rule and/or the Special Rules does not file	Schedule B (Form 990,
	The state of the case of the case of the case of the case of the same of the same of the same of the same of the case of the c	
10-EZ, or 990-PF), but it mu	ist answer "No" on Part IV, line 2, of its Form 990; or check the box on line	H of its Form 990-EZ or on its

For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. ${\sf EEA}$

Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

Schedale B (Form	990	990.F7	~ 000	DE1/20141
	550.	330-62,	~ 530	T1 //4017/

Page 2

Name of organizati	on		
THE SUBDHOFF	MENORIAL	TRUST	

Employer Identification number 35-1969360

Part I.	Contributors (see instructions). Use duplicate copie	es of Part I if additional space is r	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	CARL J SUEDBOFF CHAR LEAD TR 1 302 VILLA DR- APT D JUPITER, PL 33477	\$203,045	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	CARL SUEDHOFF CHAR LEAD TR 2 302 VILLA DRIVE APT D1 JUPITER, FL 33477	\$\$ 50,505	Person S Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		s	Person [] Payroll [] Noncash [] (Complete Part II for noncash contributions)

		· · · · · · · · · · · · · · · · · · ·
	Supporting Statements	2014 PG 01
Name(s) as shown on return THE SUEDHOFF MEMORIAL TRUST		35-1969360
OTHER II	F, PART III, LINE 3 NCREASES SCHEDULE	STATEMENT #115
ADDITIONAL FTC REPORTED ON 1099	2	0.8
TOTAL	2	08
OTHER DE	F, PART III, LINE 5 ECREASES SCHEDULE	PG 01 STATEMENT #116
2013 FED RIT PAID IN 2014 TAX BASIS ADJ FOR PARTNERSHIPS	2,0	
ROUNDING	26,99	95 2
TOTAL	28,9	<u> </u>
INVESTMENTS: CO	PART II, LINE 10(B) DRPORATE STOCK SCHEDULE	PG 01 STATEMENT #137
CATEGORY	BOY BOOK VA	LUE EOY FMV
CORPORATE STOCK	1,756,462 2,024	,987 2,095,369
TOTALS	1,756,462 2,024	,987 2,095,369
	PART II, LINE 10(C) CORPORATE BOND SCHEDULE	PG 01 STATEMENT #138
		STATEMENT #138
<u>INVESTMENTS:</u>	CORPORATE BOND SCHEDULE	STATEMENT #138

Federal Supporting Statements

2014 PG 01

Name(s) as shown on return

THE SUEDHOFF MEMORIAL TRUST

35-1969360

FORM 990PF, PART I, LINE 6(A) GAIN(LOSS) FROM SALE OF OTHER ASSETS SCHEDULE

STATEMENT #139

NAME	RAYMOND JAMES
TERM	Short-Term
DATE ACQUIRED	2013-05
HOW ACQUIRED	PURCHASE
DATE SOLD	2014-02
PURCHASER	
GROSS SALES	\$ 34,202
BASIS	\$ 30,870
ACCUMULATED DEPRECIATION	\$
SALES EXPENSE	\$
TOTAL NET	\$ 3,332
NAME	RAYMOND JAMES
TERM	Long-Term
DATE ACQUIRED	VARI-OU
HOW ACQUIRED	PURCHASE
DATE SOLD	2014-12
PURCHASER	
GROSS SALES	\$ 763,529
BASIS	\$ 577,177
ACCUMULATED DEPRECIATION	\$
SALES EXPENSE	\$
TOTAL NET	\$ 186,352
NAME	LEGACY RES LP
TERM	Short-Term
DATE ACQUIRED	2014-09
HOW ACQUIRED	PURCHASE
DATE SOLD	2014-11
PURCHASER	
GROSS SALES	\$ 81,100
BASIS	\$ 123,074
ACCUMULATED DEPRECIATION	ş
SALES EXPENSE	\$
TOTAL NET	\$ (41,974)
NAMB	QR ENERGY LP
TERM	Long-Term
DATE ACQUIRED	VARI-OU
HOW ACQUIRED	PURCHASE
DATE SOLD	2014-09
PURCHASER	
GROSS SALES	\$ 157,489
BASIS	\$ 99,609
ACCUMULATED DEPRECIATION	\$
SALES EXPENSE	\$
TOTAL NET	\$ 57,880

	Federal Supporting Statements	2014 PG 02
Name(s) as shown on return		FEIN
THE SUEDHOFF MEMORIAL	TRUST	35-1969360

FORM 990PF, PART I, LINE 6(A) GAIN(LOSS) FROM SALE OF OTHER ASSETS SCHEDULE

STATEMENT #139

name	KKR LLP K-1 CAP LOSS ST
TERM	Short-Term
DATE ACQUIRED	VARI-OU
HOW ACQUIRED	PURCHASE
DATE SOLD	2014-12
PURCHASER	
GROSS SALES	\$
BASIS	\$ 2
ACCUMULATED DEPRECIATION	\$
SALES EXPENSE	\$
TOTAL NET	\$ (2)
NAME	KER LLP K-1 CAP GAIN LT
name Term	
	RER LLP K-1 CAP GAIN LT Long-Term VARI-OU
TERM	Long-Term
TERM DATE ACQUIRED	Long-Term VARI-OU
TERM DATE ACQUIRED HOW ACQUIRED	Long-Term VARI-OU PURCHASE
TERM DATE ACQUIRED HOW ACQUIRED DATE SOLD	Long-Term VARI-OU PURCHASE
TERM DATE ACQUIRED HOW ACQUIRED DATE SOLD PURCHASER	Long-Term VARI-OU PURCHASE 2014-12
TERM DATE ACQUIRED HOW ACQUIRED DATE SOLD PURCHASER GROSS SALES	Long-Term VARI-OU PURCHASE 2014-12
TERM DATE ACQUIRED HOW ACQUIRED DATE SOLD PURCHASER GROSS SALES BASIS	Long-Term VARI-OU PURCHASE 2014-12 \$ 5,116
TERM DATE ACQUIRED HOW ACQUIRED DATE SOLD PURCHASER GROSS SALES BASIS ACCUMULATED DEPRECIATION	Long-Term VARI-OU PURCHASE 2014-12 \$ 5,116 \$

PG01 STATEMENT #A01

FORM 990PF, PART VIII COMPENSATION EXPLANATION

<u>NAME</u>

ROBERT M SUEDHOFF

EXPLANATION

FEES PAID FOR INVESTMENT MANAGEMENT AND RELATED TO EVALUATION OF CHARITABLE GIFTS

		Federal S	Federal Supporting Statements	ments	2014 PG 01	,,
Namets) as shown on return THE SUEDHOFF MEMORIAL TRUST			;		Your Social Security Number 35 - 1969360	
	FORM 990PF,	_	PART 1, LINE 11 - OTHER INCOME SCHEDULE	JUL E	STATEMENT #106	
DESCRIPTION	REVENUE AND EXPENSES	NET INVESTMENT	ADJUSTED NET INCOME			
QR ENERGY LP - ORD INCOME QR ENERGY LP - OTHER DED KKR LP - ORD AND OTHER INCOME KKR LP - OTHER DED LEGACY RES LP - ORD INCOME LEGACY RES LP - OTHER DED MEM PROD PTUR LP - ORD INC MEM PROD PTUR LP - OTHER DED	14,330 (20,203) 719 (339) 1,490 (3,613) 1,704 (6,389)	14,330 (20,203) 719 (339) 1,490 (3,613) 1,704 (6,389)	000000			
TOTALS	(12,301)	(12,301)	0			
	FORM 990PF, PART	PART 1, LINE 16(8)	I, LINE 16(8) - ACCOUNTING FEES SCHEDULE	EDULE	PG 01 STATEMENT #108	
DESCRIPTION ACCOUNTING FEES TOTALS	AND EXPENSES 2,950 2,950	NET INVESTMENT 2,950 2,950	ADJUSTED NET INCOME 0	CHARITABLE PURPOSE 0		

		rederal Su	Federal Supporting Statements	ments	2014 PG 01
Name(s) as shown on return THE SUEDHOFF MEMORIAL TRUST					Your Social Security Number 35-1969360
	FORM	FORM 990PF, PART I, LINE	PART I, LINE 18 - TAXES SCHEDULE		STATEMENT #110
DESCRIPTION	REVENUE AND EXPENSES	NET INVESTMENT	ADJUSTED NET INCOME	CHARITABLE PURPOSE	
TOTALS	717	117	0	0	
	FORM 9901	PF, PART 1, LINE 13	FORM 990PF, PART 1, LINE 13 - SUBSIDIARY SCHEOULE	ш	PG 01 SUBSIDIARY STATEMENT
DESCRIPTION MGNT BY TRUSTEE	REVENUE AND EXPENSES 18,586	NET INVESTMENT 18,586	ADJUSTED NET INCOME	CHARITABLE PURPOSE	
TOTALS	18,586	18,586	0	0	
		,			

		Federal St	Federal Supporting Statements	ments	2014 PG 01	,,
Name(s) as shown on return THE SUEDHOFF MEMORIAL TRUST					Your Social Security Number 35 - 1969360	
	FORM 990PF,	\$	PART 1, LINE 25 - SUBSIDIARY SCHEDULE	ш	SUBSIDIARY STATEMENT	
DESCRIPTION CONTRIBUTIONS	REVENUE AND EXPENSES 140,000	NET INVESTMENT 140,000	ADJUSTED NET INCOME	CHARITABLE PURPOSE 0		
TOTALS	140,000	140,000	0	0		
						-
r						